





Making a declaration to the Health and Care Professions Council (HCPC) concerning the temporary provision of services

Guidance notes

Please make sure that you read this guidance before completing the declaration form. **DO NOT** submit the guidance with your declaration.

Who can use this form?

This declaration form is to be used by visiting health and social care professionals from a Relevant European State other than the UK. If you are established elsewhere in the European Economic Area (EEA) or Switzerland within one of the professions regulated in the UK by the Health and Care Professions Council and would like to practise on a temporary and occasional basis in the UK, you may make a declaration to that effect (a temporary declaration) to us.

The other Relevant European States are:

FI - Finland **AT** - Austria **BE** - Belgium FR - France **BG** - Bulgaria **HR** - Croatia **CH** - Switzerland **HU** - Hungary CY - Cyprus IE - Ireland IS - Iceland **CZ** - Czech Republic **DE** - Germany IT - Italy **DK** - Denmark LI - Liechtenstein **EE** - Estonia LT - Lithuania **EL** - Greece **LU** - Luxemboura LV - Latvia **ES** - Spain

MT - Malta

NL - Netherlands NO - Norway PL - Poland PT - Portugal RO - Romania SE - Sweden

SI - Slovenia SK - Slovakia

What is temporary declaration?

Temporary declarations are governed by Directive 2005/36/EC, which enables qualified professionals to exercise free movement rights. That Directive is given effect in the UK principally by the European Union (Recognition of Professional Qualifications) Regulations 2015 (the Regulations).

The temporary process only applies to those visiting health and social care professionals who wish to provide services in the UK on a **temporary and occasional** basis. Once a declaration has been made, the person will be added to the HCPC Register on a temporary basis. The professional is only entitled to use their Home State title, in the language of that State, and cannot use one of the titles regulated by the HCPC.

What professions does the HCPC regulate?

The HCPC Register consists of the following professions: arts therapists, biomedical scientists, chiropodists / podiatrists, clinical scientists, dietitians, hearing aid dispensers, occupational therapists, operating department practitioners, orthoptists, paramedics, physiotherapists, practitioner psychologists, prosthetists / orthotists, radiographers and speech and language therapists.

Criteria for making a temporary declaration

In order to make a temporary declaration to the HCPC you must:

- be a national of a Relevant European State or have similar acquired rights;
- be established to practise a relevant profession in a Relevant European State other than the UK; and
- have moved to the UK to provide professional services on a 'temporary and occasional' basis, having regard to the duration, frequency, regularity and continuity of those services.

Where can you find out more about temporary declarations?

- You can visit the European Commission's website at http://ec.europa.eu/internal_market/qualifications/future_en.htm
- You can visit our website at http://www.hcpc-uk.org/aboutregistration/declaration/ This page provides useful information about temporary declarations. You can also download the full text of the Directive 2005/36 there.
- You may contact our office by calling us Monday to Friday, 8am to 6pm on +44 (0)300 500 4472 or +44 (0)20 7582 5460 or via e-mail at international@hcpc-uk.org
- The UK National Contact Point (www.ukncp.org.uk) provides information about the temporary provision of services. You may also contact the National Contact Point in your state of professional establishment.

Renewal of your declaration

A temporary declaration is valid for up to one year but a further declaration may be made. Decisions on accepting declarations are made by us on a case-by-case basis, to ensure that services are being provided on a temporary and occasional basis consistent with the Regulations.

With any renewal declaration you must submit current evidence of your establishment to practise your profession in another Relevant European State.

Supporting documents

Please note that in order for your declaration to be considered you must submit:

- a declaration form;
- proof of EEA or Swiss nationality or similar acquired rights (certified copy);
- proof of legal establishment to practise your profession in another Relevant European State or, if the profession is not regulated in that State, appropriate proof of having practised the profession for at least one out of the last ten years (this document must be an original);
- proof of your professional qualifications (certified copy).

Translations

All documents other than proof of your nationality must be translated to English. The HCPC only accepts certified translations of documents.

Original documents

Please do not send us any original documents which you may need in the future. Completed applications and declarations received by the HCPC are our property and will not be returned.

Certified documents

In the section above, we explain what documents you must send with your declaration. These documents **must be certified** as a true copy of the original by a person of standing in the community. This means that the person you ask to certify your document(s) must compare the original and copy and write on the copy "I **certify** that this is a true copy of the original document" and must sign it and print their name and professional title. A "person of standing in the community" includes:

- a lawyer or notary;
- a regulated health or social care professional;
- a bank manager or other bank official;
- a member of the judiciary or other judicial official;
- a minister of the Church, Rabbi, Imam or other recognised religious official;
- a member of a parliament, other legislative body or local government authority;
- a consular officer;
- a teacher or lecturer: or
- a member of a regulated profession.

This is not an exhaustive list and if you have any questions as to whether a person may certify documents please contact us.

