

28 October 2023

HCPC response to the DHSC's consultation on the licensing of non-surgical cosmetic procedures in England

About us

The Health and Care Professions Council (HCPC) is a statutory regulator of 15 health and care professions in the United Kingdom. Our role and remit is underpinned by the Health Professions Order 2001. We maintain a register of professionals, set standards for entry to our register, approve education and training programmes for registration and deal with concerns where a professional may not be fit to practise. Our role is to protect the public.

Response to the consultation

We welcome the opportunity to respond to this consultation. As a healthcare regulator our primary objective is public protection.

When undertaken incorrectly, the procedures outlined in the consultation document may have adverse and harmful effects and we therefore welcome the DHSC's commitment to ensuring that these procedures are carried out in a safe manner.

The majority of the questions in this consultation relate to whether the listed procedures in the proposals have been correctly rated and whether the proposed age restrictions are correct. As these issues are outside of our regulatory remit and expertise, we have focused our response on the regulation of professionals who may be performing these procedures and highlighted a number of issues which we think may be relevant as the scheme develops.

As noted in the consultation, UK healthcare regulators are responsible for ensuring that professionals on their registers have the necessary skills and knowledge to be registered and function within their scope of practice. Part of our role is therefore to set the standards that our registrants must meet to maintain their registration with us. Our [standards of proficiency](#) are the threshold standards which set out what a student must know, understand and be able to do by the time they have completed their training, so that they are able to apply to register with us. Once on our Register, registrants must continue to meet those standards of proficiency which relate to the areas in which they work. We also set [standards of conduct, performance and ethics](#), which set out how we expect our registrants to behave and [standards of continuing professional development](#) about how registrant must keep their skills and knowledge up to date. Finally, we set [standards of education and training](#) against which we assess education and training programmes to ensure that learners who complete these programmes are able to meet our standards of proficiency.

In our standards of proficiency, we set threshold levels that we consider best protect the public and set out clear expectations of our registrants' knowledge and abilities when they begin to practise. This includes standards that are generic (these apply to all the professions we regulate) and those that are profession-specific. Registrants are expected to work within these standards throughout their career and consider them in the round when undertaking their practice.

The profession-specific standards that we provide for registrants to follow outline what patients, service users and the public should expect from their healthcare professional. As an outcome focused regulator, we do not prescribe the exact duties or tasks that the registrant could or could not do and as recognised in the consultation, we do not set specific standards for non-surgical cosmetic procedures. However, our standards do set the expectations of the skills, knowledge and functions that the registrant should be able to safely undertake within their role.

The standards of proficiency require registrants to practise safely and effectively within their scope of practice (Standard 1). Our standards of conduct, performance and ethics also specify that registrants should keep within their scope of practice by only practising within the areas of which they have appropriate knowledge, skills and experience (Standard 3.1). Finally, we expect registrants to refer patients and service users onto another professional if they cannot provide appropriate care or treatment as it is beyond their scope of practice (Standard 3.2).¹

As noted above, we do not define the scope of practice or what tasks and duties our professions should or should not perform. We provide [guidance](#) on our website as to what scope of practice means and guidance for professionals in ensuring they are working within their scope of practice at all times. We acknowledge that the scope of practice of a registrant may change over time, as they progress through their career and enter into more specialist practice roles. In these cases, the scope of practice may become narrower in scope as registrants specialise.

Registrants should consider whether the activity they are looking to undertake is something that would fall into the general scope of practice of their role, whether they have had the appropriate training to undertake it safely and effectively, whether the activity is restricted by law and if so, are they legally able to carry it out, and whether their indemnity insurance would cover that activity. In defining profession-specific scope of activity, professional bodies can provide further advice and guidance.

We also set out expectations for our registrants in our standards of conduct, performance and ethics around supervision and delegation. Registrants are expected to only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively, and registrants are expected to continue to provide appropriate supervision and support to those to whom they have delegated work to.² Registrants are required to only take on supervision if it is within their scope of practice. We would note that this should be a consideration in the development of the scheme as plans for how professionals would have oversight of those performing the procedures would be important to consider.

¹ [Scope of practice and the standards | \(hcpc-uk.org\)](#)

² [Supervision and delegation | \(hcpc-uk.org\)](#)

We note that the proposals as outlined in the consultation do not currently list specific professions that may be involved in carrying out non-surgical cosmetic procedures but instead reference statutorily regulated professionals. We would be happy to facilitate further discussions with HCPC professions and their professional bodies if that would be helpful in developing the next stages of the scheme.

We would also underline the importance of considering how any scheme would interact with professions' prescribing rights. A registrant's medicines possession, administration and prescribing rights are tied to their professional registration, job description and indemnity cover. As such, a registrant is only able to use their prescribing rights within a role whereby they are required to work under their protected title and where their prescribing activity comes under their scope of practice. We set out our [professions' medicines and prescribing rights](#) on our website.

If any professional on our register were to be using their prescribing rights in order to carry out any of the procedures as listed in the consultation, they would need to ensure that this activity was within their scope of practice following the principles set out in our guidance.

We hope that our comments have been helpful, and we would be happy to engage in further discussion and provide any further information, as would be helpful.