A guide to Return to Practice: HCPC

For Organisations and Supervisors

Returners do not need to take exams or retrain as they are already qualified in their profession. Returning to practice (RTP) is often about regaining confidence, not competence. RTP is about regaining registration to use a protected title.

#iamreadytoreturn



**About This Guide**

This guide is a resource for health, social care, charity, education organisations and supervisors working within them. Designed to help support Health and Care Professions Council (HCPC) returners to return to the HCPC register.

Health and social care stakeholder contribution has been critical to the development of this guide which covers attracting and recruiting returners, hosting and supporting them through the different supervised practice routes available, to finally finding potential employment.

**Background**

One of our objectives as NHS England (NHSE) is to encourage more people to return to their profession in the workforce. HCPC Returners leave their profession for many reasons but one of the main reasons is due to caring responsibilities. How we welcome returners back into our workplaces is so important for retention and flexible working is critical to supporting people to thrive (The NHS Long Term Workforce Plan 2023).

Although the HCPC have guidance on Returning to Practice, the returner can face challenges around understanding where to start and how to approach organisations to enquire about RTP supervised practice opportunities. Returners may contact their former employer in the first instance and need sign posting to the [NHSE Return to Practice Programme](https://www.hee.nhs.uk/our-work/allied-health-professions/return-practice-allied-health-professionals-healthcare-scientists-practising-psychologists) to facilitate the returners self- directed journey back to the HCPC register.

**What is Return to Practice?**

Returners who have left the HCPC register or have gained an approved qualification more than five years ago but have never been HCPC registered and wish to return to practice must apply to be re-admitted/added to the register before they can be contracted to work as professional practitioners, with a protected title. However, in the meantime, there is the opportunity for the individual to work in a support role whilst gaining the necessary updating experience.

The [HCPC sets out its requirements for returners to practice](https://www.hcpc-uk.org/registration/returning-to-practice/our-requirements/) including the minimum number of days required for updating depending on the length of time an individual has been out of practice. It is a flexible, self-directed process, allowing the returner to decide how to complete their period of updating. Returners can devise a bespoke professional development programme that best fits their personal circumstances and learning needs to refresh and update their knowledge and skills. This can be undertaken in the form of supervised practice, and formal or private study (NB) No more than 50% of these can comprise private study.

Returners may wish to view the [HCPC Standards of Proficiency](https://www.hcpc-uk.org/standards/standards-of-proficiency/) for their Profession to support their return.

**What are the Benefits of Return to Practice for Organisations?**

* Address workforce gaps and hard-to-fill positions: e.g. offering and supporting a support work position band 3 position then fast-tracking into band 5, 6 or 7 (or equivalent grade) positions on obtaining HCPC registration – grow your own approach!
* Tap into a skilled workforce: the average age at which people leave the HCPC register is 44. These individuals have on average nine years’ experience, and 60% leave when they are band 7 (or equivalent grade) or above (NHSE, GEO survey, 2020).
* These individuals not only have clinical/professional experience, but life experience, are generally motivated and live locally, increasing chances of retention.
* Reduce recruitment and agency costs and increase bank capacity – linking to workforce plan.
* Supporting a returner in a compassionate, inclusive and values-driven culture within your organisation will hopefully ensure you retain the returner in your workplace
* Relatively quick and cheap way to increase supply: average cost to return is £1,175 (NHSE, 2021) and Returnees can be re-registered within 30 - 60 days (6 -12 weeks).

**Supervised practice routes**

[Supervised practice](https://www.hcpc-uk.org/registration/returning-to-practice/updating-your-knowledge-and-skills/) refers to practising under the supervision of a registered professional who meets the requirements to act a [RTP supervisor](https://www.hcpc-uk.org/registration/returning-to-practice/updating-your-knowledge-and-skills/). Supervised practice is usually via the unpaid or voluntary route (honorary contracts/voluntary agreements), or the paid routes (e.g., fixed term contracts including support worker posts).

When supporting either RTP route within a department, it is useful to link with HR and finance colleagues and learning and education departments, as there may already be policies in place. It is essential, if possible, to have a centralised point of contact who understands the HCPC RTP guidance and has an awareness of the National NHSE RTP Programme. However, within most placement provider Organisations, RTP is usually very well established in nursing departments. It may be useful to link in with nursing colleagues in the NHS for advice and guidance where HCPC roles facilitating return to practice may not exist. In the RTP supervised practice sections on the Unpaid and Paid supervised practice routes that follow are guidance steps on internal processes that RTP supporting organisations follow which you may find helpful for your own organisation. These examples are taken from supervised practice placement providers with well-established and successful structured RTP programmes. These examples have been shared with kind permission from the University Hospitals of Derby and Burton NHS Foundation Trust, Cambridge and Peterborough NHS Foundation Trust, and Surrey and Heartlands ICS and Devon County Council.

**Route 1: Unpaid/Voluntary Placement Route**

Following a successful interview with the supervised practice provider, the Returner is offered an unpaid supervised practice placement. This is usually coordinated in conjunction with the learning and education department. On completion of the agreed supervised practice hours, the supervisor signs to say the returner has completed the supervised practice hours. Once the returner has completed their required hours and has successfully returned to the HCPC register, a returner can apply for a HCPC registrant position within an Organisation.

**Benefit of Unpaid/Voluntary Route**

The unpaid/voluntary route to return to practice can offer more flexibility in length and regularity of supervised practice hours, allowing the Returner to fit the placement around their home and personal life.

