

# Attitudes of employers to practitioner registration

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## Aim

- To understand the attitudes, policy and practice of employers of public health practitioners towards practitioner registration across London and South East England.

## Methods

- Qualitative study, semi-structured interviews
- Purposive sampling of line managers and workforce leads
- Recruitment via
  - Notices in public health e-bulletins
  - Health Education England contacts
  - Following up practitioner job ads
- Thematic analysis

# Background

- National policy (UKPHR, Health Education England, Public Health Wales etc.) encourages public health practitioner registration
- Uncertainty degree to which employers may encourage or support registration
- UKPHR Public Health Heroes campaign and Employers Toolkit
- Limited previous research on this issue (Evans & Gray, 2019)

# Background (cont.)

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Original Research

## How important is public health practitioner registration to UK public health employers?

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ABSTRACT

Objectives: The objective of this study was to understand the extent to which public health practitioner registration is encouraged by UK employers through recruitment, i.e. by including registration as an essential or desirable criterion in job descriptions and person specifications.

Study design: A repeated survey was conducted on two main UK public health job websites.

Methods: Data were collected via a repeated structured search of all public health practitioner posts advertised in two specified weeks in March and September 2018 on two main UK public health jobs websites: local government jobs and National Health Service (NHS) jobs.

Results: Fifty-six posts were identified for inclusion in the study. Only one post (2% of the total) required UK Public Health Register (UKPHR) registration or working towards registration. It was more common but still a minority (13 or 23%) of posts to require registration with any relevant register (e.g. UKPHR, Nursing and Midwifery Council or Health and Care Professions Council). Most employers demonstrated a desire for flexibility with none requiring an MSc Public Health and a majority requiring any relevant degree or equivalent experience (46 or 82%). Evidence of continuing professional development was also commonly required (34 or 61%).

Conclusion: There is currently a mismatch between UK national policy support for public health practitioner registration and the value that registered practitioners place on it and the recruitment policies of many UK public health employers.

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**Introduction**

Government policies in the UK emphasise the importance of developing capacity in the public health workforce to meet the public health challenges of the twenty-first century: non-communicable diseases such as cancer, diabetes and heart disease, and continuing health inequalities.<sup>1</sup> The public health workforce is conventionally categorised into three groupings: two core categories of public health specialists and public health practitioners and a third category of the wider public health workforce of up to 15–20 million in the UK including teachers, police, town planners, housing officers, prison and probation officers, postal workers and engineers.<sup>2</sup> Public health specialists are the most easily defined of the

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**Table 2 – Essential and desirable criteria.**

Criteria	Essential, n (%)	Desirable, n (%)
MSc Public Health specifically	0 (0%)	2 (4%)
Postgraduate qualification relevant to public health or equivalent experience	12 (21%)	8 (14%)
Relevant degree or equivalent experience	34 (61%)	1 (2%)
UKPHR registration or working towards registration	1 (2%)	0 (0%)
Willingness to work towards UKPHR registration	2 (4%)	0 (0%)
Professional registration (e.g. with UKPHR, NMC, etc.)	13 (23%)	4 (7%)
Evidence of CPD	34 (61%)	0 (0%)

NMC, Nursing & Midwifery Council; UKPHR, UK Public Health Register; CPD, continuing professional development.

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# Profile of participants

GMC specialists	2	Local authority	24
UKPHR specialists	8	Public Health England	6
UKPHR practitioners	8	Third/community/voluntary sector	1
Other registers	2	NHS	0
Non-registered*	11	Private sector	0
Total	31	Total	31
* Includes 1 working towards UKPHR specialist registration by portfolio			

# Range of attitudes to practitioner registration

- As essential for ensuring practitioner competency and professional development
- As desirable for filling gaps in professional development
- As one of several potential options for professional development
- Largely as a means to document existing practitioner competency

# Registration as one of several pathways to development

“So we're very, very strong on professional development within our particular public health team, and we supported a number of people to go down different routes. So one of the things that we've done is not offer a single route, so we've had internal people that have been supported to go through the [specialist] portfolio route and are now public health consultants. We've had people that have gone through the [practitioner] registration route and have successfully done that. We've had people that have gone on to do undergrad and postgrad public health qualifications as well.”

Senior Public Health Manager (P26)



# Relative importance placed on registration versus MSc

- Both registration and MSc valued
- Often seen as equally valued alternative pathways for professional development
- Viewed as a personal choice for practitioners
- Some managers valued registration more as demonstrates competency in practice
- Others valued MSc more as developing deeper/wider knowledge and new skills

# Valuing registration over the MSc

“I think for me personally speaking, having somebody being able to illustrate that they’ve been through the registration process, that really shows their commitment to CPD, but also their ability to prove that they have been working at the level we need them to work at, that level 5 and above, and can illustrate their competence across a whole range of indicators. So actually, the value of UKPHR registration, if I'm assessing it, I'd be much more excited to see that than a Masters degree.”

