

**Fitness to Practise Guidance**
Fitness to practise is a measure of health and wellbeing as it relates to an individual’s work as a practitioner.

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Someone who is fit to practise is healthy enough to provide safe, competent and ethical care in their work. A practitioner’s fitness to practise may be affected by their physical or mental health, or other circumstances that prevent them from offering a safe, ethical or effective service to their clients. Fitness to practise is not just about professional performance, but also actions which may damage public confidence in the profession.

This may include conduct that takes place outside of the workplace, such as acts resulting in criminal investigations.

**Maintaining fitness to practise**

There are a number of ways for practitioners to maintain their fitness to practise including:

* Looking after their health and wellbeing so that they can practice safely, competently, and ethically
* Regularly assessing their own health in the context of their professional responsibilities
* Discussing physical and mental health issues, and other circumstances which may affect fitness to practise in supervision
* Seeking medical help, and making adjustments to and/or withdraw from their regular work duties if they are having health difficulties that affect their ability to provide safe, ethical and competent care.

**Fitness to practise and health conditions and / or disabilities**

In the vast majority of cases, members who have an ongoing health condition can practice safely and effectively. Some people may have health conditions/ disabilities which mean that at times their fitness to practise is affected.

**Concerns about fitness to practise**

If a member is concerned that their health may be affecting their fitness to practise, and they are actively practicing, we recommend that they take the following actions:

* Seek help with mental/ physical health issues, and any other issues affecting their fitness to practise
* Work with their employer / supervisor to make any necessary adjustments to their duties so that they can continue to provide safe, ethical and competent care, or withdraw from practice to address their recovery, if safe practice is not possible at this time.

**Fitness to practise and addictions**

The addictions workforce is enriched by the involvement of practitioners who have experienced and overcome addiction problems. Past problems with addictions can however lead to vulnerability to relapse, particularly in the early stages of recovery. For this reason AP suggest that members who have had addiction problems should spend a period of 2 years free from problematic addictive behaviours before working in the addictions field. For many this will involve abstinence from any substance / complete cessation of addictive behaviours, and for all it will involve being entirely free of substance-related/ addictive behaviour problems including impairment of any kind whilst at work.

It is important for all practitioners in the sector (whether they have had a prior addiction issue or not) to assess their vulnerability to addictive behaviours, and if necessary, put in place strategies to limit the risk of returning to/ developing these behaviours. These strategies may include:

* Peer-led recovery support
* Use of supervision for support to discuss issues that make them vulnerable to addiction problems
* Counselling/ treatment to reduce risk of relapse

Where addiction problems risk becoming/ become problematic, it may be necessary to take additional measures including:

* Reducing / stopping work with clients
* Access to treatment and support including counselling/ keywork, medical interventions, and residential rehabilitation

**Fitness to practise and AP membership requirements**

In general, your fitness to practise will be assumed, unless AP receives information to the contrary. If during your membership your fitness to practise becomes impaired and/or you feel you become unsafe to work with clients, you should consult your supervisor in relation to whether you should continue to practise. You should also refer to our [Standards of Conduct and Ethics](https://addictionprofessionals.org.uk/media/dyhcbdwk/standards_of_conduct_ap.pdf). Members should be aware that under AP’s Complaints and Disciplinary Procedures it is possible for members of the public/ other professionals to raise issues regarding their Fitness to Practice.