There should be an open and transparent conversation around preferred hours between the Returner and placement provider from the initial point of enquiry (e.g. how many hours, length of shifts, shifts required per week), with efforts made by all parties to accommodate the Returner’s requirements. Organisations should have realistic expectations of their Returner and ensure the Returner’s expectations and preferences are carefully managed through clear and open dialogue. This applies throughout both voluntary and employed routes.

**Return to Practice Unpaid/Voluntary Route Process (example 1: NHS)**

**Step 1**: Initial contact made by Returner via Organisation or NHSE. Inform relevant RTP Lead e.g., AHP/HCS Chief, Strategic Workforce Lead or Practice Education Facilitator (PEF) within placement provider Organisation.

**Step 2**: Returner completes placement provider Organisation return to practice application form.

**Step 3**: Request that Returner registers with the NHSE RTP Programme (R2PAHP-HCS@hee.nhs.uk) and downloads HCPC RTP standards documentation (<https://bit.ly/3nYhjRU>).

**Step 4**: Returner contacts HCPC for letter stating date left the register and any previous fitness to practice issues. A copy of this letter should be forwarded to the relevant RTP Lead within placement provider Organisation.

**Step 5**: Completed application forms sent to RTP Lead and onto relevant clinical areas for consideration. If appropriate to offer placement, establish whether there is an appropriate fit between the person, their return to practice learning objectives, the potential placement, and the Organisation. If so, the RTP Lead identifies the best area for the placement.

**Step 6**: Returner invited to a joint NHS values-based informal/formal interview with placement provider, to include RTP lead within Organisation e.g., PEF and manager where the placement is being supported on the interview panel.

**Step 7**: Returner successful at interview and offered a placement.

**Step 8**: HR to complete pre-employment checks: DBS, occupational health clearance and reference. If pre-employment checks satisfactory, HR to send an honorary contract to Returnee.

**Step 9**: The placement provider’s responsibilities include:

* Sending a conditional offer letter/email to the Returnee.
* Assisting the Returnee to sign up to the NHSE RTP programme for funding and support.
* Undertaking occupational health, DBS and reference checks, and providing uniform if spare stock.
* Confirming placement arrangements including full induction and named supervisor.

**Step 10**: Returner should complete the Organisations induction and mandatory training and gain access to any preceptorship programmes or relevant learning forums. Returner completes the agreed number of supervised hours using any local return to practice workbooks for guidance.

**Step 11**: Supervisor signs hours form for Returnee to submit to HCPC.

**Step 12***:* Returner completes placement provider’s evaluation form.

**Step 13**: Funding is claimed by the Organisation for £500 for the placement provider fee. A standard invoice needs to be sent by the Organisation (including Returnee name, profession, placement dates, NHSE RTP UID, and NHSE’s invoicing address) to NHSE at sbs.apinvoicing@nhs.net . Please copy in the national RTP team using: R2PAHP-HCS@hee.nhs.uk. NHSE are dependent upon Organisations/Returnees to raise invoices. Invoices will be coded/approved and paid to eligible supporting Organisations. All invoices should be addressed as follows:

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**Step 14:** Returner applies for a permanent position if one is available.

**Return to Practice Unpaid/Voluntary Route Process (example 2: Local Authority)**

**Step 1**: Initial contact made by Returner via Organisation or NHSE. Inform relevant RTP Lead e.g., AHP/HCS Chief, Workforce Lead or Practice Education Facilitator (PEF) within placement provider Organisation.

**Step 2**: Organisational RTP lead asks Returner to complete placement provider Organisation return to practice application form.

**Step 3**: Request that Returner registers with the NHSE RTP Programme (R2PAHP-HCS@hee.nhs.uk) and downloads HCPC RTP standards documentation (<https://bit.ly/3nYhjRU>).

**Step 4**: Returner contacts HCPC for letter stating date left the register and any previous fitness to practice issues. A copy of this letter should be forwarded to the relevant RTP Lead within placement provider Organisation.

**Step 5**: Completed application forms sent to RTP Lead and onto relevant professional lead for consideration e.g. principal Occupational Therapist/Most senior OT in the LA. If appropriate to offer placement, establish whether there is an appropriate fit between the person, their return to practice learning objectives, the potential placement, and the Organisation. If so, the RTP Lead identifies the best area for the placement.

**Step 6**: Returner invited to an informal interview with the placement provider, to include RtP lead within Organisation e.g., Representative from workforce development and Principal OT/OT Lead where the placement is being supported, on the interview panel.

The interview discussion will include:

* Previous work experience
* Any experience candidates have had during the period of absence from practice
* The type of role they hope to return to
* Working pattern
* Learning and development needs
* Why Local Authority has been identified to support RTP.
* Documentation from HCPC to demonstrate there are no Fitness to Practice restrictions.

The Returner will need to provide relevant ID, proof of address, proof of qualifications and previous registration details, as in the usual HR (Human Resources) recruitment processes.

**Step 7**: Returner successful at interview and offered a placement. As they are not registered with the HCPC, returners will be delegated work by a registered professional and work in a supernumerary capacity.

**Step 8**: HR to complete pre-employment checks:

Disclosure and Barring Service Check (DBS) – Any costs relating to an enhanced DBS should currently be covered by funding from NHSE and not passed onto the Returnee. This funding is up to £500 for the organisation and can be used to offset any expenditure.

