

Primary Care Support England

PCSE Online



Performer List Application Guide

Version V1.1 - August 2022



England

Primary Care Support England

Introduction

Applications to join the Performers List is now managed through PCSE Online.

All primary care performers wishing to provide NHS primary care services are required to be on the Performers Lists for England.

This applies to all:

- **General Practitioners**
- **Ophthalmic Performers**
- **Dental Performers**

All applicants wishing to join the Performers List for England need to create and submit a **Performers List Entry Application**s via PCSE Online.

This user guide is a support tool for you as an applicant and provides comprehensive information regarding the application process.



Please complete and submit your application form with mandatory supporting documents as soon as possible, to help prevent any delays in starting your role. If there are any issues with the pre-admission checks, the application process will take longer to complete.

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If there is a specific section in this guide that you would like to see, please **click** one of the icons below to be taken straight to that section.



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Section 1

Important information before you start your application

Important information before you start your application

During the application process, you will need to upload a number of documents to support your application.

Click on the squares below to check each document off before you submit your application:

Photo ID

Scanned copy of signature

Graduation Certificate

Last appraisal (if required – not required for Foundation dentist or pre-reg optoms)

Basic life support certificate

Child safeguarding

Adult safeguarding

IELTS (if required)

Police check (if resided/worked abroad in last 5 years)

The following documents are also required, but these can be supplied after the application is submitted:

DBS certificate

(Please note that the name on the DBS certificate needs to match the name on the photo ID)

Indemnity Certificate

Occupational Health Certificate (Dental applicants only)

Hints And Tips For Submitting Your Performer List Application Through PCSE Online

7m 42s

Click on the **Play** button below to see a webinar covering the application process



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Section 2

Registering for a PCSE Online account

Registering for a PCSE Online account

Applicants to the Performers List for England need to register for PCSE Online to gain access to the online application form they need to complete and submit.

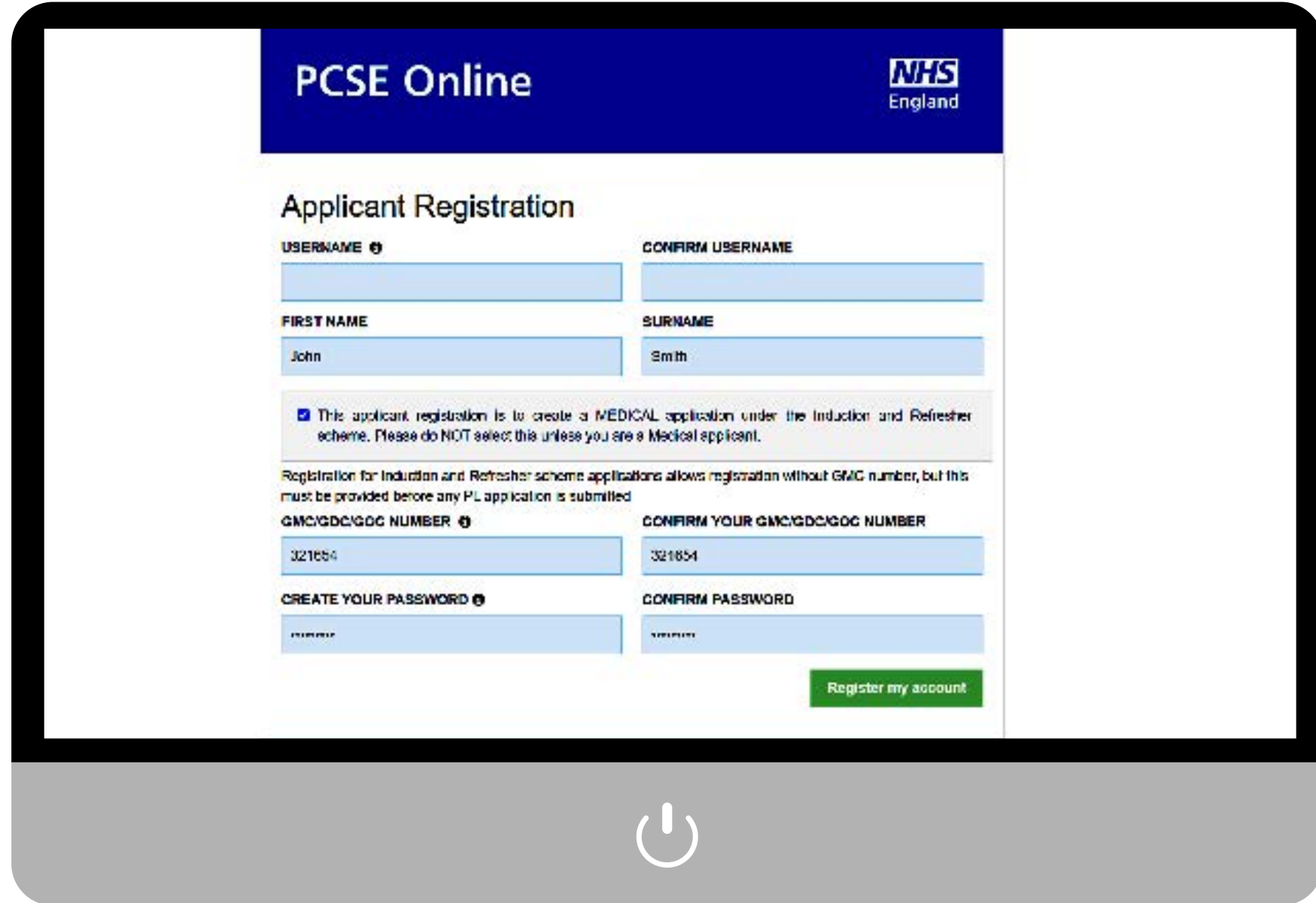
To register for PCSE Online you need to:

- Visit <https://secure.pcse.england.nhs.uk>
- Select Register as a Performers List Applicant from the drop down menu and click Register

A pop up message will appear reminding you to use your existing credentials to Log in if you already have a PCSE Online account, Proceed if not.



