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Reporting Possible Fitness to Practise Concerns to Regulatory Bodies for registered Healthcare Professionals Procedure

Introduction and Aim

This document describes the procedure for determining when, and to whom, any concerns around Fitness to Practise (FtP) should be reported. It should be read in conjunction with the linked relevant policies, procedures and written control documents as outlined below.

It outlines the relevant regulatory bodies for staff employed within Public Health Wales (PHW) and responsibilities of staff. It details the arrangements for timely referral of any concerns, how they will be managed and the requirement for discussion with the appropriate regulatory body.

Linked Policies, Procedures and Written Control Documents

[All corporate policies and procedures are available on the Public Health Wales website](#)

[All Wales Disciplinary Policy and Procedure](#)

[Nursing and Midwifery Council \(NMC\) Managing Concerns: a resource for employers](#)

[Nursing and Midwifery Council. The code. Professional standards of Practice and behaviour for nurses, midwives and nursing associates](#)

[Health and care professions council \(HCPC\) Standards of conduct, performance and ethics](#)

[Digital Health and Care Wales Upholding Professional Standards in Wales](#)

[General Medical Council Professional behaviour and fitness to practise](#)

[General Dental Council \(GDC\). Fitness to Practice](#)

[UK Public Health Register \(UKPHR\) Concerns about a UKPHR Registrant](#)

Scope	
The procedure will apply to the management of any concerns around FtP for all regulated registrants across PHW. A list of healthcare regulatory professions and bodies can be found at UK regulated professions and their regulators - GOV.UK (www.gov.uk)	
Equality and Health Impact Assessment	An Equality, Welsh Language and Health Impact Assessment has been completed and can be viewed on the policy webpages.
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Disclaimer

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Summary of reviews/amendments				
Version number	Date of Review	Date of Approval	Date published	Summary of Amendments
1	2022	08.12.22	21.12.22	First Procedure (Fitness to Practice Procedure)
2	2023	17.02.25	Tbc	Revision of whole procedure to align with All Wales Disciplinary Policy and Procedure and various regulatory body FtP processes.

1. Introduction

Professional regulation is intended to protect the public, making sure that those who practise as healthcare professionals are doing so safely. It is a contractual condition of employment that a health professional maintains their registration throughout their employment with Public Health Wales (PHW), and it is their personal responsibility to keep their professional registration up to date.

Additionally, PHW has a responsibility to ensure that recruitment and ongoing human resources processes are in place to ensure professional registration compliance. It does this via a broad range of organisational arrangements designed to support registered healthcare professionals in performing their role safely and effectively. PHW delivers these commitments through:

- Processes to safely recruit and induct new employees.
- Performance and appraisal processes.
- Monthly registration audit of professional registration
- Annual audit verifying active professional registration with the relevant regulatory bodies.

Where concerns are raised about the professional practise of registered healthcare professionals, hereby referred to as Fitness to Practise (FtP), PHW will ensure a fair, consistent and robust process is followed to respond quickly and effectively to address these concerns in line with the relevant regulatory bodies thresholds and requirements for referral to them.

2. What is FtP?

Being fit to practise requires registered healthcare professionals to have the skills, knowledge, health and character to do their job safely and effectively. This may also include conduct outside of the working environment, if this might affect or undermine public confidence.

Further details in relation to the relevant regulatory body's standards for FtP can be found:

[NMC/HCPC – The Health Professions Order 2001](#)

[GMC – Good Medical Practice](#)

[GDC – Standards for the Dental Team](#)

[UKPHR – Fitness to Practise Rules](#)

2.1 When should concerns be escalated?

Initially, concerns regarding the capability, conduct or performance of a registered healthcare professional should be addressed informally through local

mechanisms e.g., management appraisal and/or one to one meeting with the professional's line manager/consultant/lead clinician. In the majority of cases, matters can be dealt with informally and without the recourse to formal procedures.