* incurred in relation to set up costs of a placement or for educational development or educational equipment.
* Occupational Health Clearance.
* References.
* If pre-employment checks satisfactory, HR to send a voluntary agreement contract to Returnee.

**Step 9**: Once ALL checks have been returned and deemed satisfactory by the organisational RTP Lead, the placement provider’s responsibilities include:

* sending a conditional offer letter/email to the Returner
* assisting the Returnee to sign up to the NHSE RTP programme for funding and support.
* undertaking occupational health, DBS and reference checks, and providing uniform if spare stock and where applicable.
* confirming placement arrangements including full induction and named supervisor.

NB: If checks do not come back satisfactory, programme/placement will be deemed unable to commence.

**Step 10**: Returner should complete the Organisations induction and mandatory training and gain access to any preceptorship programmes or relevant learning forums. Returner completes the agreed number of supervised hours using any local return to practice workbooks for guidance.

**Step 11**: Supervisor signs hours form for Returner to submit to HCPC.

**Step 12**: Returner completes placement provider’s evaluation form.

**Step 13**: Funding is claimed by the Organisation for £500 for the placement provider fee. A standard invoice needs to be sent by the Organisation (including Returnee name, profession, placement dates, NHSE RTP UID, and NHSE’s invoicing address) to NHSE at sbs.apinvoicing@nhs.net . Please copy in the national RTP team using: R2PAHP-HCS@hee.nhs.uk. NHSE are dependent upon Organisations/Returnees to raise invoices. Invoices will be coded/approved and paid to eligible supporting Organisations. All invoices should be addressed as follows:

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Financial support is available from NHS England, up to £800 per returner. Please see the finance guide available on the RTP National Stakeholder SharePoint platform for more information.

**Step 14:** Apply for a permanent position if one is available.

**Route 2: Paid Route**

Following a successful interview with the supervised practice provider organisation, the Returner is offered a contract of employment. The returner may initially be paid at a lower banding (or equivalent grades in social care) whilst returning, depending on the profession, the role and funding available. The contract is usually fixed term. On returning to the HCPC register, returners can apply for a permanent position if one is available. Next, standard organisational recruitment and interview processes proceed, including a value and competence-based interview and a career conversation with the Returner. A Returner returning through this route will also be included in the pension scheme when starting their practice hours. There is no obligation on the supervised practice provider to provide a permanent job offer. Returners can consider joining the bank rota for an organisation or it may be helpful to sign post them to websites such as NHS jobs and tracs.

Some returners are also supported using Annex 21 under Agenda for Change.

**Benefit of Paid Route**

This route allows returners to earn whilst they learn. Without the income from the supervised practice placement, this route to returning may be more challenging for some returners. It is good practice to place a Returner into a vacancy in which they can work as a registered HCPC professional upon completion of their updating and re-registration.

**Return to Practice Paid/Employer Led Route Process (example 1: NHS)**

**Step 1:** Returnee applies for return to practice role by completing Organisation’s application form via NHS Jobs, TRAC or Organisation website. Organisations are responsible for advertising positions and for the subsequent shortlisting of applicants.

**Step 2:** Request that Returnee registers with the NHSE RTP Programme (R2PAHP-HCS@hee.nhs.uk) and downloads HCPC RTP standards documentation (<https://bit.ly/3nYhjRU>).

**Step 3**: Returnee contacts HCPC for letter stating date left the register and any previous fitness to practice issues. A copy of this letter should be forwarded to the relevant RTP Lead e.g., AHP/HCS Chief, Strategic Workforce Lead or Practice Education Facilitator (PEF) within placement provider Organisation.

**Step 4**: Returnee invited to a joint NHS values-based interview with placement provider, to include RTP lead within Organisation e.g. PEF and manager where the placement is being supported on the interview panel. Complete interview to establish whether there is an appropriate fit between the person, their RTP learning objectives, the potential placement, and the Organisation. If so, the RTP Lead establishes the best area for the placement.

**Step 5**: Returnee successful at interview and offered a paid supervised practice placement by the placement provider and employed as a Returnee by the Organisation.

**Step 6**: HR to complete pre-employment checks: DBS, occupational health clearance and references. If pre-employment checks satisfactory, HR to send contract (e.g., a fixed term contract) to Returnee.

**Step 7**: The placement provider’s responsibilities include:

* Sending a conditional offer letter/email to the Returnee.
* Assisting Returnee to sign up to the NHSE RTP programme for funding and support.
* Undertaking occupational health, DBS and reference checks, and providing uniform if spare stock.
* Confirming placement arrangements including full induction and named supervisor.

**Step 8**: Returnees should complete the Organisation’s induction and mandatory training and have access to any preceptorship programmes or relevant learning forums. Returnee completes the agreed number of supervised hours, using any local return to practice workbooks for guidance.

**Step 9**: Supervisor signs hours form for Returnee to submit to HCPC.

**Step 10**: Returnee completes placement providers evaluation form.

**Step 11**: Funding is claimed by the Organisation for £500 for the placement provider fee. A standard invoice needs to be sent by the Organisation (including Returnee name, profession, placement dates, NHSE RTP UID, and NHSE’s invoicing address) to NHSE at sbs.apinvoicing@nhs.net . Please copy in the national RTP team using: R2PAHP-HCS@hee.nhs.uk. NHSE are dependent upon Organisations/Returnees to raise invoices. Invoices will be coded/approved and paid to eligible supporting Organisations. All invoices should be addressed as follows:

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**Step 12:** Apply for a permanent position if one is available.