Click Proceed to be taken to the applicant registration Screen

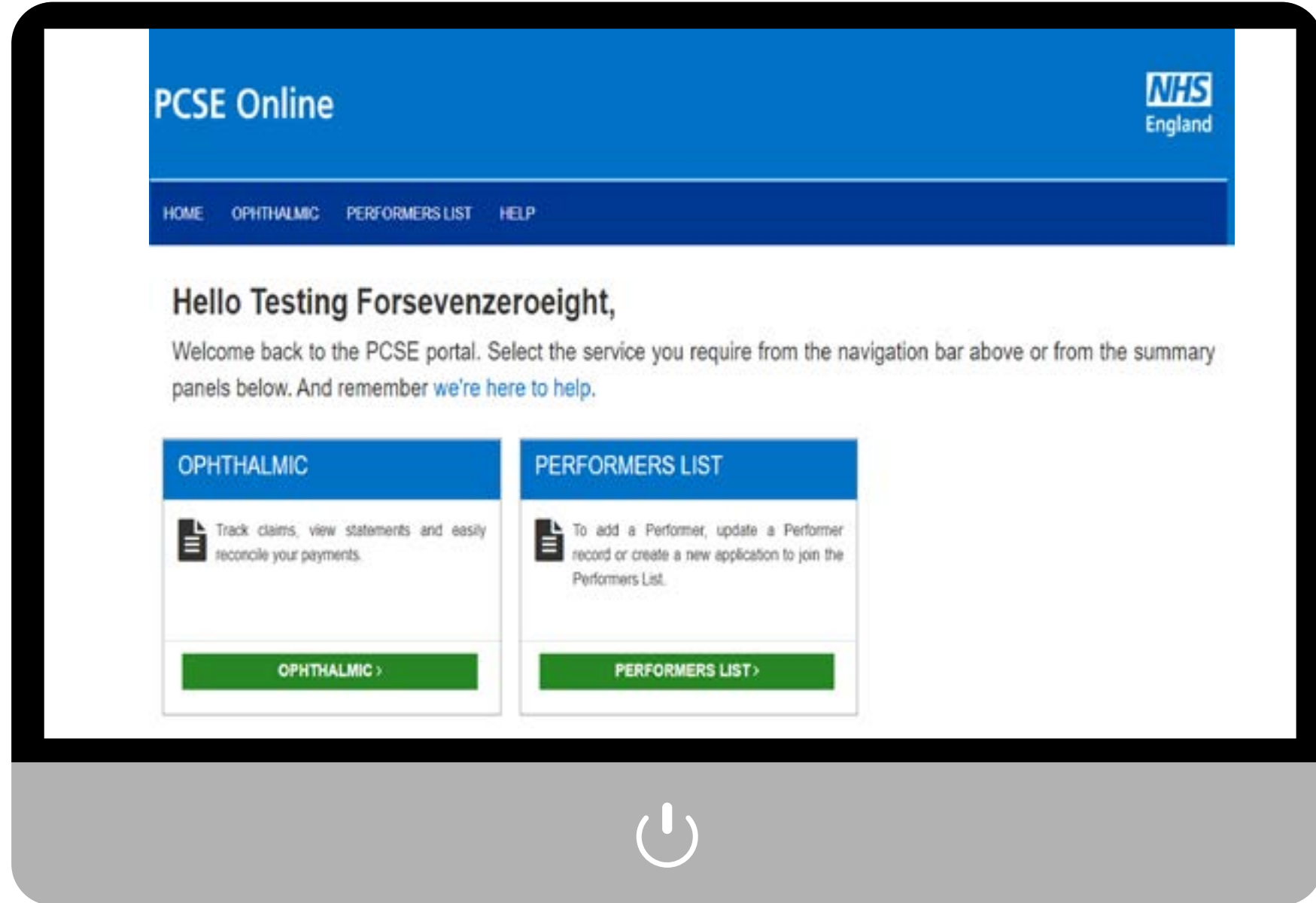


Applying to the Performer List if you already have a PCSE Online account

If you already have a PCSE Online account and wish to submit an application to the Performer list, you need to:

- Visit <https://secure.pcse.england.nhs.uk>
- Log in using your existing credentials
- Click the Performer List button on your PCSE Online home page
- Complete the applicant registration page

Click on the magnifying glass icon to see more information:



[Go back to the contents page](#)

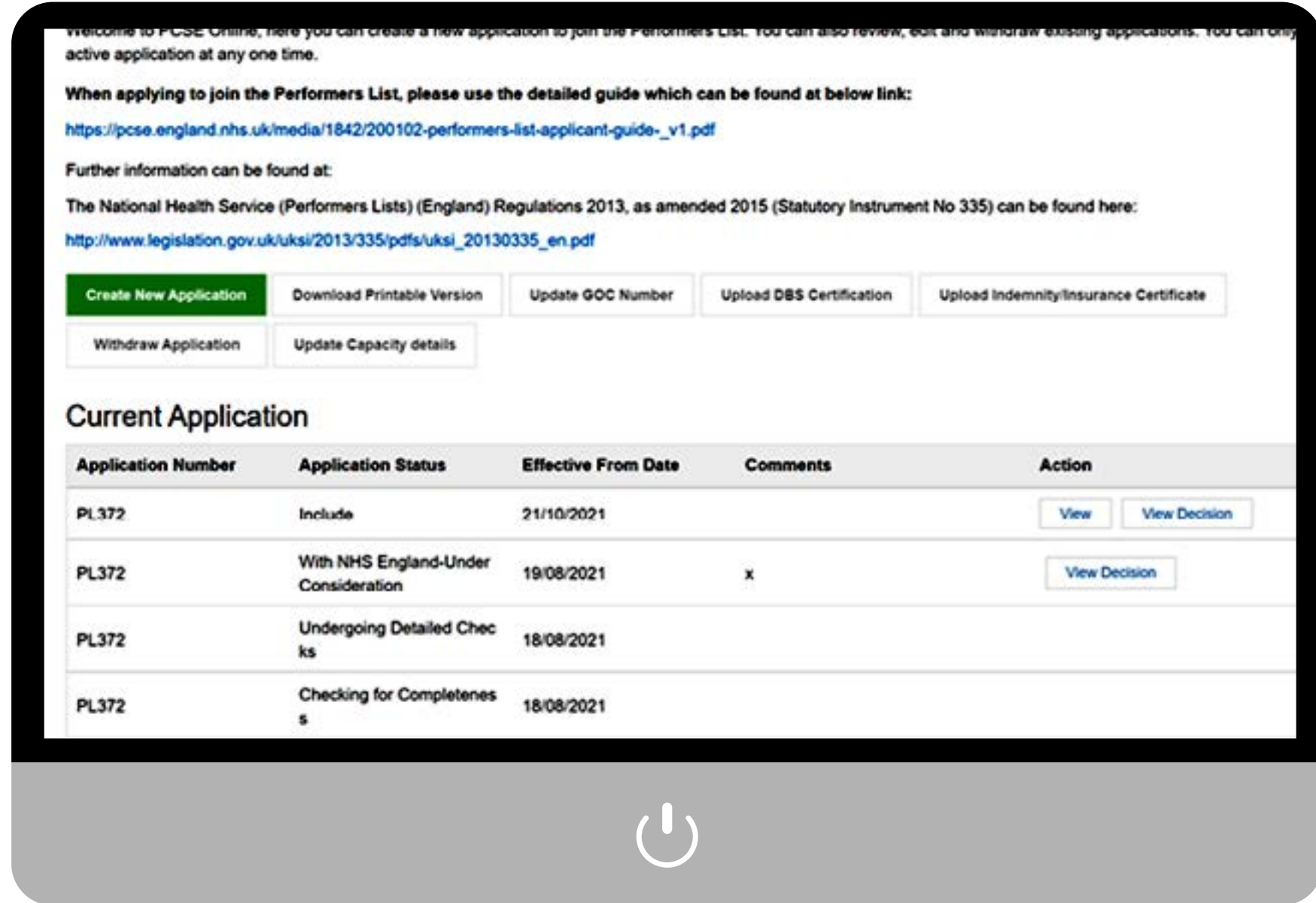
Section 3 **PCSE Online homepage for PL applicants**

PCSE Online homepage for PL applicants

Once you have set up your PCSE Online account, you will have access to a personal home page.

From here you can:

- Track the progress of any submitted forms
- Withdraw an application
- Download and print your completed application
- Upload your DBS certificate as this may not have been available to you during the application submission
- Update your contact details
- Update your GOC number (Pre-Registration Optometrists Only)



