

VRC

Voluntary Registration Council
for Healthcare Science

Guidance Notes

For Cytotechnologists

On Submitting an Application for Voluntary Registration

Version 2.2
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December 2010
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Voluntary Registration Council

c/o Executive Business Support
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APPLICATIONS

All applications must be made on the recognised VRC form. Applications can be hand written or typed. Hand-written forms should be completed in black ink and must be legible.

Once you have completed your application form submit with a cheque for the non-refundable registration fee by post. The following charges will apply:

From: January 2011

New applicants - £55

Re-registration – £35

Additional charges for incomplete applications will be made therefore please ensure that you check your completed application carefully before sending it to VRC. A table of charges is available on the VRC website. Please make cheques payable to VRC or the Voluntary Registration Council for Health Care Science. The payment for renewal of your voluntary registration will be payable from your account in September each year.

Submissions by email will not be accepted.

It is recommended that you keep a copy of the form for your own records and in case your submission is lost in the post.

CONTENT OF THE APPLICATION

The application and report is a record of training gained to demonstrate the attainment of personal competence across a range of activities which relate to the sections of the written report (see below). It does NOT refer to the activities of an individual section, department or organisation.

PROCESSING

The VRC meets every six months. The time it takes to process each application is dependent upon the number of applications received. It is not possible to acknowledge receipt of applications.

All general enquiries should be directed to the VRC Registrar.

VOLUNTARY REGISTRATION COUNCIL

c/o Executive Business Support

City Wharf

Davidson Road

Lichfield

Staffordshire

WS14 9DZ

As the process of voluntary registration evolves, it may be necessary to modify the guidance notes, which must be read in order to ensure that your application fulfils the requirement

1. PERSONAL DETAILS

Insert the title by which you are normally addressed (i.e. Mr, Mrs., Miss, and Ms etc).

Insert a previous surname if your professional qualification certificates are under a different name.

The address for correspondence will be the one published in the Voluntary Register and should, where possible, be your work address as the information will be in the public domain. The Council must be informed of any change of address.

MODALITY APPLIED FOR – Cytotechnologist (This is a generic application form for many professions)

2. Academic and Professional Qualifications Record:

RELEVANT EDUCATIONAL QUALIFICATIONS - Record educational qualifications at the highest level obtained. Relevant educational qualifications include HNC, HND, and BSc etc. If you have no such qualifications you will need to record qualifications obtained at school/sixth form college e.g. O levels, GCSE, A levels etc. Documentary proof in the form of photocopies of certificates may be requested.

RELEVANT PROFESSIONAL QUALIFICATIONS - e.g. The Certificate in Cytology. A photocopy is requested. If not available please give full details of the venue and date taken.

Management, teaching and other qualifications may also be included.

3. Membership of Professional Bodies:

It is not a mandatory requirement to belong to a professional body however for voluntary registration to be accepted by the Health Professions Council at least 25% of the profession must belong to a professional body i.e. NAC. You may apply through the NAC website www.nac.org.uk. Category of membership is shown on the NAC membership card.

Membership has its benefits for continuing professional development and the professional bodies have been supportive of technical training and raising the profile of technical staff.

4. Articles and Publications:

Complete this section on a separate sheet if applicable and include any articles written for a professional body journal or other journals, as well as published abstracts, from poster or oral presentations at meetings. This section should only be used for publications in the public domain. For articles and publications such as those used in a hospital trust please include in the Report Section.

You may include **any other information** that you wish to draw to the attention of the Council. This may include involvement with your Professional Body or Society, activities undertaken within a health region/area or within your hospital, training/teaching experience (within the hospital or for colleges, universities or manufacturers) or research and development activity.

5. Professional Record:

Please indicate any periods of employment and career breaks or other periods of absence greater than six months in this section of your application. Continue on a separate sheet if necessary.

6. Written Report:

The report is a record of training gained to demonstrate the attainment of personal competence across a range of activities which relate to the sections of the written report. It in no way refers to the activities of an individual section, department or organisation.

Should be written using headings to establish your competence as a Cytotechnologist. It should be typed and no more than four sides of A4 paper. The following are given as suggestions only.

- a) **EXPERIENCE:** Give a brief overview of your relevant career history and duties carried out (e.g. from trainee to current position)
- b) **TECHNICAL:** Write a few paragraphs on the range of duties you have experience in. This may include preparative experience, use of equipment such as staining machines & liquid based cytology processors, maintaining health and safety, working to CPA Standards and NHSCSP Guidelines. Also include implementation of new procedures, and any participation in research and development.
- c) **CLINICAL:** Demonstrate knowledge of cervical abnormalities and terminology. Write a paragraph about cervical screening and the part you play.
- d) **COMMUNICATION:** Describe your knowledge of information technology, how computers are used in your daily activity.
- e) **MANAGING AND PLANNING:** Describe your work activity.
- f) **TEACHING AND TRAINING:** This can be specific or the teaching and training of other health care professionals or lay public.
- g) **ARTICLES:** Include details of any articles or "in house" publications not available in the public domain (copies may be requested).

7. Details of Training Received:

Include Update courses and other training such as that in liquid based cytology. These should be at a recognised training centre and include a large proportion of microscopy. If you have been working for less than two years following a career break of greater than five years you will need to supply evidence of re-training and subsequent re-assessment. It is not necessary to send copies of in house documentation. Your referee(s) should confirm re-training and competence to practice after return to work from a break in service.

8. Professional meetings and CPD Activity:

Include those undertaken in the last five years only, most recent first.

9. Reference:

Your Head of Department should provide a written reference. Also provide a name of a second referee who can be contacted, if needed. It is required that your reference is from a person who is already bound by statutory regulation of practice.

Please be aware if your Head of Department is not a registered practitioner you should supply a second reference from someone who has a good knowledge of your training and experience and who is either already on the NAC Voluntary Register, or another state register.

If you have recently changed posts you will be required to supply a reference from your previous employer.

Your referee(s) should confirm training, and any re-training undertaken and your overall competence to practice as a Cytotechnologist and recommend you for inclusion on the Voluntary Register.

REFERENCES MUST BE ON OFFICIAL HEADED PAPER (I.E. NHS, LOCAL AUTHORITY, ETC), CURRENTLY DATED AND SIGNED. PLEASE NOTE: ONLY REFERENCES DATED WITHIN 6 MONTHS OF THE DATE THE APPLICATION HAS BEEN RECEIVED BY VRC ADMINISTRATION WILL BE ACCEPTED.

10. DECLARATION:

Must be signed and dated. False declarations will be a breach of professional conduct.

CHECKLIST (PLEASE TICK)

- 2 copies (total) of the application form (1 x for VRC, 1 x for your records)
- Reference(s)
- Report
- Cheque
- Copies of professional certificates