



## Press Release 31- Joint Council for Cosmetic Practitioners (JCCP) publish guidelines on 'Adjunctive Therapies and Orphan Treatments'.

There are five core modalities in non-surgical aesthetics which the JCCP and the CPSA (The Cosmetic Practice Standards Authority) have mapped and published standards against<sup>1</sup> and our registrants are expected to evidence their competence in line with these frameworks for each modality they perform. However, the JCCP also wishes to acknowledge and affirm its position on the range of treatments which may sit outside of our recognised five referred to as "adjunctive" which may be complimentary to primary treatments or "orphan treatments" which may be stand alone. <https://www.jccp.org.uk/NewsEvent/adjunctive-and-orphan-treatments>

The JCCP accepts that our registrants may elect to perform adjunctive and/or orphan therapies. Adjunctive therapies relates to any non-surgical aesthetic procedure that a Registrant performs in addition to those registered modalities that are formally recognised by the JCCP. These may include, for example, the adjunctive use of injectable local anaesthetic or stand-alone treatments such as plasma replacement therapy or threads. It is important to understand that these treatments are not *currently* recognised by the JCCP or CPSA as 'registered modalities' and as such the Council has not set or adopted benchmark standards of proficiency for these treatments and is unable endorse evidence of practitioner competence to perform them safely or effectively. While we do not ask registrants to refrain from offering "adjunctive" / "orphan" treatments, we do of course expect that all registered members apply their professional standards and ethical responsibility to uphold client/patient safety and public protection at all times, irrespective of the status of the procedure.

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<sup>1</sup> Hair Restoration Surgery; Injectable Toxins; Dermal Fillers; Lasers and Light and Skin Rejuvenation (Micro-Needling and Chemical peels).



*“The scope of your practice is a way of describing what you are trained and competent to do. It describes the areas in which you have the knowledge, skills and experience to practise safely and effectively in the best interests of patients”. (GDC 2015)*

It is also important registrants do not suggest or imply to their clients/patients that the treatment being provided by them is recognised by the JCCP or that their competence to perform such procedures has been verified or endorsed by the Council.

This statement informs and reminds all registrants on both parts of the register the expectations when carrying out *any* treatment with regard to safe, ethical and responsible practice

#### Applicable Standards

You must be familiar with the CPSA overarching principles, the JCCP Competency Framework (2018) and the JCCP published Code of Practice. You must apply these in **all** areas of your practice and in addition demonstrate compliance with:

#### Lawful Standards of Practice

The JCCP requires you to declare that you practise ethically and lawfully at all times. This must apply to all aspects of **all** treatments you perform; you must make yourself aware of legal requirements specific to any orphan and adjunctive treatments that you might use in your everyday practice. Where your role requires you to prescribe for these treatments, you must refer to the JCCP prescribing guidance on ‘Responsible Prescribing Practice’.

#### Premises Standards

As a JCCP registrant you must ensure that your premises are safe and that they meet the requirements against the published JCCP checklist for both generic and specialist areas of procedural practice. Adjunctive or orphan treatments must take place within the premises to which these standards apply and further, you must make any additional arrangements and adjustments necessary to ensure that you practise within your defined scope of practice. You must also comply with any legal requirements for registration, including CQC in England or, in Scotland, HIS.

#### Supervision Requirements

The JCCP and the CPSA do not set down specific supervision requirements for orphan and adjunctive treatments. However, it is a requirement that all practitioners have access to some form of supervision. For orphan and adjunctive treatments, the JCCP expect Registrants to assess risk, including the requirement to intervene safely and effectively in the event of an adverse incident, and apply supervision standards accordingly, with the aim of maintaining patient safety and public protection. This is particularly important if you are not a registered healthcare prescriber or you have limited experience in any defined area of practice.



### CPD Requirements

The JCCP requires you to be up to date in your practise through continuous professional development. A *minimum* of 50 hours CPD per year is required and this should include orphan and adjunctive treatments (if you are performing such procedures as part of your practice), in addition to those modalities/treatments for which you are registered to deliver by the JCCP and must be reflected in your personal development/CPD requirements. It is part of the JCCP's responsibility to seek evidence that Registrants meet these requirements by undertaking an annual sample of Registrant compliance with the Council's CPD standards and procedures. The JCCP regards CPD to be essential to ensure that Registrants are able to evidence the fact that they are appropriately trained and proficient to perform **any** treatment that they provide to members of the public (including any adjunctive treatment that they might elect to perform). CPD also provides evidence that the Registrant has reflected on their practice and that learning from their CPD has taken place.

### Safe Products

All Registrants are responsible for ensuring that the products they use for orphan and adjunctive treatments are appropriately and ethically sourced and licensed (where appropriate).

### Insurance

All Registrants must ensure that they possess current and up to date indemnity insurance to cover **all** treatments performed within the context of their scope of practice.

### Training

The JCCP does not accept non-JCCP approved education training qualifications as evidence of competence. In these situations, it is the Registrant's responsibility to assess the extent to which any non-JCCP approved education and training undertaken meets the Registrant's requirements to demonstrate their competence, capability and accountability to enable them to practise safely, responsibly and effectively.

For further reading including some of the commonly asked questions on this topic please see our full policy [here](#)

Ends

### Additional Notes:

The Joint Council for Cosmetic Practitioners (JCCP), was formally launched In February 2018 as a 'self-regulating' body for the non-surgical aesthetic and hair restoration sector in the United Kingdom and has achieved Professional Standards Authority (PSA) recognition and UK **charitable status**. The charitable status reflects the overarching not-for-profit mission of the JCCP which is to improve patient safety and public protection. The concept of the JCCP was envisioned by the Department of Health and was instigated by Health Education England on behalf of NHS England.



The primary aim of the JCCP is to enable the public to be more informed about the risks associated with non-surgical and hair restoration treatments and to clearly identify safe, experienced and appropriately trained practitioners who practise in these areas of specialist treatment. In order to achieve these aims the JCCP has now established a Government (Professional Standards Authority – PSA) approved Practitioner Register.

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### **Notes to Editors:**

For general information and enquiries on the JCCP and a full version of the JCCP Guidelines on use of Social Media go to:

[www.jccp.org.uk](http://www.jccp.org.uk)

For further information on standards for non-surgical aesthetic treatments and hair restoration surgery please go to:

[www.cosmeticstandards.org.uk](http://www.cosmeticstandards.org.uk)

For further information on the ASA go to:

[www.asa.org.uk](http://www.asa.org.uk)