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Section 4

How to fill in the application

Section 1 - Personal details

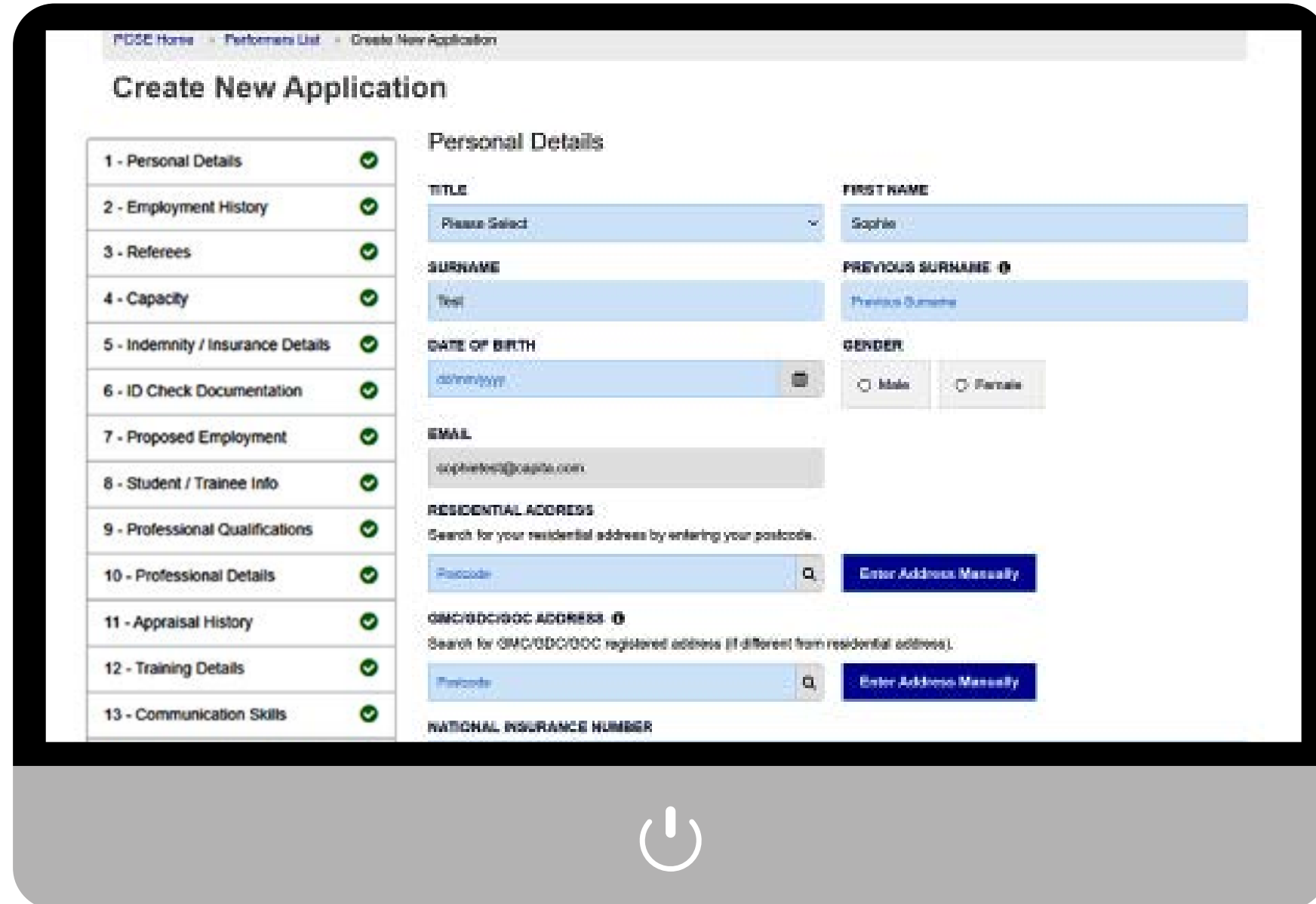
Once you have created a PCSE online account, from your homepage you need to click on the Create a new application button.

The first page of the application is the Personal Details section.

Here you will need to enter your:

- Title
- First name, surname and your previous surname (if applicable)
- Date of birth
- Gender
- Residential address
- GMC/GDC/GOC address
- National Insurance number
- Contact telephone number/
Alternative telephone number

Click on the magnifying glass icon to see more information:



Section 2 - Employment history

In this section you will need to upload your CV.

- Click the browse button
- Select the CV file you wish to attach
- Then click the upload icon (highlighted)

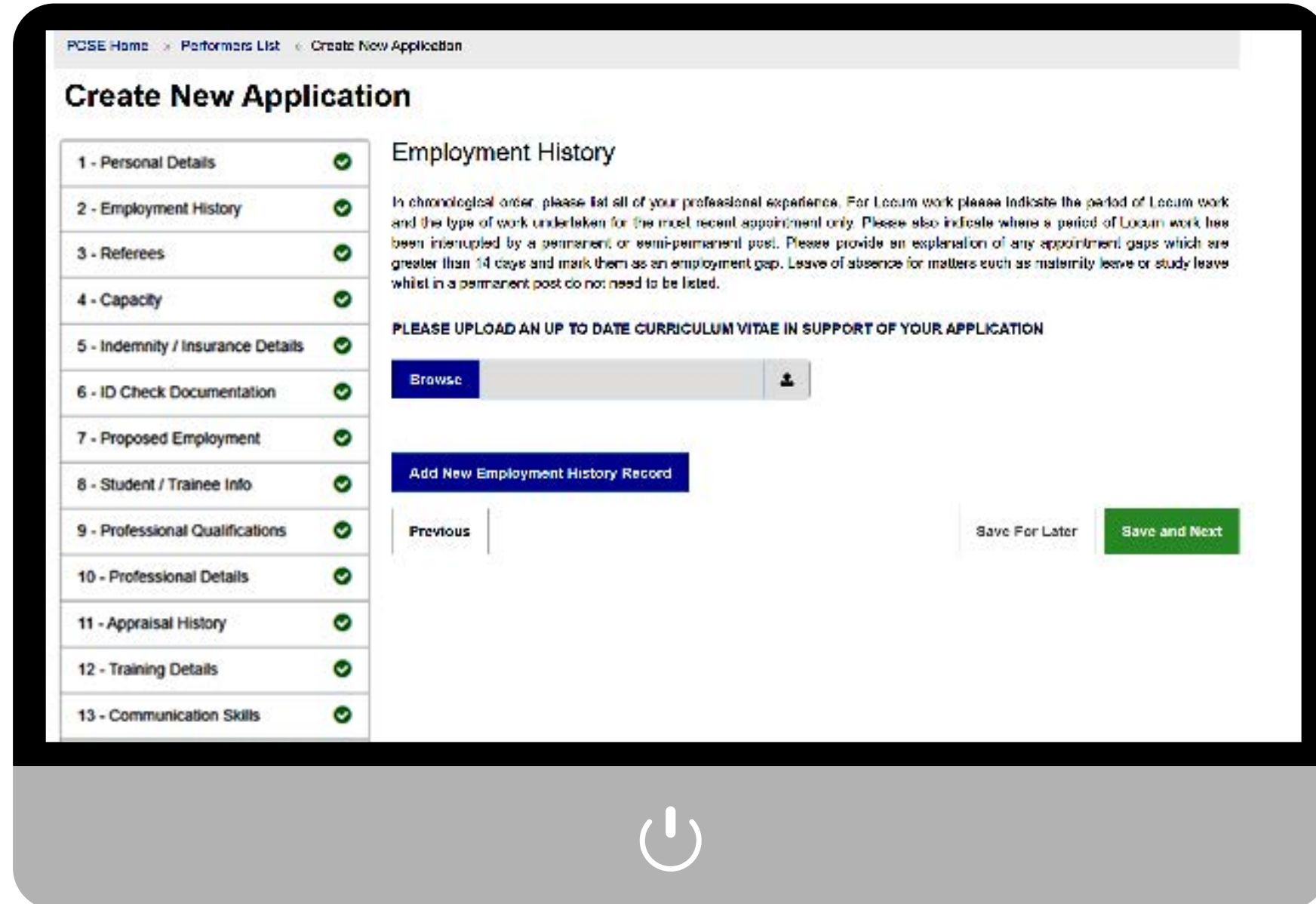
The uploaded CV will appear on the screen. A 'Delete' button will be next to it. To replace a document you have already uploaded, click on 'Delete' and upload a new CV as necessary.

When you have uploaded your CV successfully, you will need to add your employment history, creating a record for each role or break in employment you have had.

To do this, click on 'Add New Employment History Record'.

Please note: you do not need to include an employment record for current roles. You will be prompted for this information in Section 7 – Proposed Employment

Click on the magnifying glass icon to see more information:



Section 3 - Referees

In this section, You are required to enter contact details for two referees who have agreed to provide clinical references relating to two recent or current posts. If you provide details for a referee based outside the UK, they will also need to include proof of their registration.