**Return to Practice Paid/Employer Led Route Process (example 2: Local Authority)**

Work is currently being undertaken to develop this process for Local Authorities and when complete this example will be updated accordingly. Where possible if you are looking to offer a Returner a placement in your Local Authority, you can look to follow the above process example as a starting point.

**Key points for Organisations/employers to consider.**

* If a uniform is used in the placement setting, it is considered best practice for Organisations to source uniform prior to a Returner’s first day on placement.
* We recommend placement providers offer Returners protected study time, increasing chances of successfully completing their RTP. How the placement provider does this is discretionary.
* A DBS is required. Any costs relating to a DBS should be covered by £500 funding provided from NHSE and should not be passed onto the Returner.
* Please ensure that the returner has Insurance/Indemnity insurance, which is often covered by an Organisation’s existing liability insurance, providing Organisational processes are followed and the learning and education lead is involved. Both supervised practice route contracts/agreements should contain the necessary insurances and indemnity cover. Therefore, Returners can assess and treat patients. Indemnity insurance, in most cases, is also provided by professional bodies if they join them and require this for supervised practice where not provided by the Organisation.
* Agree a centralised point of contact, who has knowledge of the NHSE and HCPC RtP processes.
* Take responsibility for occupational health, DBS and reference checks, ensuring the internal HR lead can manage this process. Please note: the supporting placement provider is responsible for all checks throughout the unpaid/voluntary route.
* Virtual placements are accepted as evidence towards return to practice. Consequently, there is a need to think differently – the technology used in services and homes has increased greatly since the start of Covid-19 and should be fully embraced to offer alternatives to Returners returning to roles across all professions.
* A whole-team approach to Returner support helps the return to practice process, especially within busy teams. Everyone can contribute to a Returner’s updating to spread the load, from reception staff to support workers. A Returner must be working alongside someone from their profession on the HCPC register – this may mean they are working within a team with a registered professional, not necessarily in the same room.
* Supervised practice can occur in any area or specialism, including research and leadership placement posts. Share hours between teams or local Organisations and think about inter-professional and group/peer learning or mentoring to deliver increased support and capacity to return to practice placements.
* Develop relationships with key stakeholders to agree a return to practice offer that has a joined-up approach to recruitment and interview, in partnership with the identified RTP Lead e.g., AHP/HCS Chief, Strategic Workforce Lead or PEF.
* Link with key members including ICS, AHP Faculties/Councils, AHP and HCS Leaders and organisational support to define the regional and/or system-wide need and offer for return to practice to:
	+ - Look at careers difficult to recruit to base on vacancy data.
		- Build a return to practice peer community of practice or steering group to share learning and work through any placement issues or other requirements.
		- Understand the opportunities in services for return to practice and who can support.
		- Develop opportunities in job plans to support return to practice.

**Inclusive Support During Supervised Practice Placement**

Please find below a number of links to resources you may find helpful to access when supporting returners to practice.

[How to recruit and support disabled staff in the NHS](https://www.nhsemployers.org/publications/how-recruit-and-support-disabled-staff-nhs) – NHS Employers

[Access to Work: get support if you have a disability or health condition](https://www.gov.uk/access-to-work) – Gov.co.uk

[Accessing Disability Support](https://diversityandability.com/nhs-toolkit/) – Diversity and ability

[Disability Rights UK Facts NHSE F27](https://www.disabilityrightsuk.org/access-work) – Disability Rights UK

[Business Disability Forum](https://businessdisabilityforum.org.uk/) – Not for profit membership organisation

[Disability Confident Line manager guide](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/938189/disability-confident-line-managers-guide.pdf) – Disability Confident

**Returner Support During Placement**

It is important that the Returner benefits from a rich learning experience and feels valued and part of the team. To support this process, managers and supervisors should arrange a conversation with the Returner about their needs and how the team can support these needs. Consider before they start their placement, offering them the opportunity to come in and meet the wider team and get familiar with the working environment. The Returner also has a responsibility to be transparent with their manager and supervisor about their learning needs. Supervisors may wish to adopt any educational resources that support transitional needs, e.g. from the Organisation’s Preceptorship Framework.

As a minimum requirement, the supervised practice placement provider should provide some form of identification badge to the Returner, detailing their role as a Returner and their profession. Additionally, before starting in their clinical area, Returners should be provided with an introduction letter, key contact details of their RTP Organisation Lead, and details of their local supervisor. It may also be helpful to support the returner to familiarise themselves with the working environment such as building layout and location of different clinics before they start.

If Practice Educator Facilitators (PEF) are available, they should visit the Returner or make contact remotely to offer pastoral support. A joint approach between those involved in supporting the Returner is recommended, ensuring all parties are kept up to date on progress or issues as they arise. Returners should have access to the relevant IT and computer systems, and to any ‘return to practice workbooks’ the organisation has developed to support the Returner. This can guide their learning and outline what opportunities are available, as well as include the Returner’s reflections, supervision session notes and time to gather evidence during their updating.

**Pastoral Support**

Each placement provider Organisation should have pastoral support for its Returners, in line with other learners. This may be a member of the organisation’s existing clinical education team e.g., PEF. The pastoral support will be an additional resource of support the Returner can contact if needed but should not be used to replace the existing supervisor.

The pastoral support should contact the Returner at the start of their placement to introduce themselves, advising that they can be contacted for support or advice if needed. The pastoral support does not necessarily need to provide regular email or telephone support but should keep in contact with the Returner every week or two.

