

Council, 9 February 2012

Regulation of non-medical public health specialists

Executive summary and recommendations

**Introduction**

On 23 January 2012, Andrew Lansley MP, Secretary of State for Health, announced plans to ensure that non-medically qualified public health specialists are appropriately regulated.

The Department of Health also wrote to confirm that the HPC would be asked to regulate this group (appended). The planned regulation of this group by the HPC has now been confirmed to the public health sector via the Department of Health's 'Transforming Public Health' bulletin.

**Decision**

The Council is invited to discuss the attached paper.

**Background information**

- Department of Health, 'Helping people live healthier lives: the future for public health' (news release)  
[www.dh.gov.uk/health/2012/01/future-for-public-health/](http://www.dh.gov.uk/health/2012/01/future-for-public-health/)
- Department of Health, Transforming Public Health Bulletin  
[phbulletin.dh.gov.uk/2012/01/23/transforming-public-health-issue-5-january-2012/](http://phbulletin.dh.gov.uk/2012/01/23/transforming-public-health-issue-5-january-2012/)
- As outlined in paper.

**Resource implications**

- None at this time

**Financial implications**

- None at this time

**Appendices**

- Department of Health letter to Marc Seale dated 23 January 2012

**Date of paper**

30 January 2012

## Regulation of public health specialists

This short paper sets out background information about the proposed regulation of non-medical public health specialists.

### 1. Public health and public health specialists

1.1 The term public health specialist is used to include the following groups.

- **Medical doctors** - on the public health medicine specialist register held by the General Medical Council (GMC).
- **Dentists** - on the dental public health specialist list held by the General Dental Council (GDC).
- **Non-medical public health specialists** - a diverse group which might include nurses, environmental health officers and others from non-medical backgrounds; a voluntary register is administered by the UK Public Health Register (UKPHR).

1.2 Public health has been defined as ‘the science and art of preventing disease, prolonging life and promoting health through the organised efforts of society’.<sup>1</sup> It includes ‘monitoring the health of a population, identifying its health needs, fostering policies that promote health, and evaluating health services’.<sup>2</sup>

### 2. Regulation

2.1 In November 2010, the Department of Health (DH) published a review conducted by Dr Gabriel Scally on the regulation of public health professionals.<sup>3</sup> The review made a number of recommendations to the Chief Medical Officer, including the following.

- The HPC should regulate public health specialists (excluding public health doctors and dentists) as an additional profession.
- The title ‘Consultant in Public Health’ and, if possible, ‘Director of Public Health’, should be protected for registrants of the GMC, GDC, and the HPC.

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<sup>1</sup> Faculty of Public Health: [www.fph.org.uk/what\\_is\\_public\\_health](http://www.fph.org.uk/what_is_public_health)

<sup>2</sup> British Medical Journal Careers: [careers.bmj.com/careers/advice/view-article.html?id=2203](http://careers.bmj.com/careers/advice/view-article.html?id=2203)

<sup>3</sup> DH (2010), Review of the regulation of public health professionals.  
[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_122089](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_122089)

- There should be, as far as possible (allowing for dental public health) a single training pathway for specialist training in public health with a central role for the Faculty of Public Health (FPH).
- 2.2 In the subsequent public health White Paper the government said that its preferred approach was voluntary registration.<sup>4</sup> The responses to the subsequent public consultation found that overall stakeholders favoured statutory regulation over voluntary registration.<sup>5</sup>
- 2.3 In January 2012, the NHS Future Forum (charged with making recommendations about the implementation of the government's NHS reforms) reported 'significant concerns' about the regulation of 'public health practitioners', recommending that: 'The DH should ensure that all public health specialists are regulated.'<sup>6</sup>

### **3. Education, training and regulation of the public health workforce**

#### **Doctors**

- 3.1 Medical doctors follow a training pathway which takes five years, following a curriculum and undertaking assessments administered by the FPH. The training includes a Masters level qualification. The training is quality assured by the GMC and successful completion leads to entry into the public health medicine specialist register.

#### **Dentists**

- 3.2 Dentists follow a training pathway which takes up to four years, following a curriculum and undertaking assessments administered by the Royal College of Surgeons of England. The training includes a masters qualification in public health or dental public health. The curriculum is approved by the GDC and successful completion leads to entry in the GDC's dental public health specialist list.

#### **Other public health specialists**

- 3.3 The UK Public Health Register exists to provide a voluntary registration system for public health specialists outside of medicine and dentistry. The standard route to voluntary registration is by completing the training routes outlined for doctors and dentists. However, a retrospective portfolio route exists for senior public health professionals to apply on the basis of knowledge and experience. There are also portfolio assessment routes for 'defined specialists' - individuals who have specialised in a narrower area of public health.

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<sup>4</sup> DH (2010), Healthy lives, healthy people, our strategy for public health in England. [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_130401](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_130401)

<sup>5</sup> DH (2011), Healthy lives, healthy people: consultation responses. [www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH\\_128838](http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH_128838)

<sup>6</sup> DH (2011), NHS Future Forum. Summary Report - second phase. [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_132026](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_132026)

3.4 The UKPHR has also opened its register to public health practitioners (i.e. individuals below specialists), who have completed one of four NHS assessment schemes.

#### **4. Number of public health specialists**

- There are 1,470 specialists entered into the GMC's specialist register.
- There are 121 dentists on the dental public health specialist list.
- There are 541 non-medical specialists on the UKPHR register, 74% are not registered with another body. The remainder are dually registered with one of the other statutory regulators, the Chartered Institute of Environmental Health or overseas regulators.<sup>7</sup>

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<sup>7</sup> DH (2010), Review of the regulation of public health professionals, pg. 13.

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23<sup>rd</sup> January 2012

Dear Marc

## **NON-MEDICAL PUBLIC HEALTH CONSULTANTS**

As we recently discussed, my Secretary of State is announcing today that he will be introducing legislation to address the anomaly by which the large majority of public health consultants are regulated by statute, but a small number of non-medical consultants are not.


In order to ensure more consistent standards across the leadership of the public health profession he will be asking the Health Professions Council to take regulatory responsibility for this small group of staff.

We are conscious that your Council already has a substantial body of work over the next two years to take on the regulation of social workers from the General Social Care Council and to establish a register for practitioners of chinese and herbal medicines. We will wish to discuss with you the timing of legislation to ensure that you are able to continue to provide effective regulation of your existing registrants whilst extending your current remit.

My team will be in touch with you shortly to set up a meeting to discuss implementation and will subsequently meet with colleagues in the Devolved Administrations, the Council for Healthcare Regulatory Excellence, UKPHR and the Faculty of Public Health to discuss this further.

I am copying this letter to colleagues in Scotland, Wales and Northern Ireland, Harry Cayton at CHRE, Peter Farley at UKPHR and Professor Lindsey Davies at the Faculty.

Yours sincerely



**Gavin Larner**  
**Director of Professional Standards**

cc RoseAnn O'Shea – Scotland  
Jayne Dando – Wales  
Joyce Cairns – Northern Ireland  
Harry Cayton - CHRE  
Peter Farley – UK Public Health Register  
Professor Lindsey Davies – UK Faculty of Public Health