

An introduction to the JCCP and CPSA: sorting fact from fiction



THE COSMETIC PRACTICE STANDARDS AUTHORITY (CPSA) is an expert group of specialists with patient/public representation. Professional bodies represented on the CPSA include the British Association of Dermatologists (BAD), the British Association of Plastic, Reconstructive and Aesthetic Surgeons (BAPRAS) and the British Association of Aesthetic Surgeons (BAAPS). In 2018 the CPSA released a set of Standards based on the General Medical Council's (GMC) guidance for doctors providing cosmetic interventions. These Standards went out for consultation, with stakeholders including dermatologists, plastic, reconstructive and aesthetic surgeons, aesthetic doctors, dentists, nurses, aesthetic practitioners, industry experts and professional bodies.



THE JOINT COUNCIL FOR COSMETIC PRACTITIONERS (JCCP) operates a PSA* approved register of practitioners and a register of approved education and training providers, which launched in the House of Lords in February 2018. Its formation has involved working with over 200 interest groups, over 400 clinicians and allied practitioners and experts across all professional sectors, product manufacturers, pharmacies, distributors, patient groups, educationalists, professional associations and many more. It has the direct support of the General Medical Council (GMC), the Advertising Standards Authority (ASA) and the Office of Qualifications and Examinations Regulation (Ofqual). All of these bodies have signed a Memorandum of Understanding with the JCCP, recognizing its standards and Code of Conduct. The JCCP is at an advanced position to conclude similar agreements with the other Statutory Bodies.

The procedures covered include the injection of botulinum toxin and fillers, chemical peels/skin rejuvenation, laser treatments and hair restoration surgery.

Concerns raised

Understandably, many people working within the industry have taken a cautious approach to the work of the JCCP, questioning how effective a non-compulsory register could be, how it differs from existing registers, who runs it and who profits from it. While the vast majority of involved professionals have seen this an opportunity to unite and shape the future of the industry, willing to work together to find the best possible solution to areas of contention, there has also been a level of opposition, which is inevitable with any new venture involving the systems of work, livelihoods and principles of a disparate group of professionals. Unfortunately, this has led to misinformation which we seek to address with the facts outlined below, outlining the aims and rationale behind many of the JCCP's key decisions.

Inclusivity while maintaining standards

Some doctors and nurses are adamant that the JCCP should not be open to all professional groups currently involved in the practice of NSCI and that those with no formal medical or healthcare training should be excluded. Contrary to this are equally ardent views that the Council should not solely consist of those with the highest level of medical

"JCCP is representative of all professional disciplines including plastic surgeons, dermatologists, aesthetic doctors and nurses, dentists and beauty therapists. As such it marks a milestone in recognising and securing the role of beauty therapists and non-medical aesthetic practitioners within the medspa sector as well as in establishing a uniformity of qualification and practice across all disciplines providing aesthetic treatment."

Safety in Beauty, 2017

training, given that this would not represent the vast number of people actually conducting these treatments.

In recognition of these concerns, but with public safety as its priority, the JCCP stipulates that any aesthetic practitioner can join the Register, provided they can demonstrate that they meet the Standards set out by the CPSA and JCCP (and based on the previously adopted and now modified HEE framework).

Non-medical practitioners already operate widely within this sector, and at present this is permitted in law in the UK. Encouraging those who reach the required Standards to join the practitioner register allows the public to access people with the required qualifications for each of the modalities identified as per the HEE framework and who also conform to agreed standards of practice follow-up, premises requirements, supervision, prescribing, advertising and much more. Those who cannot reach these levels – and arguably there will be many – may well continue to practise outside the register, and without mandatory powers this cannot be averted.

However, publicising the register and why these Standards are so important, will help the public access practitioners who *do* meet the required Standards. In essence, the register promotes and raises the profile of clinicians who can demonstrate their qualifications and adherence to standards.

Efficacy of self-regulation

Most professionals agree that the gold standard for the industry would be a mandated statutory register, which is something that members of the JCCP and CPSA have long argued for. So far, the government has not yielded to this pressure, but self-regulation and accountability is superior to no regulation at all, and it is recognised that decision-makers are more likely to ratify and mandate in law an existing independent register that is already operational. This therefore is a key aim of the JCCP and the CPSA.

Funding and revenue

The JCCP is a 'not for profit' limited company with charitable status. The Council, which is entirely voluntary, received independent sponsorship and a small grant from the Department of Health (DoH) for initial development of its educational standards and governance structure. All ongoing funding is obtained through registration fees, charitable donations and review & approval fees from the education & training institutions that wish to become approved by the JCCP.

The revenue raised through these means is used to maintain the register and to invest in the further development of education and training standards and in promoting public protection and patient safety across the sector in the four countries of the United Kingdom.

Independence and transparency

All appointments to the JCCP Governance Board are made in accordance with UK Charity Law and serve to promote the interests of public protection rather than self-interest or individual organisations.

The JCCP Chair and Committee Chairs are independent. All Board and committee roles are voluntary.

The JCCP is not-for-profit – all revenue raised from membership is used to promote patient safety and public protection.