Pastoral support should escalate any concerns as soon as identified to the Returner’s placement manager and/or supervisor and inform the Returner of their doing so.

**Practice Supervisors**

Practice supervisors are crucial to the experience and success that the returner has whilst on supervised practice placement. Many returners can feel overwhelmed, nervous and apprehensive about returning to practice but are excited and proud to be returning back to their registered profession. The HCPC sets out requirements for a RTP supervisor which can found [here](https://www.hcpc-uk.org/registration/returning-to-practice/updating-your-knowledge-and-skills/) and provides some general guidance on supervision [here](https://www.hcpc-uk.org/standards/meeting-our-standards/supervision-leadership-and-culture/supervision/approaching-supervision/guidance-for-supervisors/). Further support for supervisors can be found in the NHSE Preceptorship eCompendium available on e-learning for health, which includes a Preceptor skills checklist.

Returners on the unpaid or voluntary route will be supernumerary, whereas returners on the paid route are part of the workforce. Returners should be treated as part of the team with individual levels of experience. Return to practice is an opportunity to refresh and update skills and knowledge, not start from scratch. It may be helpful initially to approach the level of support in a similar way to a newly qualified health professional, while also recognising that they are a practitioner with previous experience, rebuilding their confidence and skills.

 A practice supervisor’s standard activities should include:

* To agree with the returner what supervision will be required to include frequency, duration and type i.e. joint treatment sessions, face to face, virtual and how this may change over time
* Working alongside the Returner and providing informal and formal supervision and providing feedback on the Returner’s progress.
* Ensuring that the entire multi-disciplinary team is aware of the Returner’s role to ensure a whole team support approach is delivered.
* Identifying learning opportunities and ensuring the Returner is exposed to these as often as possible. Consideration should be given on allocating these learning opportunities fairly to Returners, students etc.
* Encouraging the Returner to reflect on their experience during the placement period, enabling them to identify gaps in their knowledge and skills.
* Employment and career conversations
* It is not mandatory that a returner’s notes are counter-signed, although it is good practice for supervisors to check and debrief return to practice notes. It is recommended that the Returner signs all records with their name, the title returner followed by their profession. The recording of a clinician’s signature is part of good record keeping, and a legal requirement. Organisations using digital signatures may need to provide access to clinical systems, and record signatures using a system and process such as Smartcards.
* Signing off the HCPC [supervised practice record form](https://www.hcpc-uk.org/globalassets/registration/rtp/supervised-practice-form-returning-to-practice.pdf) to confirm hours completed

Once a returner has collated all their evidence to apply for readmission to the HCPC register, a [counter-signatory](https://www.hcpc-uk.org/registration/returning-to-practice/how-to-fill-out-the-returning-to-practice-form/#:~:text=When%20you%20have%20completed%20your,you%20are%20fit%20to%20practise.) needs to sign off their form. The returner may ask you, their supervisor, to be their [counter-signatory](https://www.hcpc-uk.org/registration/returning-to-practice/how-to-fill-out-the-returning-to-practice-form/#:~:text=When%20you%20have%20completed%20your,you%20are%20fit%20to%20practise.) . Please note that whilst the supervisor and the counter-signatory are different roles, the supervisor can also act as the counter-signatory. For more information on the counter signatory please click [here](https://www.hcpc-uk.org/registration/returning-to-practice/how-to-fill-out-the-returning-to-practice-form/#:~:text=When%20you%20have%20completed%20your,you%20are%20fit%20to%20practise.)

**If Things Are Not Going Well**

If a Returner is struggling to complete their practice hours due to development needs, please note:

The placement supervisor is required to sign off the completed period of supervised practice hours, but not whether the person is ‘competent’ or fit to practice.

Returners hold a qualification in their chosen profession. Returning to practice is about re-gaining registration with the HCPC and the use of a protected title. Returners do not need to be re-trained or ‘taught’, as return to practice is led and managed by the Returner. It is their responsibility to identify gaps in their skills/knowledge and create an action plan. Remember that HCPC registration is a self-declaration of competency – signatories are not signing off Returners as competent.

If there are concerns about a person’s fitness to practice after completing a period of updating under supervision, two options can be considered:

* Explain your concerns about signing the form to the Returnee to help them plan additional updating activities.
* Sign the form, and then raise a fitness-to-practice concern with the HCPC.

If there are serious concerns, or the Returnee behaves unprofessionally in a way that is not in line with the Organisation’s values or the HCPC’s standards, performance, and ethics (https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/), the Returnee may not be able to update the required knowledge and skills. Subsequently, they will not be able to complete the RtP HCPC requirements and cannot regain registration. It is important that potential termination of a supervised practice placement is part of the contract and discussions with HR and/or line manager when setting up the placement, to manage any risks of misconduct.

To prevent placement termination, risk management should be in place throughout the placement, including robust recruitment checks, a comprehensive induction, pastoral care, a supportive learning environment, and early and open conversations with the Returnee to address any issues – ensuring early internal support is provided. Any concerns about the Returnee should be discussed with the supporting manager. HR should be notified as soon as possible if the Returnee is struggling, so extra support can be put in place, as required. Regional or National NHSE RTP Leads can assist at any point where needed.

### Advertising your return to practice opportunities

#### Background

Many returners (46%) find out about the NHSE Return to Practice programme through an internet search but what was it that prompted them to search for us online? Was it a coffee with a friend or old colleague? Was it reading a small advert in their child’s school newsletter or reading their local paper or perhaps being stuck in traffic and seeing RTP advertised on the back of a bus?