Click on **Save & Next** to save details for Referee 1. The information will be validated and if successful, you will be able to complete details for Referee 2 in the same way.

Click on the **Save & Next** button to save details for Referee 2. The information will be validated, and if successful you will be able to proceed to Section 4 "Capacity".

Click on the magnifying glass icon to see more information.

1 - Personal Details ✓

2 - Employment History ✓

3 - Referees ✓

4 - Capacity ✓

5 - Indemnity / Insurance Details ✓

6 - ID Check Documentation ✓

7 - Proposed Employment ✓

8 - Student / Trainee Info ✓

9 - Professional Qualifications ✓

10 - Professional Details ✓

11 - Appraisal History ✓

12 - Training Details ✓

13 - Communication Skills ✓

14 - Additional / Supporting Info ✓

15 - Declarations ✓

Referees

Please provide the details of two referees who have consented to provide clinical references relating to two recent posts, one of which will usually be a current post. Each of these must have lasted at least three months without a significant break. Where this is not possible, please provide a full explanation as to why this is the case. Referees must be Registered Clinical Practitioners, where this is not possible please provide a full explanation as to why this is the case. Reference information will be shared over email and the Referee must have confirmed to you that they consent to have their information shared in this way.

Referee 1

TITLE
Please Select

FIRST NAME
First Name

SURNAME
Surname

CONTACT TELEPHONE NUMBER
Telephone Number

ALTERNATIVE TELEPHONE NUMBER
Alternative Telephone Number

REFEREE 1 EMAIL ADDRESS
Email Address

REFEREE 1 ADDRESS
Search for your residential address by entering your postcode.
Postcode

Enter Address Manually



Section 4 - Capacity

In this section, You are required to declare the type of performer that you will be working as. I.e. a:

- **Medical**
- **Dental**
- **Ophthalmic**

Enter your capacity details. Based on the capacity selected, respective fields will open.

Click on the magnifying glass icon to see more information:

Create New Application

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓
14 - Additional / Supporting Info	✓

Capacity

PLEASE INDICATE WHICH NATIONAL PERFORMERS LIST (ENGLAND) YOU WISH TO JOIN

Please Select

SELECT SUB TYPE OF PERFORMER

Please Select

PLEASE ENTER YOUR REGULATORY BODY NUMBER (GMC/GDC/GOC)

000006

ARE YOU INTENDING TO WORK AS A LOCUM?

Yes No

Previous Save For Later **Save and Next**



Section 5 - Indemnity/Insurance

In this section, you are required to declare the type of insurance/indemnity that you have arranged.

Fill in the relevant details on screen and upload your indemnity/insurance certificate

Click on the magnifying glass icon to see more information:

Please note: If you do not have your indemnity certificate when filling in your application, please note that this can be uploaded at a later date, same as the DBS certificate.

Once done, click on the **Save & Next** button and the information will be validated. If successful, you will be able to proceed to Section 5 "Indemnity/Insurance Details". Alternatively, click on "Save for Later" to save the information for later use.

Please note: Clicking on "Save for Later" does not validate the information provided. It will only be validated when you return to the "Capacity" section and click on "Save & Next".

The screenshot shows a web application interface for creating a new application. The breadcrumb trail is 'POSE Home > Performers List > Create New Application'. The main heading is 'Create New Application'. On the left is a vertical progress bar with 13 steps, each with a green checkmark: 1 - Personal Details, 2 - Employment History, 3 - Referees, 4 - Capacity, 5 - Indemnity / Insurance Details (the current step), 6 - ID Check Documentation, 7 - Proposed Employment, 8 - Student / Trainee Info, 9 - Professional Qualifications, 10 - Professional Details, 11 - Appraisal History, 12 - Training Details, and 13 - Communication Skills. The main content area is titled 'Indemnity / Insurance'. It contains several sections: 'PLEASE SELECT TYPE OF COVER YOU HAVE' with radio buttons for 'Indemnity' and 'Insurance'; 'PLEASE RECORD YOUR INDEMNITY/INSURANCE CERTIFICATE NUMBER (IF KNOWN)' with a text input field containing 'Indemnity/Insurance Number'; 'PLEASE RECORD YOUR INDEMNITY/INSURANCE PROVIDER NAME (IF KNOWN)' with a text input field containing 'Professional Indemnity Ltd'; 'INDEMNITY/INSURANCE START DATE' with a date input field containing '20/01/2022' and a calendar icon; 'INDEMNITY/INSURANCE END DATE' with a date input field containing '20/01/2022' and a calendar icon; a paragraph of text: 'Please confirm evidence that you have an appropriate indemnity/insurance certificate which provides you with cover in respect of liabilities that may be incurred in carrying out your work.'; a 'Download' button with a download icon; and a checkbox: 'The DBSIP scheme covers appropriate clinical negligence, whilst that may arise in general practice. (It's not...'. At the bottom center of the screen is a power button icon.

Section 6 - ID Check Documentation

In this section, you will need to declare your nationality and provide evidence of this in the form of photographic ID.

Click on the magnifying glass icon to see more information:

PCSE Home > Performers List > Create New Application

Create New Application

- 1 - Personal Details ✓
- 2 - Employment History ✓
- 3 - Referees ✓
- 4 - Capacity ✓
- 5 - Indemnity / Insurance Details ✓
- 6 - ID Check Documentation ✓**
- 7 - Proposed Employment ✓
- 8 - Student / Trainee Info ✓
- 9 - Professional Qualifications ✓
- 10 - Professional Details ✓
- 11 - Appraisal History ✓
- 12 - Training Details ✓

ID Check Documentation

PLEASE UPLOAD A SCANNED IMAGE OF THE PHOTOGRAPH PAGE OF YOUR PASSPORT OR ALTERNATIVE PHOTO ID ⓘ

Browse

File Name	Action
temp.txt	Delete

PLEASE UPLOAD A SCANNED IMAGE OF YOUR HANDWRITTEN SIGNATURE

Browse

File Name	Action
temp.txt	Delete

Previous Save and Next

Section 7 - Proposed employment

In this section, you need to enter the details of your employment arrangements and a declare a commitment percentage %. This is the percentage of your working time that you will dedicate to this employment

Enter the information requested. Further information about each of the fields is provided in the table below. Please note that you can add details for more than one practice and NHS England Local Office in those sections marked *

PCSE Home > Performers List > Create New Application

Create New Application

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓

Current / Proposed Employment Details

Please provide the details of your employment arrangements and the percentage commitment (%) you have in each case. For guidance only, nine sessions is the equivalent to 100% commitment.

If your employment is not with a Practice or you do not have a current or proposed employment role, please select a Local Office or County.

N.B. Trainees and students should provide their training Practice details

Do you have a current or proposed employment at a Practice? *****

Yes No



Section 8 - Student / Trainee info

In this section, you need to declare whether you are a trainee or not.

Click on the magnifying glass icon to see more information:

Create New Application

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓
14 - Additional / Supporting Info	✓

Trainee Details

ARE YOU A STUDENT OR A TRAINEE (i.e. GP Registrar, Dental Foundation Trainee or Pre registration Optometrist):

Yes No

SELECT THE DATE OF COMMENCEMENT OF PLACEMENT AS A TRAINEE

SELECT EXPECTED END DATE OF YOUR PLACEMENT AS A TRAINEE

NAME OF APPROVED TRAINER (IF KNOWN)



Section 9 - Professional qualifications

In this section, you need to enter your professional qualification information.

