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Joint Council for Cosmetic Practitioners in Association with Hamilton Fraser Charter for Recommended Best Practice in Insuring Non-Surgical Aesthetic Practitioners

Introduction

The JCCP has raised concerns with Government that currently there is no legal requirement for non-healthcare practitioners to have medical insurance cover for non-surgical procedures that they provide to members of the public. Evidence exists to confirm that where medical insurance is provided for both health care and non-health care practitioners the actual amount of medical indemnity cover provided may be inadequate to meet the actual costs associated with successful litigation claims. The JCCP is aware also that the provision of patient/public redress schemes are not currently mandated within the UK, thereby exposing members of the public to receive an apology or compensation for the consequences of unacceptable practices.

We are committed to the principle that the offer of aesthetic-related insurance should be accompanied by a requirement to demonstrate relevant knowledge and competence in the provision of cosmetic treatments and in the identification and management of potential complications; there is no current requirement for this, with some insurers providing cover to cosmetic practitioners after the completion of a short course (1-2 days) with no assurance of competence, safety or proficiency. Associated with this issue is the need to require practitioners to undertake appropriate and regular continuing personal and professional development (CPPD) undertaken with appropriately accredited training provider organisations to maintain and update knowledge/competence as part of annual insurance renewal.

Consequently, we believe that the UK Government should seek to introduce legislation to ensure that all health and non-healthcare practitioners have adequate and robust medical insurance cover for non-surgical procedures that they provide to members of the public. In support of this objective the JCCP has joined forces with Hamilton Fraser to develop the following principles that we consider represent a charter for recommended best practice in the aesthetics sector.

Hamilton Fraser is the largest and most used insurance provider in the non-surgical cosmetic sector. It has very strict policies and procedures that ensure that it only accepts appropriately qualified and registered health care professionals for insurance purposes who present with evidence of both appropriate experience and qualifications to practise safely. The need for regulation of all practitioners in this sector has been the subject of much debate since the Keogh Review which was published in 2013. More recently we have seen the introduction of voluntary registers approved by the Professional Standards Authority (PSA) and a government enquiry into the sector led by the All-Party Parliamentary Group (APPG) on Beauty, Aesthetics and Wellbeing. The APPG reported in June 2021 and its report and recommendations are currently being considered by Government. Some of the key recommendations included in the report relate to insurance:



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Recommendation 13. 'The Government should require all practitioners *to hold adequate and robust insurance cover* and set an industry standard for the level of proven competence that is required to gain coverage. Any future national licensing scheme must also make this a requirement of holding a license'.

Recommendation 14. 'Practitioners must also be required to hold regulated qualifications for the aesthetic non-surgical cosmetic treatments they provide, alongside appropriate industry approved CPD training, to maintain and update their skills, knowledge and competence as part of *annual insurance renewal*, particularly as new treatments continue to emerge in the market'.

This document sets out the Hamilton Fraser's position with regard to insurance in this complex and growing sector. It recognises that Hamilton Fraser can only work within the existing legislative and regulatory framework but also considers options for more and better regulation. **The broader context of the need for change is set out in the graphic accompanying this document.**

Set out below is the JCCP and Hamilton Fraser view of the current landscape for insurance and regulation that describes issues that could be progressed and actioned now (in accordance with recommended best practice) and areas where change is required.

Key Areas for Consideration in our Quest for Best Practice

Requirement to be insured

Currently there is no legal requirement for non-healthcare practitioners (e.g., beauty therapists and others) to have medical indemnity insurance cover for non-surgical procedures that they provide to members of the public. The JCCP and Hamilton Fraser position is as follows:

Any practitioner that undertakes any cosmetic or aesthetic procedures should be mandated to purchase and maintain adequate medical indemnity insurance for the procedures that they provide. However, insurance for invasive procedures involving the use, or injection, of botulinum toxins, temporary or permanent dermal fillers should be restricted to those persons who are educated and trained to the standards set down by both Health Education England (2015) and by the JCCP/CPSA (2018). Only suitably qualified and experienced doctors should be insured to perform hair restoration surgical procedures (which is a CQC regulated and restricted procedure).

A therapist/beautician qualified up to NVQ Level 3 or equivalent would be able to purchase indemnity insurance for laser and light hair removal only, superficial to medium intensity fruit and AHA chemical peels and micro-needling subject to suitable training and supervision.



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There is evidence to confirm that where medical indemnity insurance does exist the actual amount of indemnity cover may be inadequate to meet the actual costs associated with successful litigation claims.

It is also important to differentiate between 'full malpractice insurance' and 'treatment insurance'. Most therapists and beauticians will purchase the latter as cover is restricted to evidenced bodily injury only and rarely involve legal defence costs thus the price is generally cheaper. Malpractice insurance differs from 'treatment' style policies in so much as they not only cover bodily injury, but the definition also includes mental injury, awards for lost income, pain and suffering, dissatisfaction claims and 'Good Samaritan' acts.

A typical 'treatment only' policy will provide an aggregate policy limit of indemnity between £500,000 and £2,000,000 per policy year, whereas medical malpractice policies generally start with limits of £2,000,000 extending up to £10,000,000 for invasive and experimental procedures. It is often the case that most claim awards relate to litigation and legal defence costs by qualified personal injury firms rather than in-house insurance claim handlers. Because of this, Hamilton Fraser would expect the minimum level of cover to be £2,000,000 with the norm for those offering toxins, fillers and laser treatments starting at £5,000,000.

Most insurance policies also include a policy excess, whereby practitioners are expected to contribute to the claim including any defence costs. An average policy excess would be £250 per claim for temporary fillers and toxins rising to £1,500 in respect of laser and light treatments. More invasive or experimental treatments may have a higher excess ranging from £5,000 to £20,000 or even higher.