As part of a national communication strategy for 2022-2023, 6 focus groups were undertaken with 23 returners from 8 HCPC professions and 6 regions represented. Two common problems emerged:

A) Lack of clear guidance and support for returning

B) Lack of widespread awareness about RTP process.

This small sample suggests that despite significant investment in certain areas of RTP, there is still some work to be done to advertise the available support and continue to raise awareness of the RTP process.

22% of returners on the NHSE programme find out via their professional body. We continue to work with these to ensure information is accurate and relevant. Examples include [British Psychological Society](https://www.bps.org.uk/psychologist/return-practice), [Royal College of Occupational Therapists](https://www.rcot.co.uk/about-occupational-therapy/returning-practice) and [Society of Radiographers](https://www.sor.org/learning-advice/learning/return-to-practice)

#### Advertising: Points for Consideration

Budget: The available budget is a factor in considering how to advertise for returners. There is a lot you can do for very little or no cost.

Having an up to date and accurate webpage on return to practice can help returners to find you when they search online. Examples include: [Dorset ICS AHP RTP page](https://joinourdorset.nhs.uk/ahp/dorset-ahp-return-to-practice-prospectus/) or [The Royal Wolverhampton NHS Trust](https://www.royalwolverhampton.nhs.uk/join-team-rwt/return-to-practice/)

* Raising awareness of RTP within your own organisation can provide a lot of free advertising e.g. through organisation wide emails, the intranet and events such as AHPs day. Having an informed workforce ensure they can sign post and potentially remove barriers returners can face. We found that 24% of returners on the NHSE RTP programme found out about the programme via a friend or colleague.
* Contact the NHSE national team to be added to our database with contact details of department or organisational leads looking to support returners. This database is housed on the national returners SharePoint site and its aim is to make it easier for returners to connect directly with you.
* Adverts on NHS jobs and trac- Work with your HR team to ensure posts contain a line that states we welcome returners to practice
* If developing a dedicated RTP post, is it unpaid or paid, targeting all HCPC returners, or specific professions?
* Consider holding webinars which can be recorded and add to your webpage for future
* Consider where you can collaborate with others to save time and cost.
* Case studies such as this from [The Royal Wolverhampton NHS Trust](https://www.royalwolverhampton.nhs.uk/media/press-release-archive/press-releases-2022/june-2022/return-to-practice-opens-doors-for-dietitian-della/) are also a good idea as it allows returners to see how you have supported a returner well already and helps to boost their confident and understand different journeys to return (Focus group report 2022).

Advert Content: Please consider including flexible working and part time as well as full time working patterns offered if they are. We know that not all jobs are advertised as open to returners to practice. To illustrate this point, an [LSBU Student Research project](file:///C%3A/Users/Natasha.Pisarski/OneDrive%20-%20Health%20Education%20England/LSBU%20Research%20report%20June%202023.pptx) (June 2023) found that searching NHS jobs over a 3 day period for London region Occupational therapy and Physiotherapy posts found that 1/14 job adverts mentioned return to practice, and when a refined search term of return to practice was selected 4 adverts resulted.

We also know that not all adverts mention flexible working; a recent LSBU Student Research project June 2023 showed that of the Occupational Therapy and physiotherapy roles 75 % offered only full time, 19% offered full or part time and 6% offered part time. The NHS People plan (2020/21) tells us that “many people in the NHS go on to bank rotas, become locums, or leave us altogether because they are not offered the flexibility they need to combine work with their personal commitments.”

The NHS has a higher-than-average proportion of people with caring responsibilities (NHS People Plan 2020/21) and we know that childcare is one of the reasons that returners leave their profession (Government Equalities Office Survey 2019) so including returners to practice on job adverts combined with flexible working will support enticing them back to practice.

It is also evident from health care job searches that not all job adverts make reference to equality, diversity and inclusion [LSBU Student Research project](file:///C%3A/Users/Natasha.Pisarski/OneDrive%20-%20Health%20Education%20England/LSBU%20Research%20report%20June%202023.pptx) (June 2023). To support your advertising to all returners it may be helpful to read the [NHS equality, diversity and inclusion improvement plan](https://www.england.nhs.uk/long-read/nhs-equality-diversity-and-inclusion-improvement-plan/)

Geography: What is the intended reach geographically of your advert? Consider if there is an opportunity to advertise in the local community: Careers fairs, local community events, schools, local social media groups, local noticeboards, local publications, create your own event and consider running it outside of the healthcare setting such as local supermarket.

How will you measure success or return on investment? Ultimately it is about the number of returners that approach your organisation for support and that you can support to return however, as with any significant life change the results may not be instantaneous at the Number of likes, number of shares, number of website clicks, number of enquiries, audience reach?

#### Advertising Resources and Examples

There are some fantastic adverts and means of advertising to returners to practice that are really innovative. This section aims to share with you some great resources and examples of how organisations and systems advertise and example campaigns as well as learning from the NHSE national programme initiatives too.

#### NHSE Resources

The NHSE Communication toolkit is available [here](https://www.hee.nhs.uk/our-work/allied-health-professions/return-practice-allied-health-professionals-healthcare-scientists-practising-psychologists/resources).