However, if formal procedures are invoked, those registrants who are employed under the Agenda for Change contract should be managed initially under the All-Wales Disciplinary Policy and Procedure. For all other registrants (non Agenda for Change), the appropriate Regulatory Body's process should be followed.

Nursing and midwifery regulated professionals will be the responsibility of the Nursing, Quality and Integrated Governance (NQIG) team, whilst all other regulated professionals will be the responsibility of the Office of the Medical Director (OMD).

If a referral to the Regulatory Body is deemed appropriate, the Executive Director NQIG and/or the Executive Medical Director must be notified by the line manager via the Professional Lead Nursing Midwifery and Standards Manager/OMD at phw.omb@wales.nhs.uk respectively, and a final decision will be made on the appropriateness of a referral to the Regulatory Body.

Following any such referral, FtP investigations should comply with the Regulatory Body's procedure (links found in 'Linked Policies, Procedures and Written Control Documents', Page 1). Further guidance is provided in the flowchart at Appendix A.

2.2 FtP Risk Assessment and review

If, after an initial assessment of the situation, a concern still exists regarding the registered healthcare professional's FtP, a risk assessment should be undertaken (Appendix B) to determine an appropriate course of action/decision. Risk assessments should be robust, documented and completed by the line manager, or Professional Lead, with the support of the People & OD (POD) Team. The Executive Director NQIG and/or the Executive Medical Director should be informed at the earliest stage.

PHW has a responsibility, as the employer, to ensure that concerns are escalated to the relevant regulatory body as well as ensuring fairness and equity to the healthcare professional.

Depending upon the nature of the information or evidence, a decision may be made whereby:

- No action is required
- Informal action is required
- A formal investigation is required
- Advice sought from the Regulatory Body.

- Immediate referral to the Regulatory Body.

The member of staff concerned will then be informed by their line manager of any decision or outcome at the earliest opportunity.

3. Restriction of Practice and Exclusion from Work

Where serious concerns are raised about a healthcare professional, there may be a requirement to consider whether a restriction of practice is appropriate, as an alternative to exclusion. Where this is being considered, advice should be sought from the appropriate regulatory body with support from People and OD.

Exclusion from the workplace should be an exception with other options being considered/utilised first such as redeployment to another suitable role or supervision being in place so the individual can remain in their role during any proceedings.

Generally, exclusion should only be considered and enacted if there is a reasonable believe that it would protect the following:

- The investigation, e.g. there is concern about evidence being damaged or witnesses being influenced and/or prejudice to any investigation
- The organisation, e.g. there is a genuine risk of harm to the public, patients, colleagues, property or organisational reputation
- Other colleagues
- The healthcare practitioner under investigation

In exceptional circumstances, an immediate time-limited exclusion may be necessary following a critical incident or other event which necessitates the healthcare practitioner's immediate exclusion from the workplace by an individual authorised to do so. This should be done with POD support, and careful documentation of the process (see later).