You will also need to upload a copy of your qualification:

- **Certificate of graduation** (Dental and Medical Practitioners only)
- **Postgraduate training from a UK optometry department**

Click on the magnifying glass icon to see more information:

Create New Application

1 - Personal Details	✔
2 - Employment History	✔
3 - Referees	✔
4 - Capacity	✔
5 - Indemnity / Insurance Details	✔
6 - ID Check Documentation	✔
7 - Proposed Employment	✔
8 - Student / Trainee Info	✔
9 - Professional Qualifications	✔
10 - Professional Details	✔
11 - Appraisal History	✔
12 - Training Details	✔
13 - Communication Skills	✔
14 - Additional / Supporting Info	✔

Professional Qualification

Please list all of your primary, vocational and postgraduate qualifications.

Upload copies of qualification certificates below. If the document provided is not in English, a translation that has been issued by a legitimate organization and signed by an official translator is required.

Upload

File Name	Action
test.docx	Delete

Add New Professional Qualification

QUALIFICATION <input type="text" value="Qualification"/>	INSTITUTION <input type="text" value="Institution"/>
DATE OF QUALIFICATION <input type="text" value="dd/mm/yyyy"/>	

Add Professional Qualification

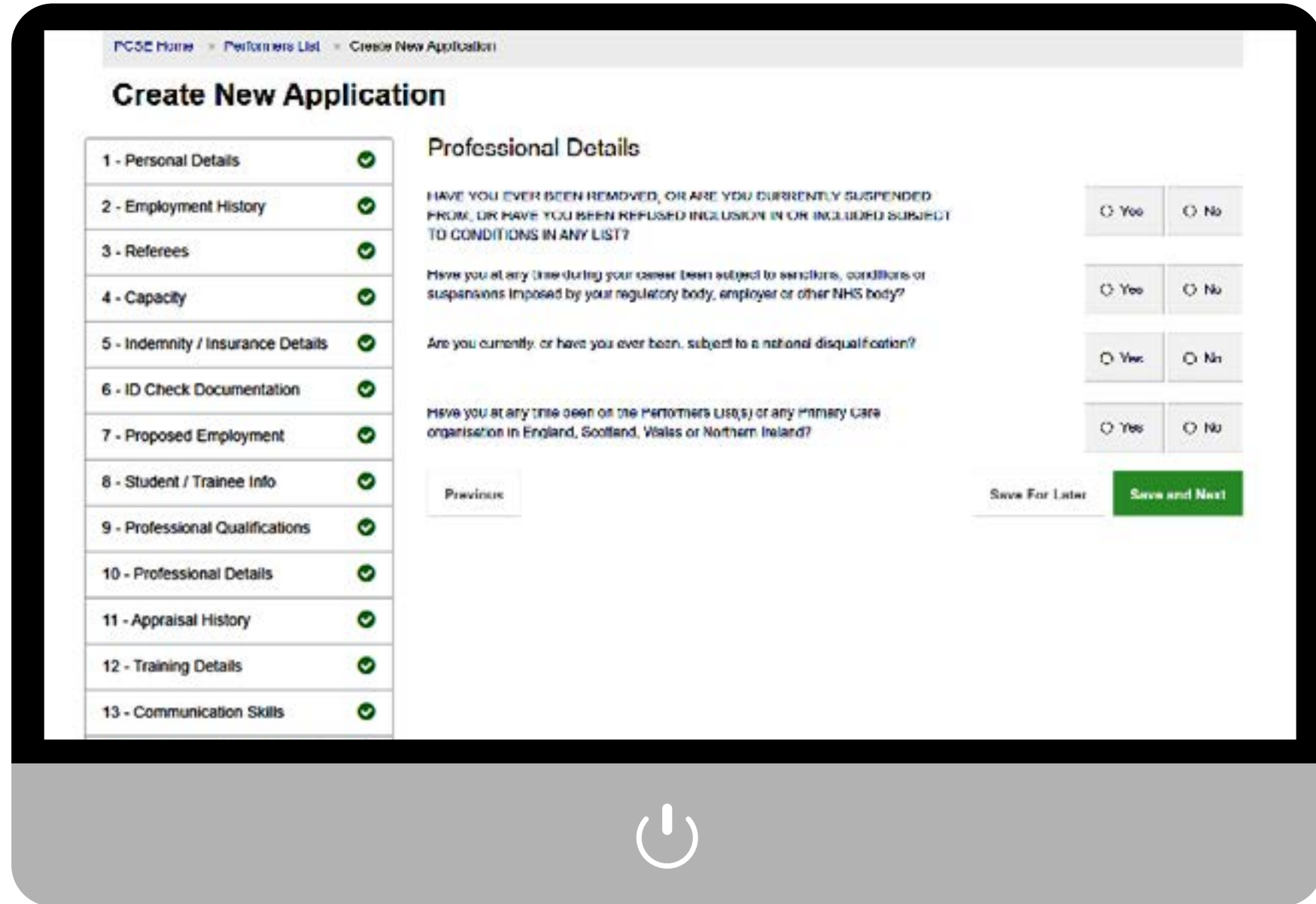
Close

Previous
Save For Later
Save and Next

Section 10 - Professional details

In this section, you will need to enter your professional details.

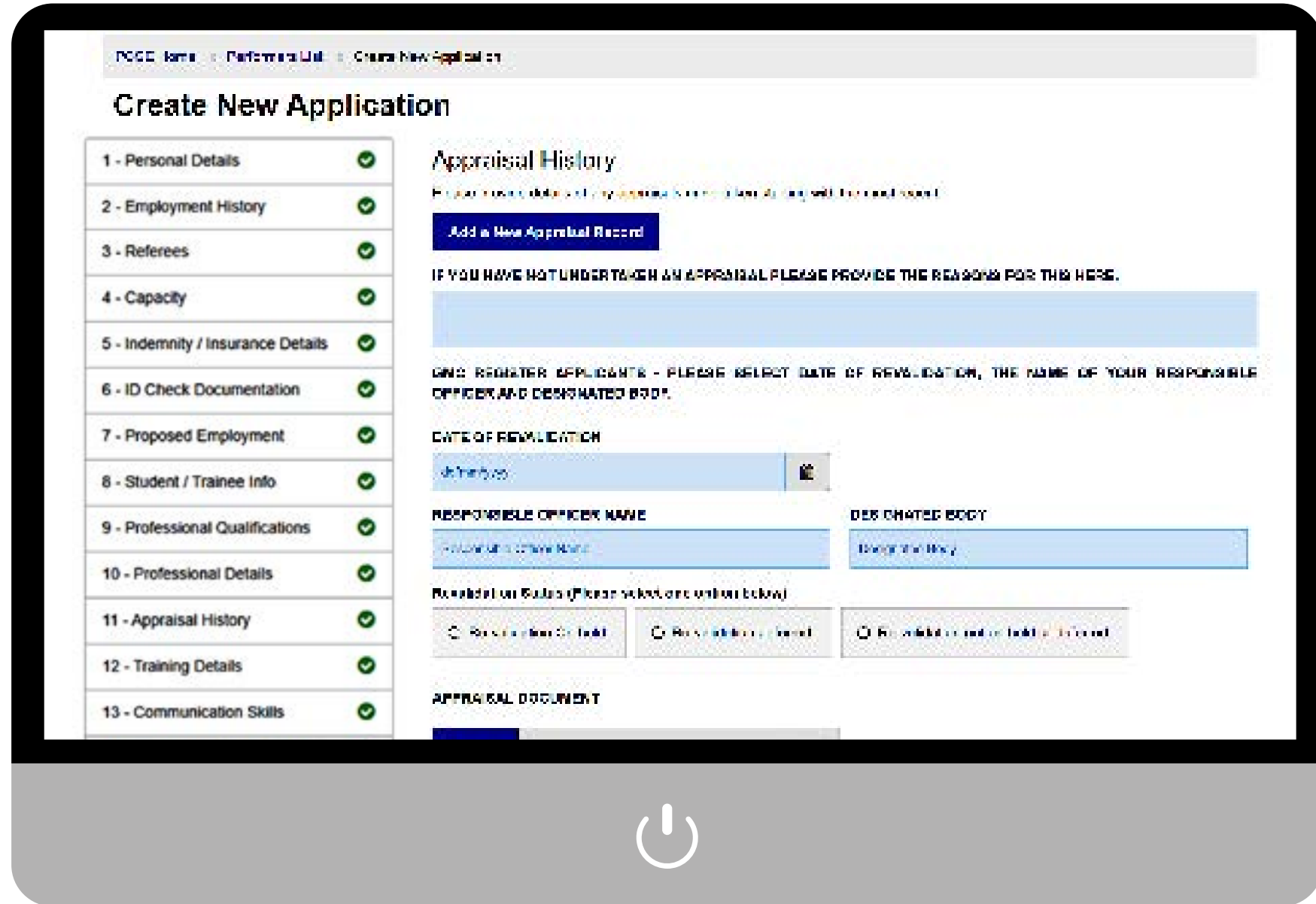
Simply answers **Yes** or **No** the statements on screen and then click **Save and Next**.