Our standards

Before submitting the declaration to us you must ensure that you have read and understood our standards of conduct, performance and ethics. You can download this document from the Publications section of our website.

Processing your declaration

Please allow approximately four weeks from when we receive your documents for your declaration to be processed.

If your declaration is completed correctly and accompanied by all the supporting documents your name will be added to the Register by being included in the list of visiting health and social care professionals published on our web site. You can view this list at http://www.hcpc-uk.org/aboutregistration/declaration/

The HCPC may refuse to accept or renew a declaration if you give false information, withhold relevant details or do not meet the criteria for making a temporary declaration.

Registration Department 184 Kennington Park Road, London, SE11 4BU	** +44 (0)300 500 4472 or +44 (0)20 7582 5460 ** www.hcpc-uk.org ** international@hcpc-uk.org	hcpc health & ca professions council
Name of applicant	The HCPC to con Declaration registration number: TEMP	nplete this section

Declaration to the Health and Care Professions Council (HCPC) pursuant to Article 7 of the EC Professional Qualifications Directive (2005/36/EC) concerning the temporary provision of services ¹

	temporary provis	91011 01 5	ei vices
1. Provision	of services - declaration details		
1.1 This declar	ration concerns:		
A first pro	ovision of services in the United Kingdom (pleas	e complete sect	ions 1 to 6)
An annua	al renewal of the declaration ¹ (please complete s	ections 1 to 4 a	nd 7 to 9)
1.2 Profession My declaration tick one box):	concerns the practise of a profession which co	rresponds to the	e following part of the HCPC Register (please
Part 1	Arts therapists	Part 9	Physiotherapists
Part 2	Chiropodists / podiatrists	Part 10	Prosthetists / orthotists
Part 3	Clinical scientists	Part 11	Radiographers
Part 4	Dietitians	Part 12	Speech and language therapists
Part 5	Biomedical scientists	Part 13	Operating department practitioners
Part 6	Occupational therapists	Part 14	Practitioner psychologists
Part 7	Orthoptists	Part 15	Hearing aid dispensers
Part 8	Paramedics		
are established	ractice on a temporary and occasional basis mu I in your Home State and in the language of that rary and occasional basis must use that title an	t State. For exan	nple, a Polish 'fizjoterapeuta' practising in the
	pplications or declarations ously applied for registration or been on the HC	PC Register?	
Yes	No		
If you answered	d yes please give your registration / application	/ declaration nui	mber:

Please attach a copy of any previous declaration and if possible, of the first declaration made.

2. Identity of applicant											
2.1 Name of the applicant:											
First name											
Surname / Family name											
Previous surname(s)											
2.2 Nationality (ies):											
AT BE	BG	СН	CY	CZ		DE [DK		EE		
EL ES	FI	FR	HR	HU		E [IS		П		
п п	LU	LV	MT	NL		10	PL		PT		
RO SE	SI	SK	UK								
Other(s)			\top			П			П	\top	
											_
2.3 Passport number or Identi	ity card numb	er:		г						_	7
Country of issue			Щ	Number		Щ	!!!	Щ.	Щ	<u> </u>	
Country of issue				Number					Ш		
2.4 Gender:											
Male Female											
2.5 Date of birth (DD/MM/YYY	Ƴ):										
/ /											
2.6 Place of birth:											
Town											
Country											
2.7 Contact details in Relevan	t European S	tate of establ	ishment	(your Home	e State):						
House / flat number:			#	+++	#	Н.	Н.		<u> </u>	+	=
Street name:			#	 		Щ.	<u> </u>		Щ.	Щ	=
Town / city:			Щ		<u> </u>	Щ		Щ	Щ	Щ	\perp
Post code:										Ш	
Country:											
Telephone (with dialling codes)):										
Mobile (with dialling codes):											
E-mail			TT								

2.8 Contact details in the United H	Kingdom	(requi	red):																	
House / flat number:																				
Street name:																				
Town / city:																				
Post code:																				
Telephone (with dialling codes):																				
Mobile (with dialling codes):																				
E-mail																				
2.9 Which address should we use Home State United Kir 3. Profession concerned		COITES	ропа		, vviti	T you														
O. 1. Drofossion pursuad3 in your LL	oma Sta	.+																		
3.1 Profession pursued ³ in your H	OTTIC OTC	ue:																		
Home State (Country) where provide(d) your services	e you					title that							Pre			nal glisl		е		
Home State (Country) where	e you												Pro					e		
Home State (Country) where	e you												Pro					e		
Home State (Country) where	e you												Pro					e		
Home State (Country) where provide(d) your services 3.2 Please state the professional activities: Professional activities:	e you		lang	juag	e of	that	Stat	te	vices	son	a te	emp		in	Eng	glisl	1		t	
Home State (Country) where provide(d) your services 3.2 Please state the professional activities: Professional activities: 1 2	e you		lang	juag	e of	that	Stat	te	vices	s on	a te	emp		in	Eng	glisl	1		k	
Home State (Country) where provide(d) your services 3.2 Please state the professional activities: Professional activities:	e you		lang	juag	e of	that	Stat	te	rices	s on	a te	emp		in	Eng	glisl	1		t t	
Home State (Country) where provide(d) your services 3.2 Please state the professional activities: Professional activities: 1 2 3	e you		lang	juag	e of	that	Stat	te	vices	s on	a te	emp		in	Eng	glisl	1		t	

Please indicate the title of the profession in the language of the Member State(s) in which you are established and in English.