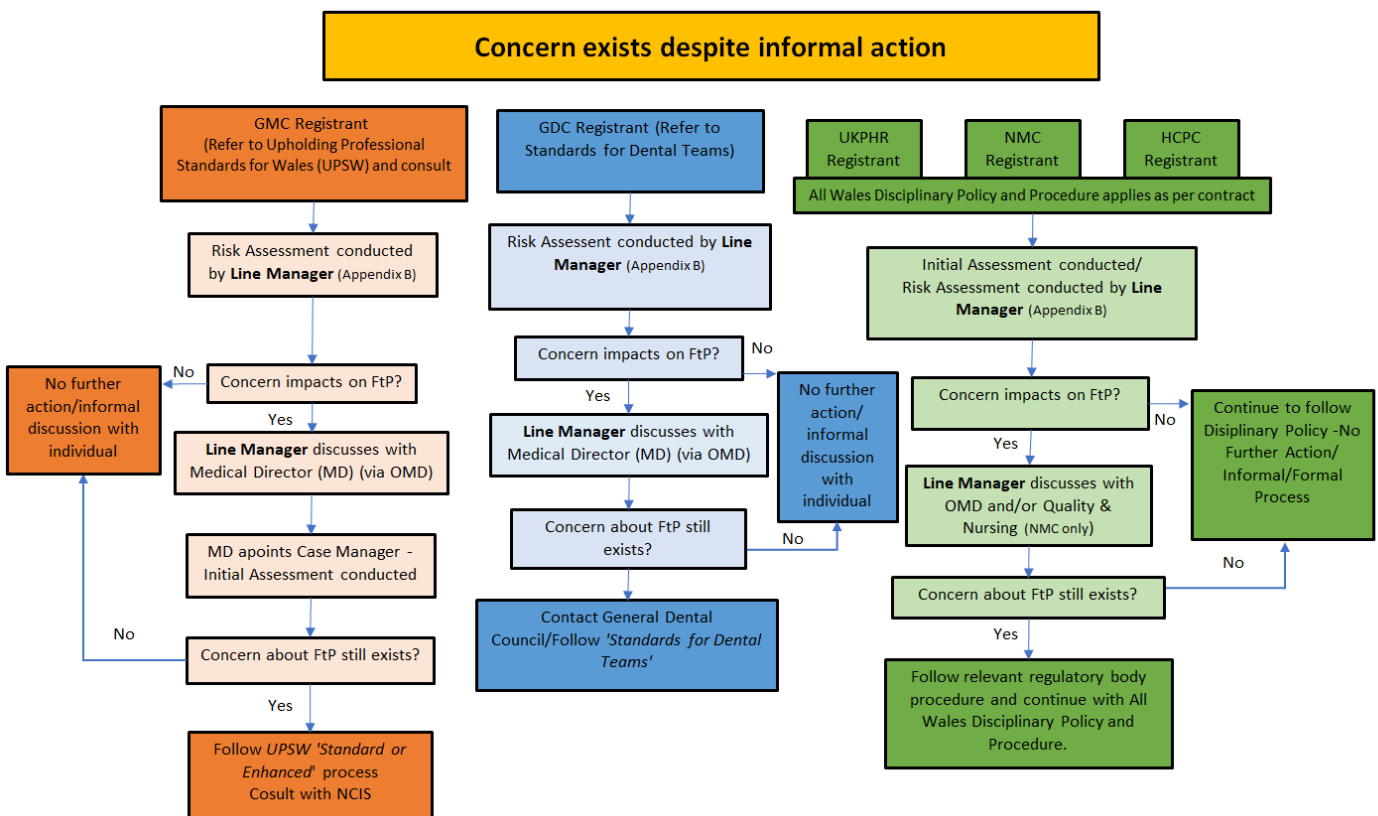
The healthcare practitioner's line manager will be responsible for conducting the risk assessment and making a decision (with support of POD and the Professional Lead) in relation to an exclusion from the workplace. If serious concerns are raised in an Out of Hours (OOHs) situation, the senior person available should conduct the risk assessment and make a decision to instruct the practitioner to cease working. This should then be discussed with the Line Manager and People and OD Team at the earliest opportunity who can then make a decision regarding formal exclusion.

In the case of GMC/GDC registrants, the Executive Medical Director must inform Welsh Government as soon as a decision to exclude a registrant has been made, providing specific details including the name and grade of the practitioner, and reason for exclusion. This information must be updated at 3 monthly intervals.

Ensure comprehensive records are maintained and procedures robustly followed and, for any referral relating to a potential FtP, the employee’s wellbeing must be managed with relevant support and referrals to appropriate services.