Section 11 - Appraisal history

On this page, you will need to enter your appraisal history.

If you have not received an appraisal, for whatever reason, you need to declare it on this page.



Section 12 - Training details

On this page, you will need to provide the following:

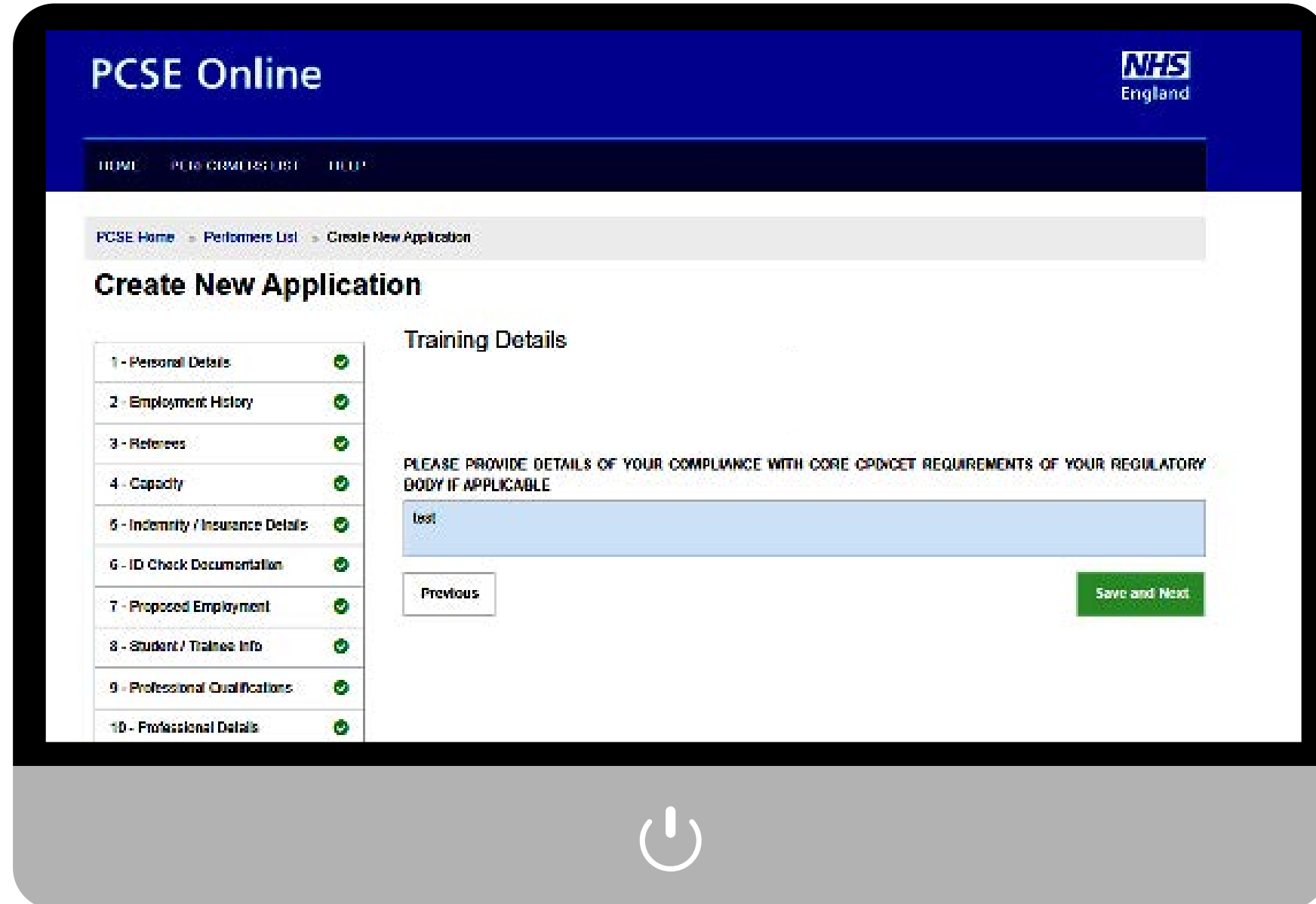
Dental Performers

- Attach a copy of your Basic Life Support training certificate (The screen right shows a BLS certificate upload)
-
- Provide details of your compliance with core CPD/CET requirements of your regulatory body if applicable

Medical and Ophthalmic

- Provide details of your compliance with core CPD/CET requirements of your regulatory body if applicable.
- Please note that medical and Ophthalmic performers will only see the free type text box to enter the above details

Click on the magnifying glass icon to see more information.