Need to belong to a redress scheme

Redress schemes are not mandatory within the UK for many sectors. However, The Alternative Dispute Regulations 2015 do place a requirement on all UK businesses selling to consumers to point the consumer to a certified ADR scheme - where they cannot resolve a dispute in-house – and declare whether they intend to use that scheme. The regulations also require that ADR providers wishing to gain certification must meet certain standards regarding independence, impartiality, and quality of expertise. One such scheme that has gained certification in the cosmetic sector is the Cosmetic Redress Scheme operated by HF Resolution Ltd (<https://www.tradingstandards.uk/consumers/adr-approved-bodies/cosmetic-redress-scheme>) This scheme is authorised by National Trading Standards. Membership of the scheme is extremely low but commercial aesthetic practitioners should be encouraged to join and promote the scheme to their customers.

The National Hair and Beauty Federation (NHBF) also provides a complaint resolution service scheme for Level 4 and 5 non-surgical procedures in their capacity as a CTSI ADR approved body - <https://www.tradingstandards.uk/consumers/adr-approved-bodies/national-hair->



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[beauty-federation](#). NHBF members can apply for mediation with a consumer for any hair and/or beauty service.

In our opinion membership with a complaint resolution body should be a requirement of insurance.

Demonstrating Knowledge and Competence

In order to gain insurance, there should be a requirement to demonstrate relevant knowledge and competence in the provision of cosmetic treatments; there is no current requirement for this, with some insurers providing cover to cosmetic practitioners after the completion of a short course (1-2 days) with no assurance of competence, safety or proficiency.

It is not for insurers to decide whether a certain practitioner can be deemed competent in the practice of a procedure by attending a certain course or completing a programme of study. Independent verification of recognised training courses/schools in the aesthetics sectors is required to assist insurers in making judgements over a practitioner's competence and ability to ensure patient safety. Insurers are not qualified, in themselves, to manage and 'vet' training qualifications. This is the responsibility of others, such as the Joint Council for Cosmetic Practitioners (JCCP). However, in the event of a claim, insurers can, and do, seek advice from medical 'experts' as to the suitability of training when considering competence.

At present no recognised national education and training standard exists in the UK for the cosmetic industry, but this is a key recommendation set down by the APPG. It is very difficult to approve training courses and qualifications without the determination and enforcement of such a national industry standard. Hamilton Fraser firmly supports the work undertaken by the Joint Council for Cosmetic Practitioners (JCCP) and the Cosmetic Standards Practice Authority (CPSA) who have assumed responsibility for, and updated, the Health Education England (2015) Education and Training Standards Framework for Cosmetic Practice. The JCCP now has responsibility for updating and implementing the HEE framework and works in association with the CPSA to continuously update national education and training standards for the aesthetics sector.

The JCCP also operates an 'Education and Training Register' of approved education and training providers and qualifications. However, this work is at an early stage of development and insurers face having to deal with the myriads of training companies and courses that have sprung up over the last five years. The insurance industry needs this issue to be addressed as a matter of urgency and calls for the Government to introduce a mandatory standard for education and training for the sector as a matter of priority.

Associated with this issue is the need to require practitioners to undertake appropriate and regular continuing professional personal and professional development (CPPD) undertaken according to statutory professional requirements or otherwise with appropriately accredited training provider organisations to maintain and update knowledge/competence as part of annual insurance renewal. This is another area where greater control and scrutiny is required.



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Premises Inspection

Secondary legislation measures are in place that have been implemented by some Local Authorities in the UK to inspect and monitor practitioner compliance with infection control and health protection premises standards. However, the determination and inspection of compliance with such standards is not universal. Hamilton Fraser therefore supports the position adopted by the JCCP and the Chartered Institute of Environmental Health who believe that a national system of local authority governed licensing and inspection should be introduced in the UK to afford greater public protection and patient safety by requiring all salons and clinics to be registered with either the CQC or with their Local Authority Licencing Team.

Prescribing Safely

In line with several Professional Statutory Regulators (the General Medical Council and the General Dental Council and in accordance with guidance set down by the Royal Pharmaceutical Society) Hamilton Fraser does not endorse or permit the remote prescribing of any prescription medicine when used for specifically for non-surgical cosmetic treatments. Hamilton Fraser also expects all prescribers to note that when they delegate treatment to other practitioners, they ensure that they retain oversight for the patient's treatment journey, are familiar with the patient through an initial face to face consultation and diagnostic assessment of the patient's suitability for treatment. Prescribers must not therefore prescribe such medicines by telephone, video link, online or at the request of others for patients whom they have not examined personally, or in any way contrary to statutory professional guidance. Prescribers are often pulled into malpractice claims when the treatment is administered by non-prescribing practitioners regardless as to whether the non-prescriber has adequate malpractice insurance or not.

The name and qualification held by all prescribers must be made available to members of the public.

Display of Insurance Certificates

The JCCP and Hamilton Fraser believe that practitioners should be compelled to display such insurance certificates on their websites, in a prominent position in their trading clinics and within a formalised Terms of Business document that is shared with the patient/consumer. It should also be a condition up to date and adequate insurance is held on file for inspection if so required. The CQC and Local Authority Environmental Health Enforcement Officers should request sight of such evidence as part of their inspection process.



Conclusion

After 25 years of experience of providing insurance for cosmetic treatments Hamilton Fraser believe there is much more to do to protect both the public and aesthetic practitioners. The JCCP and Hamilton Fraser will continue to campaign alongside other key stakeholders for change whilst delivering 'best practice' within the current regulatory frameworks. The JCCP endorses the principles adopted and practised by Hamilton Fraser and recommends their further implementation within and across the aesthetics market.

15th November 2021