



# Practitioner Membership Guidance – April 2016

This document provides guidance on the eligibility criteria and application process for Faculty of Public Health (FPH) Practitioner Membership. This guidance may be updated in future to reflect changes in Practitioner Membership as they are introduced.

Please contact [membership@fph.org.uk](mailto:membership@fph.org.uk) for any queries regarding this guidance.

## Current routes to FPH Practitioner Membership

### 1 – With UKPHR Registration

Anyone who is registered with the UK Public Health Register (UKPHR) as a Practitioner can join FPH by completing an application form and sending it to [membership@fph.org.uk](mailto:membership@fph.org.uk)

Anyone who is enrolled on a UKPHR practitioner registration scheme is also able to join as an Enrolled Practitioner Member and then will be upgraded to Practitioner Membership once their registration is complete.

### 2 – By demonstrating that you are currently working in core public health at the level of a practitioner, have a relevant professional registration and a relevant graduate qualification.

Anyone who does not have access to UKPHR registration as a practitioner or whom it would be inappropriate to register as a practitioner at this stage in their career can join FPH as a Practitioner member if they can demonstrate that they meet the following criteria and have this assured by an existing FPH Member or Fellow.

- A relevant professional registration
- A Graduate qualification in a relevant field or equivalent
- Current experience working at the level of a practitioner for at least 3 years

FPH acknowledge that it may not be appropriate for some senior individuals to obtain UKPHR practitioner registration if they are working in an academia or in a public health post at a level of seniority where it would be more appropriate for them to seek specialist registration as the next stage in their career.

Further details of this criteria and the policy context can be found later in this guidance in the section titled Background Information.

# Meaning of terms

## What do we mean by practitioner?

For the purpose of Practitioner Membership FPH defines practitioners as members of the public health workforce who work in various areas of public health practice, including health improvement, health protection and health and social care quality (often called “healthcare public health”). FPH considers practitioners to work in many places, for many organisations and in many areas of public health. They usually work at levels 5 to 7 of the current Public Health Skills & Knowledge Framework (PHSKF) but may also be working in advanced roles above level 7.

**This definition is based on the following three sources:**

- 1. The definition of PH Practitioners on the Health Careers website:**  
<https://www.healthcareers.nhs.uk/explore-roles/public-health/public-health-practitioner>
- 2. The description of the public health workforce in the Centre for Workforce Intelligence publication Mapping the core public health workforce:**  
<http://www.cfwl.org.uk/publications/mapping-the-core-public-health-workforce>
- 3. The Public Health Skills and Knowledge Framework (PHSKF):**  
<https://www.healthcareers.nhs.uk/about/resources/public-health-skills-and-knowledge-framework>

## What do we mean by core public health?

FPH considers core public health practice to be work which contributes to one or more of the three domains of public health:

1. Health improvement, including work to improve mental and physical health as well as health inequalities
  2. Health protection, including disease prevention, environmental health and urban planning
  3. Improving services for clinical effectiveness, efficiency, service planning, audit and evaluation, equity or clinical governance
- Public health intelligence which supports these three domains, including academic research, is also considered core public health.

This definition can be applied to anyone who considers public health as being part of their role.

## What do we mean by relevant professional registration?

FPH recognises UK professional registration which provides competency based assessments for professionals working at a level appropriate for public health practitioners. This includes but is not limited to the following registration types:

- Practitioner registration with the UK Public Health Register (UKPHR)
- The Health and Care Professionals Council (HCPC)
- The Academy of Healthcare Scientists
- The Nursing and Midwifery Council (NMC)
- The General Dental Council (GDC)
- The General Pharmaceutical Council (GPhC)
- The General Medical Council (GMC)
- Environmental Health Registration Board
- Registered Nutritionist with the UK Voluntary Register of Nutritionists (UKVRN)



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## What do we mean by relevant graduate qualification?

A qualification at level 6 or above in the [Regulated Qualifications Framework](#) (or equivalent), that is related to the practice of public health. In some cases both the level and relevance will be obvious, for example a Diploma or Masters in Public Health, but when this is not the case the applicant should explain the relevance of their qualification to public health.

## Applying for Practitioner Membership

Applicants can apply for Practitioner Membership as follows:

1. Complete and return an application form
  - a. If an applicant requires an FPH Member or Fellow to act as a referee but does not have any members available to provide this reference then their application will be forwarded to the Local Board Member or Faculty Adviser for the region in which they work at the time of applying and these FPH Fellows will be asked to act as a referee.
  - b. If neither the Local Board Member nor Faculty Adviser is willing or able to act as a referee then the application will be referred to an assessment panel for consideration.
2. If an application is successful then admission details will be sent to the applicant

## Future routes to FPH Practitioner Membership

### 1 – Practitioner Membership through Distinction

FPH intends to provide a route to Practitioner Membership for those who are not expected to go through the UKPHR practitioner registration process, or another applicable professional registration process. This is likely to be for applicants wishing to join FPH as a practitioner from outside of the UK and from those who are have reached very senior levels throughout their career thus far.

