



**Association of
Tongue-tie Practitioners**

Educate · Support · Care

ATP Constitution-Appendix 3

ATP Directory and Listings Policy (December 2023)

Version	Date	Reason for Review	Review Timeframe
1.0	October 2023	New Policy	December 2023
1.1	December 2023	Amendments Review	March 2024
		Annual Review due	March 2025

The purpose of this policy is to ensure that the parents, families, and service-users we serve, have full awareness and access to the services available to them, and to encourage and support the provision of tongue tie services across the UK.

The ATP constitution states:

“To facilitate parents to access safe and effective care from registered health professionals who, if appropriate, are registered or work within an organisation regulated by the Care Quality Commission (CQC), Healthcare Improvement Scotland (HIS) or the Regulation and Quality Improvement Authority (R&QIA).”

This policy is to be further considered in line with the ATP Constitution (part 4; Membership).

Background

As our organisation continues to grow, it has become necessary to ensure that the directory listings remain in-line and concurrent with the criteria as set by our regulatory bodies.

Also there have been reports of clinics being listed by members that do not exist or are not current on their websites which has caused concern and a potential disservice to families and other ATP members. We hope that by providing these criteria for listing that any confusion is less likely to happen.

Criteria for listing

To help make the directory fair and equitable to all users, the ATP require the following criteria prior to acceptance into the ATP directory.

For clarity of terminology

Professional Regulatory bodies are:

- Nursing and Midwifery Council (NMC)
- General Medical Council (GMC)
- General Dental Council (GDC)

Service Regulatory bodies are:

- Care Quality Commission (CQC)
- Healthcare Improvement Scotland (HIS)
- Regulation and Quality Improvement Authority (R&QIA)
- Healthcare Inspectorate Wales (HIW)

1. All members are required to provide their full professional name as it appears on their service professional regulatory body's register. This will include all middle names if that is how it appears on that register. Should a member not wish for their middle names to be visible in the ATP directory, they may be added in as initials, and will be followed by their professional credentials in brackets.

Should a practitioner wish to include their preferred name to their listing, this can be included in brackets, ie: Joseph (Joe) Bloggs RM, IBCLC.

Business/company names are to be inputted into the first line of the member's location address which allows the directory to search by company name too.

Any prefix to a practitioner's name will be removed as all credentials are listed in brackets (for example 'Dr').

2. All members must be registered by their professional regulatory body and their registration status must be current and active (ie nurse, doctor, dentist or health visitor-with active registration to NMC, GMC, GDC etc). The members professional PIN number must be provided on the form. In instances where a member has dual/multiple registrations, either profession can be used on the submission form because you are given the same PIN number for that professional body. All recognised and current qualifications can be listed as your credential(s). Members who also hold International Board Certified Lactation Consultant (IBCLC) accreditation are encourage to provide their registration PIN number.

3. All members are required to provide the service 'certificate number' (HIS) or the 'provider ID' (CQC) as registered with their service regulatory body (e.g., CQC, HIS, H&QIA) for the areas of the UK they work. This is so that when members of the public do their searches, they are aware of how each practitioner is regulated. This forms your 'evidence' of service regulation and is different to evidence of your tongue-tie service/base location.

- If you have a practising privileges arrangement, or are employed by a regulated company, then a copy of your contract, or providing a link to the company website that lists your name as an employee will suffice.

NB – this will not be required from members who reside and work in Wales until Healthcare Inspectorate Wales (HIW) begin regulation however will be required if members reside in Wales but work within a country that legally requires it.

4. One member name is allowed per listing. Should a member hold a service with one or more members, then each member will need to be listed and pay separately.
5. To confirm a member has current professional indemnity insurance, members will need to tick the relevant checkbox on the form. For members employed or working with a practising privileges arrangement, your cover will be detailed within contractual agreements.
6. When listing a **home visiting** service, members may only list ONE postcode of their choice. To 'catch' a wider catchment area they may consider widening their mileage or adding additional clarifications on their website. The radius of travel is set at the member's own preference and is a maximum mileage in terms of distance rather than travel time. The default search is set at 30 miles and can be adjusted by those searching.
7. When listing a **clinic service**, we will need evidence detailing the member's name and the address of the clinic venue. Only one piece of 'evidence' is necessary per clinic service offered. Any form of unamendable documentation is accepted that has the member's name/organisation name and full CLINIC VENUE address visible and must be related to the tongue-tie service that you offer. (Examples may include terms of a venue contract (signed by both parties), an invoice in the member's name detailing the clinic address to be evidenced, copy of a contract to the building (signed by both parties), their 'Public Liability' insurance agreement for the registered clinic address, or an equipment order ie scissors invoice).
8. Members (**all listing services**) are required to submit 'evidence' that the service exists. This ensures that the new directory is accurate and up to date, but also as this is where your service regulator may attend to inspect your service. Only one piece of unamendable 'evidence' is necessary per service offered. This 'evidence' could be an invoice in the member's professional/business name with the address and postcode detailed, and not be dated older than 6 months. (Examples may include a copy of an invoice for equipment ie scissors/sharps collection. Personal bank statements and utility bills with differing postcodes to the service postcode to be added to the directory are not accepted. Regulatory body certificates are evidence of regulation and not evidence of your tongue-tie service).