Our partners and accreditations

Advertising Standards Authority (ASA): The ASA has long recognized the many issues associated with misrepresentation through advertising in the cosmetic sector. The PSA has put in place a specialist team to deal with the numerous complaints it has received. Up until now its main focus has been on surgical interventions and claims around cosmetic products and services. The JCCP highlighted to the ASA the significant problem associated with claims being made in the non-surgical sector relating to treatments and inaccurate misrepresentation of qualifications provided by education and training providers. This has resulted in a co-operation agreement between the JCCP and the ASA. A number of referrals have already been made and are being acted upon.

The Office of Qualifications and Examinations Regulation (Ofqual): Ofqual is the Government Regulator of vocational qualifications. There are many different courses offered within the non-surgical cosmetic sector, some with academic accreditation and qualifications, some without, offered in Higher Education, Further Education and the vocational sector. This has presented confusion for practitioners and the public alike when seeking to attain and secure the services and status of a 'qualified' practitioner. Whilst Higher Education providers with degree awarding powers can develop and accredit their own courses & programmes, there has been a rapid expansion in vocational course, many of which are not recognized by Ofqual or subject to quality assurance. JCCP has raised these issues with Ofqual and discussed with them the formation of its register of approved education and training providers. This has resulted in a formal agreement being signed between Ofqual and the JCCP to exchange information and to consult each other on newly proposed qualifications, appropriate standards, Awarding Bodies and education and training providers.

Professional Standards Authority (PSA): The JCCP has been awarded Professional Standards Authority (PSA) Status*. The PSA is the Government Regulator of Professional Regulated Statutory Bodies (PSRBs) and public registers in the health and social care sector. The PSA assess their performance and report to Parliament. The PSA also conducts audits and investigations and set standards for organisations holding registers for health and social care occupations not regulated by law and accredits those that meet them.

Charity Commission: The JCCP has been awarded charitable status and is registered with the Charity Commission.

General Medical Council (GMC): The JCCP and General Medical Council (GMC) have developed a Memorandum of Understanding for the sharing of information regarding Fitness to Practice cases that might arise against registrants. The MOU provides for the JCCP to share any concerns it has about GMC registrants with the GMC and work collaboratively in the interests of public protection. MOUs are also currently being negotiated with other healthcare regulators.

Background and history

In the wake of the infamous PIP breast implant scandal of 2011, the Keogh Review of 2013¹ highlighted key failures in the non-surgical cosmetic intervention (NSCI) industry and pointed to a need for tighter regulation within the sector. Many viewed this as an ideal opportunity for the

government to introduce mandatory regulation for a largely unsupervised industry, but this was not implemented.

The Department of Health did however commission Health Education England (HEE) to devise a regulatory framework covering the levels of knowledge required to perform a number of NSCI procedures, and this report was published in two parts (1 and 2)². In 2016, 'Guidance for Doctors who offer cosmetic interventions' was published by the General Medical Council (GMC).³

This prompted key organisations in the industry, across a range of professional backgrounds, to join forces to set up two key bodies: one to set standards (the CPSA), and the other to form a register of professionals who adhere to these standards, and a register of education and training providers who meet the standards to prepare practitioners to enter the register (the JCCP). These organisations have lent the expertise and experience of their senior clinical members, some of the most respected names in the industry, to do this.

Moving Forward

The JCCP and the CPSA have been co-created to respond to the significant gap caused by lack of mandatory and statutory regulation and the resultant threat to patient safety and public protection. Both bodies will continue to campaign for this to take place.

The many stakeholders who have united across the industry to work with the CPSA and JCCP have a continued responsibility to assist with the further development and implementation of our agreed and shared practice and education and training standards. All this needs to be done in the context of a co-ordinated approach to demonstrate our united commitment to patient safety and public protection.

The JCCP and CPSA accepted that whenever multiple and divergent groups attempt to do something as complex and difficult as to regulate a new and rapidly growing sector, there will be issues and strong opinions voiced. Constructive opinions are welcomed in that they serve to assist in the refinement of public protection procedures. However, we recognise equally that there are many vested interests in the sector and, for some, attempts to regulate the sector are both challenging and unwelcome. We encourage all practitioners, professional bodies and those parties who supply services and products to the sector, to come forward to engage constructively and purposefully with us, to move the debate forward in support of our declared intention: to improve standards and practice and to influence the Government on the need to introduce statutory regulation within and across the sector.

For more information, please visit www.jccp.org.uk

¹ Review of the Regulation of Cosmetic Interventions (2013). Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/192028/Review_of_the_Regulation_of_Cosmetic_Interventions.pdf

² PART ONE: Qualification requirements for delivery of cosmetic procedures: Non-surgical cosmetic interventions and hair restoration surgery. (2015) PART TWO: Report on implementation of qualification requirements for cosmetic procedures: Non-surgical cosmetic interventions and hair restoration surgery. (2015)

Available at: <https://hee.nhs.uk/our-work/non-surgical-cosmetic-procedures>

³ Guidance for Doctors who offer cosmetic interventions. Available at: https://www.gmc-uk.org/-/media/documents/Guidance_for_doctors_who_offer_cosmetic_interventions_210316.pdf_65254111.pdf

May 2018