This route to membership will be opening in July/August 2016 in line with next annual round of Distinction and Honorary Membership nominations for FPH Membership and Fellowship categories.

### 2 – Practitioner Membership through other routes

FPH will continue to explore and develop criteria to admit other practitioners such as academics.

## Who cannot apply for Practitioner Membership

- Applicants must not be eligible for any other category of FPH membership in order to apply (excluding FPH's Student and Associate categories)

## **Background Information**

The FPH Board agreed in September and November 2015 that Practitioner Membership (PFPH) should be opened to registered practitioners with the UKPHR and to practitioners who are registered with a relevant professional regulator who are working in core public health.

There is a specific need to do this as the current practitioner registration scheme, which FPH support, is particularly good and rigorous but is not yet equitable for everyone to access because of geographical distribution, and there are some very experienced people in other professions working in senior public health posts and academia where it is not appropriate to go back and complete the registration scheme, but need membership to raise and maintain their standards. The UKPHR currently have 190 practitioners registered and around 450 individuals enrolled on practitioner registration schemes.

FPH's specialist membership has multiple routes to reflect the nature of the multidisciplinary workforce. The vast majority of members join FPH by being registered as specialists but FPH has always acknowledged the skills and contributions of those who work at specialist level roles. This has been through the Honorary and Distinction grades of Membership, whereby the Distinction grades in particular require parity with specialist members. It should be noted that nominees for Membership and Fellowship through Distinction are routinely rejected on the grounds of needing to complete specialist training as a more appropriate route into FPH membership and this shows that this route is not a replacement for specialist training and does not undermine the standards of specialist registration.

FPH intends to apply the same principles to Practitioner Membership, whereby the standard and expected route for practitioner members may eventually come directly through UKPHR registration once it has reached national coverage. Nonetheless, in order to meet the agreed objectives within the organisational strategy FPH needs to acknowledge the skills and contributions of others who work at a practitioner level and where UKPHR registration may not be available nor appropriate. The proposed criteria and admission process uses the principles applied to specialist members to account for these gaps and additional career paths for practitioners. Also, as the practitioner workforce is much larger than the specialist workforce the backgrounds which practitioners not registered with UKPHR come from are much broader and higher in number.

## **Proposed routes to Practitioner Membership**

The FPH Board agreed the following proposal on 21<sup>st</sup> March 2016.

1. We introduce a system of "Grandparenting" of existing individuals who are already working at the level of a practitioner into this new category of membership, PFPH.
2. This "Grandparenting" will be time limited for a minimum of two years. This grandparenting process will form the next stage in a series of ongoing developments to Practitioner Membership and may be adjusted at a later date as outlined in this guidance.
3. We describe individuals accepted via "Grandparenting" as founding practitioner members of FPH, to distinguish them from those entering via UKPHR registration, or any other new as yet undefined access routes if these come to exist.
4. This is consistent with the foundation members of FPH: During the first years after the founding of the FPH registered medical practitioners practising in the UK who had a relevant graduate qualification, had experience in community medicine and had been promoted above the basic grade were eligible for election to membership without examination.



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5. At present, a practitioner will be admitted to PFPH if they have:

- Professional registration (e.g. UKPHR, GMC, NMC, HCPC, GPhC, AHCS etc.)
- Graduate qualification in a relevant field or equivalent
- Current experience working at the level of a practitioner for at least 3 years (working at the level of a practitioner signed off by member/fellow)

This is consistent with the Board approval in November 2015 that it should be determined by registration with a professional regulator, qualifications and day to day work.

6. By allowing experienced people working in public health from these groups access to PFPH will also give others in those groups aspiration to come in through UKPHR registration in due course.

7. In the longer term, UKPHR practitioner registration may become the standard route to PFPH, if registration becomes accessible across the whole UK to individuals with diverse professional backgrounds and work settings. At this point FPH may move from “Grandparenting” to “Practitioner Membership through distinction” for applicants only in exceptional circumstance.

8. FPH may introduce other methods of entry in the longer term, e.g. Examination, Graduate qualifications accredited by the FPH and/or other robust assessment process, if practitioner accessibility remains a challenge for UKPHR.

9. It will be for the FPH to decide at a later date if the UKPHR practitioner scheme has developed the inclusiveness we require.

10. The grandparenting scheme will also form part of the continued development of the routes available for Practitioner Membership. Subsequent routes, such as Practitioner Membership through Distinction, may include eligibility criteria which provides membership access to those without access to practitioner registration or a registration with a relevant professional body.

11. The “Grandparenting” process accepts as PFPH anyone who is currently working at the level of a practitioner who has professional registration and a relevant graduate qualification. This does NOT involve an assessment of competence by the Faculty. Instead it is based on the professional obligation for developing and enhancing competence arising from registration; an externally quality-assured graduate qualification; and a testimonial (nomination) from one Member/ Fellow of the Faculty saying that the applicant is currently working at the level of a practitioner.