If this evidence has already been produced as part of point 7, that will suffice.

ALTERNATIVE POSTCODES (HOME VISITS)

Should you wish to offer a home visiting service, but do not wish for your homebase postcode to be visible in the ATP directory, 'evidencing' an alternative postcode that you do not manage is more complex.

Accepted evidence could be:

- a) Showing the alternative postcode advertised on your personal or your employer's website.
- b) If you have chosen your accountant's postcode then evidence linking your name / company name with the accountant.

Should a practitioner be unable to provide evidence of the service through EITHER an invoice upload OR the full postcode displayed on a website, the service is suspended from the directory until it can be provided or an alternative service postcode is evidenced.

9. For members who have an employment arrangement, both the company name and their website (unlinked, for reference purposes) will be detailed within the members listing. The member's personal website and company name is also listed within the contact details.
10. Members may list one service for their £20.00 annual fee and any additional listings will incur an annual £5 fee per listing.
There is no upper limit for private clinic entries; providing that you can evidence each clinic appropriately. Only one listing is permitted for home visits.
Directory listing amendment fees will apply from January 31st 2024.
There remain no charges for NHS listing entries.
11. NHS listing entries will need to include generic service contact details to avoid the need for frequent updating. Referral criteria is encouraged to be disclosed for upload to the ATP website. The referral criteria are visible on the directory for public viewing and will be copied directly from the submission form.
12. One form submission per service or for each clinic location is required.

Data protection

The ATP will not share any personal identifiable data or documents outside of the committee without your agreed consent. The ATP committee will comply to the 'Privacy & Cookies notice' as found at <https://www.tongue-tie.org.uk/privacy-and-cookies-notice>.

Maintaining an up-to-date listing

Members are responsible for keeping their listing up to date and will need to inform the membership secretary (membership@tongue-tie.org.uk) at their earliest convenience of changes to their listings within the directory by using the relevant forms submitted through

the website. (<https://www.tongue-tie.org.uk/directory-amendment-form>). One amendment form per service or for each clinic location is required.

Compliance

ATP members are autonomous and accountable to families, regulatory bodies, and themselves and so any suggestion of a breach in the way services are listed is taken very seriously. It could be considered as dishonest and fraudulent behaviour not only by ATP but also by colleagues and regulatory bodies. CQC, HIS and R&QIA also have the right to spot-inspect any advertised service unannounced and work closely with other regulatory bodies too (such as NMC, GDC & GMC) who may consider investigating such matters further.

ATP Members who advertise a non-existent service type will be subject to the ATP professional code of conduct policy, appendix 1 to the ATP Constitution (<https://www.tongue-tie.org.uk/constitution>). The ATP committee reserves the right to remove any listing and/or membership without refund, and members may also be referred to their professional regulatory and service regulatory bodies for further investigation should this be felt necessary. As per the ATP constitution Part 4-Membership section (g) an independent arbitrator service appointed by mutual agreement and the right to appeal remain applicable.

The NMC code of conduct is structured around four themes that set common standards of conduct and behaviour by those on their register. The ATP concurs with these principles and these standards are considered applied to our members regardless of their regulatory body.

1. Prioritise people.
2. Practice effectively.
3. Preserve safety.
4. Prioritise professionalism and trust.

All services/members are subject to randomised checks to ensure their service meets with these standards and to ensure that the directory remains current and up to date.

Any requests or changes to this document is recommended to be put in writing and addressed to our membership secretary membership@tongue-tie.org.uk for ATP committee consideration, and any proposals are forwarded for the next ATP meeting for comments and voting. This policy will be reviewed annually at our AGM in line with the ATP constitution.

Useful links:

<https://www.tongue-tie.org.uk/constitution>

<https://www.tongue-tie.org.uk/directory-application-form>

<https://www.tongue-tie.org.uk/directory-amendment-form>

<https://www.tongue-tie.org.uk/nhs-listings-application-form>

<https://www.tongue-tie.org.uk/privacy-and-cookies-notice>

<https://www.cqc.org.uk/news/providers/briefing-providers-tongue-tie>

https://www.cqc.org.uk/sites/default/files/20150428_scope_of_registration_independent_medical_practitioners_working_in_private_practice.pdf

<https://www.cqc.org.uk/guidance-providers/scope-registration-who-has-to-register>

ATP Committee December 2023

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