Appendix A

PROCESS FOR MANAGING FtP CONCERNS – REGULATED HEALTHCARE PROFESSIONALS, PHW



Appendix B

RISK ASSESSMENT - REGISTERED HEALTHCARE PRACTITIONER CONCERNS

NAME:

Risk Assessment Decision Making Guidance				
For each of the five categories listed in the risk assessment score sheet, you should carefully consider the evidence/concern and determine the level of severity using the detailed guidance in the 'Evidence and Insight present' detail. Each category should include a robust commentary of the level selected.				
	Risk Assessment Decision Making Guide			
	Level of Severity			
Evidence & Insight Present	Strong evidence to support concern, individual has no insight or willingness to 'put things right'	Strong evidence to support concern, individual has insight and willingness to 'put things right'	Evidence is present to support the concern	Nil or minimal evidence of the concern
Line Manager Action Required	Discuss with POD and Professional Lead, inform Exec Directors	Discuss with POD & Professional Lead, Inform Exec Directors	Discuss with POD & Professional Lead Consider referral to OH	Discuss with POD Consider referral to OH
Line Manager Decision Required	Formal Investigation required? Referral to Regulatory Body? Exclusion from role?	Formal Investigation required? Advice sought from Regulatory Body?	Formal Investigation required? De-escalate to informal action? Consider obtaining advice from Regulatory Body?	Informal action required? No further action? Escalate to Formal Investigation?

Note: Action and Decision should be based on the highest level of severity recorded across any of the categories. Eg, only one of the categories needs to score in the 'red level of severity' for the line manager to consider formal investigation, referral to regulatory body, exclusion from role.

Conduct – Conduct refers to the registrant’s attitude or behaviour at work, where the person generally has control over their actions and conduct. Consider if there is a wilfulness from the registrant surrounding the concern. Conduct can include issues with probity, allegations of bullying/harassment, wilful failure to follow recognised practice and organisational policies, authorised absence as well as harm to patients and clients.

Capability – Capability refers to an employee’s skills, ability, aptitude and knowledge in relation to the role they are employed to do. Concern over capability is when an employee is unable to achieve the expected standards of performance due to lack of skill, ability or training. Examples could include poor clinical practice, language difficulties, working below the level expected.

Health – Registered healthcare practitioners should ensure they look after both their physical and mental health and should not undertake activities which they knowingly are unwell enough to perform. They must not put their patients or members of the public at risk because of their own health issues. Example would be non-disclosure of a condition therefore putting patients/public at risk.

Professionalism – Registered healthcare practitioners not only represent their employer but also their Professional Regulatory Body and should practice their profession in line with the requisite standards. Examples could include, inappropriate behaviour, complaints from colleagues/patients, abusing their power and or position, deliberately withholding information, misleading actions.

History – Consider whether this concern is a 'first time' occurrence. Is it a repeated occurrence and what was the timespan between. Consider if there is a pattern of behaviour and whether there has been any previous informal/formal action taken.

Risk Assessment Score Sheet

Conduct				
Severity Level				
Comment				

Capability/Competence				
Severity Level				
Comment				

Health				
Severity Level				
Comment				

Professionalism				
Severity Level				
Comment				

History				
Severity Level				
Comment				

Other Concerns/Considerations

Is there a safeguarding issue? Yes/No If yes, please give details:
Is there Police Involvement? Yes/No If yes, please give details on the following: Has a common law notification of police involvement been received for the individual? Has a professional strategy meeting been convened under section 5 of the Wales Safeguarding Procedures? What was the outcome? Was there a recommendation for a referral to a regulatory body?
Should NHS Counter Fraud be contacted? Yes/No If yes, please give details:
Should the practitioner be excluded from the workplace? Yes/No If yes, include robust reasons for the decision to exclude:
Could the employee be given support/supervision during the period of any FtP process allowing them to remain in the workplace? Yes/No Comment required for Yes (describe arrangements) & No answer:
Support services discussed/referred to? All staff Employee Assistance Programme – Vivup (0800 023 9387) vivup.co.uk (Employee Access Code: 108611) All healthcare staff – Canopi (0800 058 2738) canopi.nhs.wales Occupational Health Service - 0300 123 9850 GP

Action Recommended:

Signed:
(Line Manager)

Date:

Send a copy of this Risk Assessment to POD and maintain a copy on the employee's electronic file (held by the Line Manager)