10 April 2021

Nadine Dorries MP Minister for Patient Safety, Suicide Prevention and Mental Health Department of Health and Social Care 39 Victoria Street London SW1H 0EU

Dear Ms Dorries,

Re: National licensing scheme for all cosmetic treatments

We were very pleased to see Government support for the Botulinum Toxin and Cosmetic Filler (Children) Private Members' Bill in the last parliamentary session, which is an issue that has brought together Members of Parliament from all political parties. This legislation is of vital importance in protecting under-18s from harm, but there is much more that still needs to be done, to protect all members of the public from harm associated with cosmetic treatments. When performed badly, these procedures can cause infection, allergic reactions, disfigurement, psychological and emotional trauma and the need for hospitalisation and corrective treatment.

We would like to highlight three changes that the Government should action as a priority. The creation of a national licensing scheme for practitioners of cosmetic treatments would ensure that all those who practise are competent and safe for members of the public. Linked to this, we would like official guidance developed for the training and qualifications expectations for all practitioners, including knowledge and application of infection controls, as well as a requirement for medical insurance. Finally, there needs to be much better recording of adverse events as well as awareness raising done with members of the public to ensure that all cases that go wrong can be tracked and improvements to safety made as a result. Members of the public need better tools and knowledge in order to protect themselves.

We would like to see the Government create a national licensing scheme that would simplify and strengthen the powers for local authorities to regulate this sector effectively. In our joint survey of regulators, *The ugly side of beauty*, which we published together with the Institute of Licensing, we found overwhelming support for the introduction of an England-wide licensing scheme, with 90% of respondents agreeing that this could improve the regulatory system and protect the public from harm. Likewise, the Joint Council for Cosmetic Practitioners (JCCP) has identified considerable support for the design and implementation of such a national licencing scheme and has outlined the Council's proposal as part of its recently published *Ten Point Plan for Safer Regulation in the Aesthetic Sector*.

Many cosmetic treatments provided to members of the public are largely unregulated because of serious flaws in the current legislation. Only treatments that fall directly under the definitions in the Local Government's Miscellaneous Provisions Act 1982 can be registered in most areas in England. Newer treatments pop up all the time and often fall outside the scope of the original definition of regulated treatments. This means that many become effectively unregulated.

There are currently several voluntary registers of accredited practitioners and approved education and training providers. However, these are not mandatory for practitioners to join, which means that there are many un-accredited practitioners providing treatments directly to members of the public without any checks. Of qual has also advised the JCCP that they are not empowered to require a regulated Awarding Body to evidence that their qualification is compliant with an industry standard in the absence of this being mandated by the Government, which is concerning. The development of official guidance on the training and qualification expectations for practitioners of different treatments is key to safer practices. All practitioners should also be required to complete first aid and infection control training as a condition for obtaining a licence to practise. This is already being implemented as part of the licensing regime being developed in Wales. The current registration regime does not specify the level of type or training that practitioners should complete before starting to perform treatments, including infections linked to special procedures in the list of notifiable diseases that must be reported to local councils or local health protection teams. The practice of dermal fillers and botulinum toxins should only be administered by qualified, registered and experienced healthcare professionals due to the higher risks associated with these types of treatments.

We are also concerned that there is no legal requirement for non-healthcare practitioners, such as beauty therapists, to have medical insurance cover for non-surgical procedures that they provide to members of the public. Having an adequate medical insurance cover for all non-surgical procedures is a key public protection requirement.

Last but not least, we would also like to see the Department commission a public awareness raising campaign on this issue as well as the collection of national datasets to monitor the number of adverse effects and complaints from the public due to malpractice in this sector. Royal Society of Public Health found that two thirds of respondents had not checked whether the technician was registered with their local councils. An awareness campaign would help with public's understanding of how to make the necessary checks and where to report malpractice when things go wrong.

We would be delighted to discuss this further with you and look forward to hearing how we may be able to work together to design a better regulatory system to protect public health.

Yours sincerely,

Phil James, CEO, The Chartered Institute of Environmental Health

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Christina Marriott, CEO, Royal Society for Public Health

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