Please use this toolkit by adding your organisation logo to this existing material

#### Examples of RTP Advertising

Advertising Campaign Examples:

* [Kent and Medway AHP Faculty](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms%2FKM%20ICS%20AHP%20RtP%5F%2Epdf&viewid=ea303259%2D784f%2D4730%2Dacd8%2D726a58feb40f&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms)
* [Sussex Health and care](https://healtheducationengland.sharepoint.com/%3Ap%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7bE24A40E6-58E4-46C3-B628-E6CB6CFD2D08%7d&file=Sussex%20RTP%20Campaign%20(overview)%20-%20June%2023.pptx&action=edit&mobileredirect=true)

Case Studies

* [Mid and South Essex Integrated Care System](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms%2F226324365%2D41%20NHS%20Essex%2Epdf&viewid=ea303259%2D784f%2D4730%2Dacd8%2D726a58feb40f&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms)
* [The Royal Wolverhampton NHS Trust](https://www.royalwolverhampton.nhs.uk/media/press-release-archive/press-releases-2022/june-2022/return-to-practice-opens-doors-for-dietitian-della/)
* NHS England [Case](https://www.hee.nhs.uk/our-work/allied-health-professions/return-practice-allied-health-professionals-healthcare-scientists-practising-psychologists/resources) [studies](https://www.hee.nhs.uk/our-work/allied-health-professions/return-practice-allied-health-professionals-healthcare-scientists-practising-psychologists/resources)

Websites

* [Airedale NHS Foundation Trust](https://www.airedalenhscareers.co.uk/careers/ahp/)
* [Central London Community Healthcare NHS Trust](https://clch.nhs.uk/job/return-practice)
* [Our Dorset](https://joinourdorset.nhs.uk/ahp-return/) Workforce
* [Return to Practice (royalwolverhampton.nhs.uk)](https://protect-eu.mimecast.com/s/3LcQC5RXnIYWKg0TzduYx?domain=royalwolverhampton.nhs.uk/)
* [Frimley ICS RTP page](https://frimleyicsahpfaculty.padlet.org/wfirth2/frimley-ics-ahp-return-to-practice-u7to8e3he81auvf8)
* [Mid Cheshire Hospitals NHS Foundation Trust](https://www.mcht.nhs.uk/work-us/return-practice-allied-health-professions)
* [Midlands Partnership University Hospital NHS Trust](https://www.mpft.nhs.uk/working-here/allied-health-professionals/return-practice)
* [Royal Cornwall Hospitals NHS Trust](https://workwithus.royalcornwallhospitals.nhs.uk/joining-us/return-to-practice-for-allied-health-professionals/)

Virtual events and Webinar

* [Cheshire and Merseyside AHP Faculty event](https://twitter.com/C_M_AHP_Faculty/status/1498325827854999554)
* [Coventry and Warwickshire Partnership NHS Trust virtual event](https://www.covwarkpt.nhs.uk/our-news/join-us-at-the-return-to-practice-event-2509/)
* [Frimley ICS RTP event](https://frimleyicsahpfaculty.padlet.org/wfirth2/frimley-ics-ahp-return-to-practice-u7to8e3he81auvf8/wish/2496422007)
* [Hampshire and the Isle of Wight](https://www.hantsiowhealthandcare.org.uk/news-and-events/news/allied-health-professionals-ahp-return-practice-drop-session)
* [Northern Care Alliance Event](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx)
* [The Black Country Allied Health Professionals (AHPs) and Nursing Faculty](https://www.dgft.nhs.uk/return-to-practice-event/)
* [An Evening with the HCPC on Return to Practice](https://youtu.be/RaMtVDkJF54)

NHS Jobs

* [Central London Community Healthcare NHS Trust](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7BEE62058B-83EA-4C8B-8A82-BC8BE2CB6BA2%7D&file=Central%20London%20Community%20Healthcare%20Job%20advert.dot&action=default&mobileredirect=true)
* [Kingston Hospital NHS Foundation Trust Return to Practice Band 3 job advert](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FKingston%20hospital%20NHS%20Foundation%20Trust%2Epdf&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents), [job description](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2F396%2DRTP%2DJD%20%281%29%2Epdf&viewid=ea303259%2D784f%2D4730%2Dacd8%2D726a58feb40f&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents)
* [Royal Devon University Healthcare NHS Foundation Trust](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7B93E865D2-B490-48D0-87CF-37E9290CD5DA%7D&file=Royal%20Devon%20NHS%20Foundation%20Trust.odt&action=default&mobileredirect=true)
* [Somerset Foundation Trust Unpaid Honorary contract](https://www.jobs.nhs.uk/candidate/jobadvert/C9184-23-1367?keyword=return%20to%20practice&language=en)
* [University Hospitals Dorset NHS Foundation Trust Advert](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7B0F2C3FDD-E9E9-46F1-9124-465475905256%7D&file=Dorset%20word%20doc%20advert.docx&action=default&mobileredirect=true)

Social Media

* [Devon Facebook advert](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FDevon%20FB%20advert%2Ejpeg&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents)
* [Gloucestershire Health and Care NHS Trust Facebook Advert](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7B3FE76B85-19C6-4C7E-BB1F-B2FDAE0BF3A1%7D&file=Gloucestershire%20Health%20and%20Care%20NHS%20Foundation%20Trust.dot&action=default&mobileredirect=true)
* [BIOS X advert](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7BB6A49DCD-2E12-4CFB-9C99-4C68D98C21C3%7D&file=BIOS%20X%20advert.dot&action=default&mobileredirect=true)
* [Devon County Council X Advert](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7b6F64E861-E80A-4ED6-B85F-F1F5F687C428%7d&file=Devon%20County%20Council%20advert.dot&action=default&mobileredirect=true)
* [Royal Berkshire NHS Foundation Trust](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7B0CF537BF-109A-48CD-8065-FFF539F38F16%7D&file=RBNHSFT%20Twitter%20advert.dot&action=default&mobileredirect=true) X Advert
* [South Yorkshire and Bassetlaw AHP Faculty](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7BF121BFA9-B478-4BEC-B040-8C1F8B58D520%7D&file=South%20Yorkshire%20X%20advert.odt&action=default&mobileredirect=true) X Advert
* [National NHSE RTP programme team LinkedIn Campaign](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms%2FNHSE%20Return%20to%20Practice%20LinkedIn%20Campaign%2Epdf&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms)

