

## Summary of Key Changes to Updated Guidance/ Supporting Information - March 2025

Please note that we have merged the two documents Guidance for Applicants, Assessors and Verifiers (2024) and the Supporting Information (2024).

The changes outlined below have been included in the new Guidance for Applicants, Assessors and Verifiers - Public Health Practitioner Registration 2025.

Section	Page	Theme	Key changes
2.1	7	<b>Change to Overseas application</b>	<p>The following section has now been withdrawn:</p> <p>A number of standards require explicit evidence to be submitted of knowledge, understanding and application experience within the UK. Standards where this UK knowledge or experience is explicitly required are: 1.1 Comply with statutory legislation and practice requirements in your own area of work 1.3 Act in ways that promote equality and diversity 2.2 Manage data and information in compliance with policy and protocol, demonstrating awareness of data confidentiality and disclosure.</p> <p>Replaced with: Evidence presented to the Assessors should provide assurance that knowledge of UK policies and procedures is demonstrated.</p>
2.2	8	<b>Breadth of PH practice</b>	New line included:

			Applicants are encouraged from a wide range of posts within the PH system. The portfolio does not necessarily required a breadth of public health experiences, but a demonstration of common Public Health principles, knowledge and skills should be evidenced.
2.2	8	<b>Applicants requiring additional support</b>	<p>New line included:</p> <p>Applicants requiring additional support in the preparation and submission of their portfolio evidence should discuss this as soon as possible with the Scheme Co-ordinator and your employer to confirm what support is available. Applicants should refer also to the UKPHR Reasonable Adjustment Policy. <a href="#">Reasonable-Adjustments-Policy-final.pdf (ukphr.org)</a></p>
2.3	9	<b>Commentary Submission</b>	<p>New line included:</p> <p>Applicants are expected to submit their Commentaries sequentially rather than all together. This is because applicants learn significantly from their first commentary and the clarification process.</p> <p>Applicants should note that aims and objectives of each 3 commentaries must be different.</p>
2.4	9	<b>Level 6</b>	<p>Existing hyperlink removed.</p> <p>Replaced with : Degree level or Degree equivalent.</p>
2.5	10	<b>Use of AI</b>	<p>Artificial Intelligence (AI) tools when used appropriately have the potential to enhance some elements of PH practice and can support inclusivity and accessibility. The FPH state that Digital technologies and AI offer profound opportunities to improve health and wellbeing, while also generating new and exacerbating known health harms, and raising challenging ethical and policy questions. It is noted that tools to detect AI-generated content are generally considered unreliable and biased.</p> <p>New section added:</p> <p>In relation to Portfolio development applicants should not use AI to write their commentary. However when AI has been used to deliver the public health function the Assessor should consider this and may wish to accept. The applicant should cite and appropriately acknowledge its use, including why they have used AI, what they learnt from this experience and any advantages and disadvantages they have found when using AI. AI tools to check spelling and grammar are acceptable. However presenting work created by AI without suitable acknowledgement is considered plagiarism.</p>

3.1.	21	<b>Content Concerns</b>	<p>New section added:</p> <p>If assessors have concerns about the portfolio content or the level of autonomous practice, they should discuss this with the scheme coordinator at an early stage of the assessment process to ensure that the practitioner can be supported. Similarly if assessors are unable to assess a commentary, for example if the commentary is too long, poorly structured, or with significant errors in the writing they should inform the scheme co-ordinator.</p> <p>If assessors or verifiers have concerns about the portfolio beyond the assessment of the standards, they should contact their scheme coordinators' for next steps</p>
3.5	24	<b>Assessors adding comments after each commentary</b>	<p>New line included:</p> <p>Assessors are encouraged to complete the assessor overview after each commentary. This will assist if there are any changes to the assessor during the writing of the portfolio.</p>
3.7	25	<b>Assessor responsibilities</b>	<p>New line included:</p> <p>Assessors may be required to respond to verifier's referrals or comments as part of the QA process.</p>
Annex 2	35	<b>Standard 8.2</b>	<p>New line included:</p> <p>Or affected / relevant staff groups</p>
Annex 11	57	<b>12 Essentials of Practitioner Registration</b>  <b>Good Public Health Practice User Guide UKPHR</b>	<p>Minor updates and removal of page references.</p> <p>Hyperlink to the UKPHR statement added to the Annexe where Faculty of Public Health (FPH) revised Good Public Health Practice (2024) is included. This replace previous UKPHR Code of Conduct</p>
Annex 12C	63	<b>Certification of documents</b>	<p>The person who completes the reference must confirm that they have seen (i.e. in person or an electronic copy) the relevant documents which the practitioner has presented.</p>