

Specialist Public Health: Routes to the Register

Introduction.

The aim of the Register Board is to promote public confidence in specialist public health practice in the UK through independent regulation. There have been substantial changes in public health since the Register Board was established.

As a relatively new regulatory body for public health and because of the changes that are taking place within public health, the Board believes that we need to ensure that our processes are reviewed regularly and are appropriate to the changing patterns of workforce planning and career development.

Background

In the early documentation produced by the Tripartite Group and taken over by the Register Board it was acknowledged that although, the main route to registration in the long term would be via prospective training programmes (Standard Route), an alternative route would be required, and indeed such a route is commonly operated by the longer established regulatory bodies.

The Board has pioneered the use of Retrospective Portfolio Assessment and up to the present this has been the predominant method of registration. Initially, this was for those working as generalists, but is now primarily for those in defined areas of specialist public health. This process provides recognition of competence for those working at senior (consultant/specialist) level.

This acknowledges that there are, and will continue to be, those working at senior levels, for example overseas or in different settings, who will need to be able to demonstrate their competency at specialist level and for whom it would not be appropriate, or in some cases possible, to undertake formal training.

The Register has two arms: Generalist and Defined Specialist. It should be noted that simultaneous registration as a generalist and defined specialist is possible. The two arms of the Register are of equal status. Candidates can submit the appropriate limited portfolio for assessment to convert either way. It is considered that this enhances possible career change.

Routes to the Register

1. Standard.

The main route to registration will be through approved prospective education and training programmes run by appropriate qualifying bodies. The Board currently recognises two programmes (1) the Faculty of Public Health and (2) the Royal College of Surgeons training programme in dental public health. Following satisfactory completion of training trainees can apply for admission to the register without further assessment.

2. Assessment for Defined Specialists. (Retrospective Portfolio Assessment)

The Defined Arm of the Register was opened in June 2006. The framework for the retrospective portfolio assessment process will be reviewed in 2010. It is anticipated that as there are as yet no prospective standard training programmes, this will remain as an important route to the Defined Arm of the Register for some considerable time.

3. Recognition of Specialist Status: Exceptional Route (Retrospective Portfolio Assessment)

Prospective training programmes exist, as described above, in only three out of the four UK countries at the current time. It is envisaged that this route to the General arm of the Register will continue to be required for those who for reasons have been unable to avail themselves of a standard training and education programme. The Board requires that those who wish to apply for Recognition of Specialist Status have to justify submissions via this route. As indicated earlier this is for those already in senior positions. Normally an applicant will have held a senior public health post for several years which will have involved the applicant in making independent professional judgements as part of that role.

Routes 2 and 3 are operated directly by the Register Board, through its existing panel of assessors.

4. Developmental Route

The UKPHR Board approved this new route in January 2009. The Chartered Institute of Environmental Health will be responsible for the management of the route. It uses the same assessment process as for the other two portfolio routes, but is a series of portfolio submissions that, over time, demonstrates that the applicant has the required competencies of a defined specialist. At the initial submission, the applicant will indicate how they meet some of the required competencies and if successful these are banked. The applicant will be required to submit a structured progressive plan for satisfying the remaining competencies

5. Dual Registration.

This is for those who have been accepted onto the GMC and GDC Specialist Registers in public health and wish to be registered also with the UK Public Health Register. The existing process whereby those who have been accepted onto these Specialist Registers without further assessment will remain.

Applications

Full details will be found on the website at www.publichealthregister.org.uk