12. We define the statement describing what the level of working as a public health practitioner is or can do, that a Member/Fellow of FPH is required to sign as part of the testimonial:

**For the purpose of PFPH the FPH definition of “working at the level of a public health practitioner” is based on the Public Health Skills & Knowledge Framework (PHSKF), namely “members of the public health workforce who work in various areas of public**

health practice, including health improvement, health protection and health and social care quality (often called “healthcare public health”).

**Practitioners work in many places, for many organisations and in many areas of public health. They usually work at levels 5 to 7 of the current Public Health Skills & Knowledge Framework (PHSKF) but may also be working in advanced roles above level 7.”<sup>1</sup>**

13. The assessment that an individual is currently working at the level of a practitioner is therefore done by Members/Fellows and not a FPH assessment process, which would take considerable time to put in place and jeopardise the delivery of the organisational strategy. Any assessment of competence at this point in time, would need to be robust, and FPH would need the capability AND capacity to deliver, which cannot currently be guaranteed.

14. We are therefore not claiming that founding practitioner members of FPH have been subject to a robust assessment of competence by FPH, only that they are currently working at the level of a practitioner. This is in line with all “Grandparenting” type arrangements.

15. Recognising that not all applicants for PFPH may know or have access to FPH Fellows, and the importance of PFPH being accessible for these people too, a simple application process is put in place:

- In application, if an applicant does not have access or know a Fellow they will be asked to summarise why they consider themselves to be working at the level of a PH Practitioner.
- This application will be referred to the LBM and FA for the relevant region who will determine, through local enquiry or direct discussion with the applicant, if they should support the application.

16. If any applications for PFPH received by FPH are unclear or open to question they will be referred to an assessment panel comprising the Vice-President (Standards), a member of the PH Standards & Knowledge Committee and a member of the Practitioner Development Group. This panel will also, from time to time, audit a selection of all applications to ensure their quality and the reliability of the system.

17. All PFPH members will need to be registered for CPD and will be subject to the existing mechanisms to ensure compliance with the CPD requirements in order to maintain their membership. The requirement to participate in the FPH CPD scheme, together with the professional obligation to developing and enhancing competence arising from registration with a professional regulator, will ensure that individuals who are PFPH identify and address any deficiencies in their existing competence.

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***The description of the public health workforce in the Centre for Workforce Intelligence publication ‘Mapping the core public health workforce’.***

<http://www.cfwi.org.uk/publications/mapping-the-core-public-health-workforce>

***The Public Health Skills and Knowledge Framework (PHSKF).***

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18. FPH will continue to encourage individuals with PFPH, where appropriate, to seek registration with UKPHR as a practitioner or accredited advanced practitioner.
19. Whilst FPH recognise and support the UKPHR practitioner registration scheme, FPH reserves the right to set the criteria for its membership in order to deliver the agreed organisational strategy. This also means that the grandparenting route could become part of the standard route for Practitioner Membership after the time limited period if FPH chooses.
20. FPH may choose to introduce other categories of membership, such as Academic, Advanced or Assistant Practitioner in due course.
21. FPH will continue to explore and develop criteria to admit other 'practitioners' such as academics and others working in public health teams who are not registered with a professional regulator and for whom the UKPHR registration route might not be available. FPH will also explore developing criteria for practitioners to be admitted via the distinction route.
22. In due course, therefore there will be several entry routes to Practitioner Membership (PFPH):
  - Practitioner Registration with the UKPHR
  - Grand-parenting / Alternative registration and demonstrable experience (as described above)
  - Distinction route
  - Other new routes for those who the above routes may not be appropriate

## **Appendix 1 – Examples for each route**

### **Example 1 – A practitioner with access to UKPHR registration and without access to another relevant professional registration**

They can apply using their UKPHR registration number once they are registered

They can also become an Enrolled Practitioner member or Associate until they gain their UKPHR registration

### **Example 2 – A practitioner without access to UKPHR registration and without access to another relevant professional registration**

They cannot apply through the grand-parenting process as they do not meet the eligibility criteria.

They may be able to be nominated for Practitioner Membership through the planned distinction route.

### **Example 3 – A practitioner with access to UKPHR registration but has a relevant professional registration, relevant graduate qualification and at least 3 years of experience as a practitioner**

They can apply through the grand-parenting process and demonstrate their registration, qualification and experience. They will also be able to be nominated for Practitioner Membership through the planned distinction route.

Theoretical Case Study: A NMC registered school nurse working in an area with a UKPHR Practitioner registration scheme would be able to apply for Practitioner Membership.

### **Example 4 – A practitioner who does not have access to UKPHR registration but has a relevant professional registration, relevant graduate qualification and at least 3 years of experience as a practitioner**

They can apply through the grand-parenting process and demonstrate their registration, qualification and experience. They will also be able to be nominated for Practitioner Membership through the planned distinction route.

Theoretical Case Study: An Arts Therapist registered with the HCPC working in an area without a UKPHR practitioner registration scheme would be able to apply for Practitioner Membership.