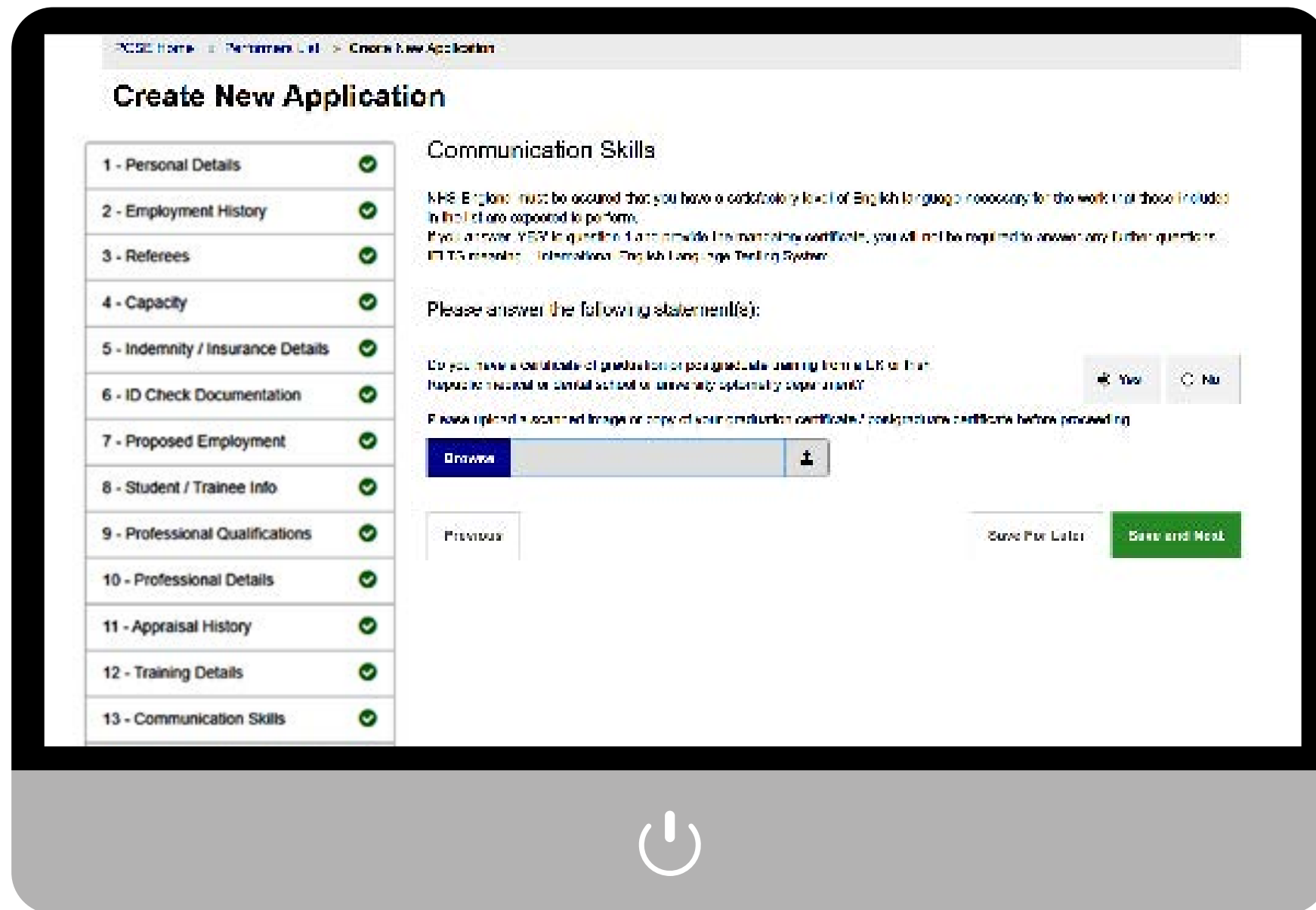


Section 13 - Communication skills

In this section, you will need to enter your communication skills. Please note that not all the following questions will be relevant to all applicants, however each question requires a response of either 'Yes' or 'No' to proceed.

If you answer 'Yes' to the question, "Do you have a certificate of graduation or postgraduate training from a UK or Irish Republic medical or dental school, or university optometry department?", And upload the mandatory certificate, you will not be required to answer any further questions in this section.

Click on the magnifying glass icon to see more information.



Section 14 - Additional/Supporting information

In this section, you will need to enter any additional information you wish to provide in support of your application.

Click on the magnifying glass icon to see more information.

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓
14 - Additional / Supporting Info	✓
15 - Declarations	✓

Additional/Supporting Information

If required, please provide any other information that NHS England may reasonably require to determine your application.

PLEASE UPLOAD ANY OTHER INFORMATION THAT NHS ENGLAND MAY REASONABLY REQUIRE TO DETERMINE YOUR APPLICATION

Section 15 - Declarations

In this section, you need to carefully read and answers Yes or No to the on screen statements.

Click on the magnifying glass icon to see more information.

PCSE Home > Performers List > Create New Application

Create New Application

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓

Declarations

In accordance with Regulation 4, sub-paragraph 5 of The National Health Service (Performers Lists) (England) Regulations 2013, as amended 2015, Performers are required to make a declaration with their application. If you answer "Yes" against any of the statements below, you must provide an explanation of the facts giving rise to that matter. Please include those concerned, relevant dates and any outcomes for each that apply on the following screens. Please note that answering "Yes" to one or more of these questions does not automatically preclude an Applicant from being included in the National Performers List(s) or being included in the National Performers List with conditions. The Rehabilitation of Offenders Act 1974 and The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013 do not apply for the purpose of this declaration. Offences considered "spent" under that act must be declared.

Do you have a criminal conviction in the United Kingdom, including one in respect of which you have been bound over? Yes No

Have you ever accepted a police caution in the United Kingdom? Yes No

Have you ever accepted a conditional offer under section 302 of the Criminal Procedure (Scotland) Act 1995(c) (fixed penalty: conditional offer by procurator fiscal) or a compensation offer under section 302A of that Act(d) (compensation offer by procurator fiscal) or agreed to pay a penalty under section 115A of the Social Security Administration Act 1992(a) (penalty as alternative to prosecution)? Yes No

Are you in proceedings in Scotland for an offence been the subject of an order under section 240(2) or (3) of the Criminal Procedure (Scotland) Act 1995 (admonition and absolute discharge)(b) discharging you absolutely? Yes No



Section 17 - Upload DBS/Police Checks

In this section, you will need to enter your DBS/Police Checks information and upload evidence.

It is possible to upload your DBS certificate after you have submitted your application. You can do this from the home page. Please note that your application cannot be considered until this has been uploaded.

Where you upload any supporting documents, you will have the option to delete those documents where required.

Click on the magnifying glass icons to see more information.

Create New Application

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓
14 - Additional / Supporting Info	✓
15 - Declarations	✓

Upload DBS/Police Checks

Please upload a scanned copy of your Disclosure and Barring Service (DBS) - Enhanced Criminal Records Certificate. If you do not have one you will need to apply for one before your application can be fully considered. You can submit your application for initial review/checks before this is uploaded, provided all other mandatory information and forms are provided.

[Browse](#)

File Name	Action
test.jpg	Delete

PLEASE PROVIDE EVIDENCE YOU HAVE APPLIED FOR YOUR DBS CERTIFICATE BY PROVIDING THE DBS APPLICATION REFERENCE NUMBER HERE

Please note: You can log back into PCSE Online to upload a DBS Certificate once you have submitted your application. Your application will not progress to be considered by NHS England until this is completed.

Have you been resident abroad in last five years?

Yes No

[Previous](#) [Save and Next](#)



Section 18 - Face to face location preference

In this section, you will need state your preferred location for a face-to face meeting.

Please note: These meetings are currently being held through Zoom while under Covid restrictions.

This meeting needs to happen so a PCSE representative can check your Passport (photo ID).