4. Legal establishment in one or more relevant European States

For the purposes of this declaration, "legal establishment" refers to the pursuit of the profession in compliance with the rules relating to professional qualifications, including the related training conditions, and all the rules specific to the pursuit of the profession. Legal establishment precludes any prohibition, albeit temporary, from pursuing the profession.

4.1 Is this profession regulated in the Relevant European State(s) in which you are established?
Yes No I do not know
If you answered no please move to question 4.4.
Any comments:
4.2 Are you legally established in any Relevant European State(s) to pursue the profession referred to in 3.1 ⁴
Yes No
If you answered yes , in which Relevant European State are you legally established?
LIAT LIBE LIBG LICH LICY LICZ LIDE LIDK LIEE
LIEL LIES LIFI LIFR LIHR LIHU LIE LIS LIT
LI LIT LU LLV LMT LNO LPL LPT
L RO L SE L SI L SK
Other(s)
If no , please explain:
4.3 Are you subject to authorisation or supervision by a competent administrative authority?
Yes No
If your answer is yes , please indicate which one, giving the relevant contact details and your registration or licence number.
Please provide supporting evidence of your attestation:
Name of the competent authority
Contact details
Your registration / licence number
4.4 If the profession referred to in 3.1 is not regulated in the Relevant European State(s) in which you are established and you have not undergone regulated education and training for the profession in 3.1 have you acquired professional experience for that profession of at least one year during the last ten years on the territory of that State(s)?
Yes No If you answered yes please provide supporting evidence.
Any comments:

⁴ If you are established in more than one Relevant European State, please supply the information for each of the States in question.

4.5 Do you belong to a professional association or an equivalent body?
Yes No If your answer is yes , please indicate which one, giving the relevant contact details and your registration number:
Name of the professional association
Contact details
Your registration/licence number
5. Supporting documents annexed to this declaration (if requested)⁵
5.1. You are required to provide the following supporting documentation with this declaration:
Proof of nationality
Attestation(s) of legal establishment
Evidence of professional qualifications
Proof of one year professional experience within the last 10 years (if profession is not regulated in Home State).6
6. Declaration
 I confirm that: the information I have provided in this declaration is correct; I intend to provide services in the United Kingdom on a temporary and occasional basis using my Home State professionatitle in the language of that State; I am proficient in the English language to the level which is necessary for practising my profession in the United Kingdom; I will provide any recipients of my services in the United Kingdom with the information set out in Regulation 26 of the European Union (Recognition of Professional Qualifications) Regulations 2015 (the Regulations); I have the insurance cover or other means or personal or collective protection with regard to professional liability which is set out below (this declaration does not apply to social workers). Set out insurance or other details here (continue on a separate sheet if necessary):
Print name
Signed Date (DD/MM/YYYY)//

To be completed concerning relevant documents required by the legislation of the host Member State and only with a view to a first provision of services.

To be completed only if the profession is not regulated in the Member State of establishment.

7. Renewal Information ⁷
7.1. When did you provide services in the United Kingdom (DD/MM/YYYY)?
From / / / to / / / /
From / / / to / / / /
From / / / to / / / /
From / / / to / / / /
From / / / to / / /
Any comments:
7.2. Please state under which title(s) you have provided your services in the United Kingdom:
7.3. Please indicate the professional activities carried out during the periods you provided services (please list the activities).
Professional activities:
1
2
3
4
5
6
7
8. Other comments such as any changes to the supporting documentation referred to in 5.1
Please provide an evidence of your current establishment to practise your profession in your Home State.

⁷ This information will be retained by the competent authority to monitor service provision.

9. Declaration

I confirm that:

- the information I have provided in this renewal declaration is correct;
- I intend to provide services in the United Kingdom on a temporary and occasional basis using my Home State professional title in the language of that State;
- I am proficient in the English language to the level which is necessary for practising my profession in the United Kingdom;
- I will provide any recipients of my services in the United Kingdom with the information set out in Regulation 26 of the European Union (Recognition of Professional Qualifications) Regulations 2015 (the Regulations);
- I have the insurance cover or other means or personal or collective protection with regard to professional liability which is set out below.

Set out insurance or other details here (continue on a separate	sheet if necessary):
Print name	
Declaration registration number: TEMP	
Signed	Date (DD/MM/YYYY)