Public Health Principal (P25)

# Valuing MSc over registration

“It feels to me that the practitioner scheme formalizes the fact you've got that experience, you've got that breadth of work, but it doesn't then give you additional keys, additional skills, addition whatever. So as long as that MSc person had that relevant experience but they just hadn't gone through formalizing it into a portfolio with the commentaries etc. I think the MSc broadens your horizons more about what public health is, about what the determinants of health might be ... And I would therefore see them as someone who could be used in a whole different range of ways, maybe more so than someone who has simply done that more retrospective collation of work.”

Consultant in Public Health (P23)

# Registration used to assess competency even when not a stated criteria

- Evidence of CPD often an essential criteria even when registration is not – and registration seen as good evidence of CPD
- Registration may ensure a candidate is shortlisted even when not a stated criteria
- Those pursuing registration are often those regarded as the more able

# Hidden value of registration

“So I’ve got my public health [practitioner registration], I’ve been through that process myself ... For me the value of doing it was about demonstrating my competence and being able to stand and say I am a competent public health practitioner. In terms of value it probably hasn’t impacted ... except I guess I could say it has, in helping me get the workforce development role, being seen as an eligible applicant for that, but I very much feel that if I was to move within the public health sphere I could say, I am a public health practitioner, and that would be seen positively.

Workforce Development Lead (P8)

# Benefits of registration hard to assess

“I mean, I would imagine that that it tends, it's a little bit chicken and egg. I imagine that people who are showing promise and dedication tend to have it suggested to them as something that's worth doing, and obviously it will help develop them in the process, but it's often people who are developing a lot anyway.”

Consultant in Public Health (P3)

# Additional emerging themes

- Strong views on the need for additional level of registration for those working at public health principal/advanced practitioner level
- (Almost) universal welcome for introduction of public health practitioner apprenticeship
- Widely shared desire for more step-wise career pathways in public health

# Need for registration level for senior practitioners

[Public health principals] are reluctant to do what they see as a retrograde step [practitioner registration], because they can already do it, and it seems a rubber stamp, and I think that's partly a function of the fact that the practitioner scheme has come in over the time when they were already at a point where they had already developed those skills.

Consultant in Public Health (P10)



# Increasing reference to registration in job descriptions

<b>Education, Knowledge, Skills &amp; Abilities, Experience and Personal Characteristics</b>	<ul style="list-style-type: none"> <li>• Degree/ HNC or equivalent, or substantial relevant experience in a relevant subject.</li> <li>• May require a specialist technical qualification or membership of an appropriate professional institution.</li> <li>• Significant practical or professional experience and understanding of a specialist area or supporting service teams and/or providing support to the public.</li> <li>• Comprehensive understanding of subject matter, legislation, principles and practices relevant to the technical area.</li> <li>• May require previous management experience including staff supervision, development and organisational skills.</li> <li>• Proven ability to apply project management principles and techniques to manage a range of projects through to completion.</li> <li>• Proven ability to establish and maintain highly effective working relationships with a range of stakeholders.</li> <li>• Comprehensive knowledge of computerised business systems.</li> <li>• Proven written and oral communication with the ability to influence and work in collaboration with others.</li> <li>• Ability to understand, meet and exceed customer expectations.</li> <li>• Proven problem solving skills, and the ability to exercise high levels of initiative to devise and implement workable solutions.</li> </ul>
<b>Details of the specific qualifications and/or experience if required for the role in line with the above description</b>	<ul style="list-style-type: none"> <li>• A First Degree in health, social sciences, or a related subject and desirably a Masters degree in Public Health/Health Promotion or a relevant subject (or equivalent knowledge gained through experience/ post-graduate training). Previous experience in field of mental health is highly desirable</li> <li>• Up-to-date registration with the UK Public Health Register (UKPHR) for public health practitioners or be prepared to become a UKPHR registered public health practitioner within two years of commencing role</li> <li>• Evidence of continuous training and personal development for example in: public health topic areas, evaluation, research methods, project management, influencing others, commissioning.</li> </ul>

<b>Person Specification</b>		
<p>Should focus here on describing the qualifications, skills, knowledge and experience an individual will require to <u>successfully undertake</u> the role. These <u>should be split</u> between essential and desirable. There is no need to repeat value requirements or corporate responsibilities.</p>		
<b>Qualifications</b>	<b>Essential</b>	<b>Desirable</b>
Has attained a post-graduate Public Health qualifications such as the Masters in Public Health or Public Health practitioner status		Y
Evidence of continuous personal and/or professional development	Y	

# Reasons employers don't include registration in job descriptions

- Inertia (easy just to reuse existing job descriptions/not got round to including it)
- Inclusivity (making posts open to applicants with non-traditional backgrounds)
- Equity (recognising not all practitioners have had the opportunity to register)
- Not wishing to restrict the field when seeking applicants with specific knowledge or skills

# Conclusions

- Practitioner registration is valued by many employers
- Still only appearing in a minority of job ads
- Registration not included in job descriptions due to diverse factors (inertia, equity, time)
- But value also demonstrated in 'hidden' aspects of recruitment and promotion

# Questions ...

- How to overcome the inertia that leaves practitioner registration out of job descriptions?
- How to encourage more use of ‘willingness to work towards registration...’?
- How to encourage inclusion of registration as ‘desirable’ if ‘essential’ deemed inappropriate?
- What more can you personally do?
- What more should UKPHR be doing?