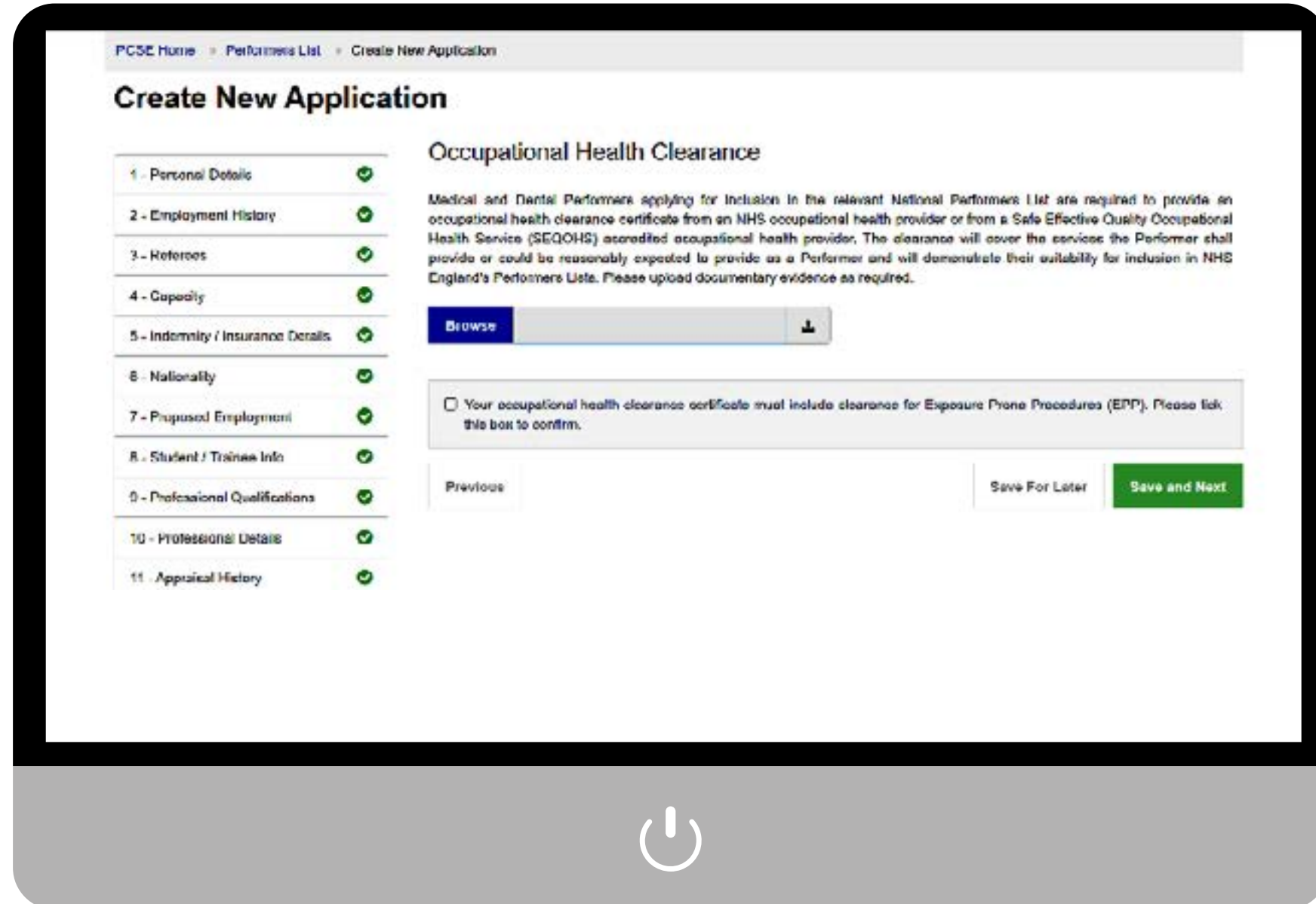
The screenshot shows a web application interface for creating a new application. The top navigation bar includes 'HOME', 'PERFORMERS LIST', and 'HELP'. Below this, a breadcrumb trail reads 'PCSE Home > Performers List > Create New Application'. The main heading is 'Create New Application'. On the left, a vertical list of application sections is shown, each with a green checkmark: 1 - Personal Details, 2 - Employment History, 3 - References, 4 - Capacity, 5 - Indemnity / Insurance Details, 6 - Nationality, 7 - Proposed Employment, 8 - Student / Trainee Info, and 9 - Professional Qualifications. The right-hand side is titled 'Face to Face Location Preference'. It contains a text block: 'As part of the application process, your identity and documents will need to be verified in person. Please select from the following list where you would like to attend this face to face appointment. This could be a location that is nearest to your work or home.' Below this is a dropdown menu with the text 'Please Select'. At the bottom of this section are three buttons: 'Previous', 'Save For Later', and 'Save and Next'.

Section 19 - Occupational health clearance (Dental Only)

Please note! The Occupational Health section is only applicable to Dental Performers.

Medical and Ophthalmic performers will be taken straight to the Undertakings section and this page will not appear!

In this section, you will need to attach and upload a copy of your occupational health clearance certificate.



Section 19 - Undertakings (Section 20 for Dental Performers)

In this section, you will need to read the undertakings statements carefully and select the ones appropriate to the role you are applying for.

When completing this section of the application, if you need further information regarding the regulations, you can go to www.legislation.gov.uk

1 - Personal Details	✓
2 - Employment History	✓
3 - References	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - ID Check Documentation	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓
14 - Additional / Supporting Info	✓
15 - Declarations	✓
16 - Declarations(Body Corporate)	✓
17 - DBS / Police Checks	✓
18 - Net Team Preference	✓

Undertakings

20.1 Regulation 20(2) – The Medical Practitioner must give the following undertakings –

(a) if the Medical Practitioner is a contractor under a general medical services contract, to comply with the requirements of paragraph 124 of Schedule 6 to the National Health Service (General Medical Services Contracts) Regulations 2004 (GMS); and

(b) if the Medical Practitioner is not a contractor under a general medical services contract, to comply with the requirements related to it sub-paragraph (b) as though the Medical Practitioner were such a contractor.

If you require further information regarding these regulations, you can go to www.legislation.gov.uk

20.2 I am a qualified Practitioner and agree to provide the following undertakings, required by Regulation 4, sub paragraph 3 of the NHS (Performers Lists) (England) Regulations 2013, as amended.

I agree to:

- Provide any declaration or document required by Regulation 9 of the NHS (Performers Lists) (England) Regulations 2013, as amended;
- Notify NHS England within seven days of any material change to the information provided in the application, whether such change occurs before NHS England's determination of my application or subsequently;
- Maintain an appropriate indemnity arrangement which provides cover in respect of liabilities that may be incurred in carrying out work as a Practitioner at all times and to provide evidence of such an indemnity arrangement to NHS England on request;
- Notify NHS England if I am included, or if I apply to be included, in any other list;
- Co-operate with an assessment by NHS Resolution where appropriate and when requested to do so by NHS England; and
- Participate in any appraisal system established by NHS England

Note: Type 1 Armed Forces GPs are not required to participate in any appraisal system established by NHS England. Type 1 Armed Forces GPs are required to provide a copy of their annual appraisal relating to their provision of medical services as a Type 1 GP.

20.3 I declare that:

- I am in good health and know of no health issues which could impact my performance
- I am fully registered with my professional registration body with a licence to practise in the name shown at the beginning of this



Section 20 - Submit application (Section 21 for Dental Performers)

In the final section, you will need to read and accept the statements shown on screen and then click the submit button.

Please note: If you need to re-visit a section in the application, click the previous button and complete the page accordingly. You can then progress back to section 21 and submit your application.

When you submit your application, a unique reference number will be displayed on the conformation screen. This can be used to follow-up on your application if necessary. Confirmation of your application submission and your unique reference number will also be emailed to you at the email address used when you registered for PCSE Online.

HOME PERFORMERS LIST HELP

PCSE Home > Performers List > Create New Application

Create New Application

1 - Personal Details	✓
2 - Employment History	✓
3 - Referees	✓
4 - Capacity	✓
5 - Indemnity / Insurance Details	✓
6 - Nationality	✓
7 - Proposed Employment	✓
8 - Student / Trainee Info	✓
9 - Professional Qualifications	✓
10 - Professional Details	✓
11 - Appraisal History	✓
12 - Training Details	✓
13 - Communication Skills	✓

Submit Application

You are about to submit your application to be included on NHS England's Performers Lists. Your application will be checked by Primary Care Support England (PCSE) who will contact your referees, conduct a face to face interview with you and consult with third parties before submitting your application to NHS England for a decision to be made. You will be contacted shortly by the National Engagement Team (PCSE) to arrange a face to face interview. You can log into the PCSE Online at any time to see what stage your application is at or to withdraw your application.

I confirm that I consent to NHS England or delegated agents to perform an online DBS Check.

I confirm that I have applied to The Disclosure and Barring Service (DBS) or provided a DBS certificate.

I confirm I have provided evidence of professional indemnity or insurance or I intend to provide professional indemnity or insurance but I understand I must do so to be included in the Performers Lists for England.

I confirm I have a license to practise or that I will obtain a license before I can be included in the Performers Lists for England.

I confirm that to the best of my knowledge, all the information provided as part of this application is correct at the time of submission.

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Section 5 **Further Support**



Primary Care Support England

Your feedback helps us to make things better.

How satisfied are you with this interactive guide for submitting an application to join the performers list.

Very Satisfied

Satisfied

Dissatisfied

Very Dissatisfied

Go back to the contents page

Contact Us

For further support and information, please visit our website:



PCSE Website

www.pcse.england.nhs.uk

To visit PCSE Online:

PCSE Online

For queries relating to a particular service, please use our:



Online Enquiries Form

<https://pcse.england.nhs.uk/contact-us/>

Or alternatively, you can call our:



Customer Support Centre

0333 014 2884