

Healthcare Professional Regulation Consultation
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Dear Sir/Madam

Response to the Department of Health Consultation on Healthcare Professional Regulation from the Department of Health (England) Steering Group on the Statutory Regulation of Acupuncture, Herbal Medicine and Traditional Chinese Medicine Practitioners.

The above Steering Group welcomes the opportunity to respond to the Department of Health Consultation on Healthcare Professional Regulation. The Group was established earlier this year to make recommendations on the regulation of acupuncture, herbal medicine and traditional Chinese medicine practitioners, and our response is limited to those issues of direct relevance to the Group. Essentially, our response is confined to the proposals for the regulation of the non-medical healthcare professions.

Our comments are as follows:

1. The number of regulators for non-medical professions

We do not feel the report is at all helpful to new professions that are to be statutorily regulated. On the one hand the report presents arguments in favour of having fewer regulators, including benefits to public protection through a more consistent approach to education, common standards for topics such as student conduct and easier liaison with Higher Education Institutions. It notes that the complaints procedure would be simplified and that evidence exists that patient and public groups perceive this as an advantage.

However, on the other hand, powerful arguments are presented for preserving the existing diversity of regulators. These advantages include better understanding of the professions by regulators, the need for professional buy-in to systems of regulation and avoiding possible alienation of individuals who are currently regulated. In our view the report sits on the fence with regard to existing regulators but in proposing that any new profession coming into statutory regulation be regulated by one of the existing regulatory bodies, this ambiguity is removed. For new professions to be regulated the powerful arguments used to support the diversity of regulators that currently exist, even though some are very small, are ignored.



INVESTOR IN PEOPLE

Principal and Vice-Chancellor
Professor R Michael Pittilo
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It is our view that given the statutory regulation of acupuncture, herbal medicine and traditional Chinese medicine is imminent, now is an opportune time to review the numbers of existing regulators. In our opinion there are significant benefits to be achieved through a reduction in the number of regulators. We are convinced that significant savings could be made not least to the fees paid by registrants through grouping individual professions together under a reduced number of regulators.

2. Health Professions Council

Whilst we are strongly supportive of the model that the Health Professions Council uses, we do have some concerns over acupuncture, herbal medicine and traditional Chinese medicine being regulated by this Council. These are summarised as follows:

- 2a. The criteria for eligibility for aspiring professions wishing to become regulated by the Health Professions Council will, as currently written, be difficult to satisfy. In particular the need to have 'practice based on evidence of efficacy' as well as 'at least one established professional body which accounts for a significant proportion of that occupational group' will present challenges.
- 2b. The relatively newly formed Health Professions Council has a number of aspirant professions seeking to be regulated by it. Inevitably their progress will be delayed if priority is given to acupuncture, herbal medicine and traditional Chinese medicine.
- 2c. The Health Professions Council is already experiencing some pressure with regard to existing business including the accreditation of new educational programmes. There would clearly be a further significant burden upon the organisation if it had to respond quickly to the requirements of acupuncture, herbal medicine and traditional Chinese medicine along with other professions seeking to be regulated.
- 2d. Of particular concern to us with regard to the protection of the public is the very real possibility that new professions with the diversity of traditions that are found in herbal medicine, acupuncture and traditional Chinese medicine may require a period of more intense support during the early stages of statutory regulation than perhaps might be required for the more established healthcare professions. The professions that formed the Health Professions Council when it was created had almost all been familiar with statutory regulation under the auspices of the Council for Professions Supplementary to Medicine. We are concerned about placing unreasonable demands upon the Health Professions Council.
- 2e. The Steering Group is already having very helpful discussions with the Health Professions Council who are being extremely supportive. It is likely that some, if not all, of the concerns may be addressed. However, we remain of the view that the report on non-medical regulation did not go far enough and that both defending the continuance of existing small statutory regulatory bodies whilst at the same time arguing that all new professions should be regulated by the Health Professions Council, or another lead body, does not make a great deal of sense.

3. New regulatory arrangements

It could be argued that there are opportunities to reduce the total number of existing statutory regulators whilst at the same time introducing new statutory regulatory arrangements. For example, there could be benefits to acupuncture, herbal medicine and traditional Chinese medicine combining with one or more existing statutory regulatory bodies, particularly where there are small numbers of professionals, opportunities for synergy or significant overlap in professional practice to form a new statutory regulatory body. The Steering Group has already approached the General Osteopathic Council and the General Chiropractic Council to see if they would be interested in such an arrangement. A new Council might be established and, whilst it is premature to suggest a name, Traditional Medicines Council has been one suggestion. There would be strong advantages not only in achieving the benefits outlined in the report on the regulation of the non-medical healthcare professions with regard to having a reduced number of regulators but that the new professions could benefit in a smaller unit from the expertise and experience of these regulators. In time, once these new professions have gained experience of statutory regulation it would be possible to re-visit, again as the report implies might be the case, a further reduction in the total number of regulators. For example, a merger with the Health Professions Council, perhaps even involving further professions in a federal approach, could be of benefit. This phased arrangement to reduce the number of regulators would, in our view, not only take account of the needs of the individual professionals but also provide the highest level of protection to the public.

Please do not hesitate to contact me if, on behalf of the Steering Group, I can provide any further information on any of the above.

Yours faithfully,

Professor R Michael Pittilo
Principal and Vice-Chancellor