#### Public Transport

Frimley ICS produced their own RTP advert using NHSE images from the [NHSE Communication toolkit](https://www.hee.nhs.uk/our-work/allied-health-professions/return-practice-allied-health-professionals-healthcare-scientists-practising-psychologists/resources). The campaign targeted AHP returners for 3 weeks (June 2023) on buses leaving particular depots in Guildford and Slough to cover the largest areas in the ICS. The bus was spotted by an NHS worker and tweeted on twitter, gaining momentum and gaining coverage beyond the ICS and being retweeted by NHS staff nationally.

This campaign was funded by Health Education England (now NHSE). The idea was presented to AHP faculties and AHP councils and it was agreed that an AHP RTP campaign would be funded for 3 weeks in certain depos in Slough and Guildford to cover the majority of the ICS area. It also included one week radio adverts on kiss and heart in a 20 mile geographical area. The campaign was arranged by an external media company at a cost of £6000.



#### Local Newspaper Advert

[Black Country Integrated Care System Metro Advert Campaign report](https://healtheducationengland.sharepoint.com/%3Ap%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7bBBD74846-13EA-434B-84B4-C63C749DACA4%7d&file=RtP%20Midland%20Metro%20Promotion%20Review%202023.pptx&action=edit&mobileredirect=true)

[Airedale Hospital Advert](file:///C%3A/Users/Natasha.Pisarski/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/DOVR7CXY/1.https%3A/www.thetelegraphandargus.co.uk/news/keighleynews/16094295.recruitment-event-airedale-hospital/) (attach SP link)

[NHS England East of England region in your area online newspaper article example- Cambridgeshire and Peterborough Integrated Care System](https://healtheducationengland.sharepoint.com/sites/HCPCRTP/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms%2F226324365%2D40%20NHS%20Cambs%20Rev%20Print%2Epdf&viewid=ea303259%2D784f%2D4730%2Dacd8%2D726a58feb40f&parent=%2Fsites%2FHCPCRTP%2FShared%20Documents%2FComms) East of England enquiries have increased as a result. As part of a £8000 campaign for in your area online and in print articles for 6 weeks duration June/July 2023. To give an example Page views 1.3k, unique views 1.1k (average across campaign 1.5k), average time spent reading 02:53. Change to Herts and

#### School Newsletter Example

Claire Wardle, NHS England South East Return to Practice Lead led a campaign to contact primary and secondary schools in her region to ask if they would put some Return to Practice information in their newsletter/bulletin or website just before the school summer holidays. School responses were very positive and the region received 30 enquiries as a result of this campaign.

* 6 HCPC returners
* 12 nurse returners
* 1 nurse wanting to do post graduate midwifery degree
* 3 for admin jobs
* 5 were interested in roles in the NHS
* 1 international nurse
* 2 midwives

#### Example school letter

Dear Schools,

I would like to introduce myself.

I work for XXXX My roles include supporting nurses, midwives and healthcare professionals back to their professional register in order to support the increase of nurses and midwives to return to work in the NHS and also career and school engagement.

I am making contact to ask if it would be possible to include a message to parents and families in your school newsletter/bulletin or website to offer my support for those seeking information and guidance on how to return to the register. I have included a short paragraph that could possibly be included if you felt this was appropriate. I would also be very willing to have a discussion if this would also be possible with the office manager or head teacher.

#### Possible newsletter article

Thinking of returning to your role as a healthcare professional? We can help you!

This message goes out to all parents, carers and members of the local community who may once have been a healthcare professional such as a nurse or midwife and now considering a return. Returning healthcare professionals have a key role to play in ensuring patients and service users have access to experienced and well-trained care staff equipped with the right skills. NHS England provide funding to support the pathways to return and are keen to support or answer any questions you may have if you are considering returning to perhaps nursing, midwifery or If you trained as an allied health professional (AHP) or a healthcare scientist (HCS) but have since left the profession.

Please do contact us for more information on: insert telephone number or email us insert email address.

[**University Alumni Letter**](https://healtheducationengland.sharepoint.com/%3Aw%3A/r/sites/HCPCRTP/_layouts/15/Doc.aspx?sourcedoc=%7B4A471343-CDAE-459F-9011-0D36EA2A8A7B%7D&file=HEI%20Alumni%20letter%20v3.docx&action=default&mobileredirect=true)

#### Spotify Advertising

Listen to the national programme [audio clip](https://adstudio.spotify.com/preview/3db7acf8-617d-4a05-af1c-14a2536139dd).

The campaign resulted in 5,626 website clicks and reached almost 1 million people (953,447), generating 1,292,028 ad listens for a total ad spend of £5,000. The ad with the female creative had a marginally higher (0.45%) click through rate compared to the male creative (0.43%) seen below



