

Response ID ANON-8RHF-KST1-U

Submitted to Non-surgical Procedures and Functions of Medical Reviewers (Scotland) Bill
Submitted on 2025-11-13 12:45:10

About you

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What is your name?

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Are you responding as an individual or on behalf of an organisation?

Organisation

Are you responding to Part 1, Part 2 or both?

Part 1

About your organisation (if applicable)

Name of organisation

Name of organisation:

Royal Pharmaceutical Society Scotland

Information about your organisation

Please add information about your organisation in the box below:

We are the Royal Pharmaceutical Society, the professional membership body for pharmacists and pharmacy.

Our mission is to put pharmacy at the forefront of patient care.

Our vision is to become the world leader in the safe and effective use of medicines.

Since RPS was founded in 1841 we have championed the profession, and are internationally renowned as publishers of medicines information.

We promote pharmacy in the media and government, lead the way in medicines information, and support pharmacists in their education and development.

We support, promote and lead the pharmacy profession across all sectors of pharmacy in Scotland.

Part 1 of the Bill: Non-surgical procedures

a People wishing to access non-surgical procedures detailed in Schedule 1?

Please provide your response in the box provided.:

Overall, the Bill will have a positive impact on safety. The legislation makes it illegal to carry out procedures on those under 18, who may not be able to fully understand the risks. The Bill should make it clear that the restriction of age is to 18 years and over. Implementing age restrictions can protect children from undergoing procedures that they may not fully understand or that could have long-term health implications which links with Article 3: The best interests of the child must be a primary consideration in all actions concerning children. We are fully supportive of the age restrictions within the Bill. Also, ensuring procedures are carried out in regulated premises should decrease adverse health risks of those undergoing these procedures such as health care associated infections as the premises will have been assessed as suitable for the procedure. The procedures will also have to be supervised by a healthcare professional further decreasing the risk to the patient.

These legislative changes should have a positive impact on members of the public who choose to access these services, having confidence that the legislative framework has patient safety at the heart of the Bill, ensuring children cannot access these services and ensuring that they are carried out under the appropriate level of supervision from healthcare professionals and undertaken in premises which are suitable for the procedure. The benefits of the Bill will only be seen if its transparent and well publicised in a way that is accessible to all and considering all levels of health literacy. Our National Pharmacy Board suggests that the Health, Social Care and Sport Committee considers how this change will be publicised in order that people accessing these services know about these changes, what they mean and what specific procedures are included. For example, consideration should be given to how members of the public are made aware that they can check the Healthcare Improvement Scotland (HIS) website to know if their clinic is registered.

We suggest that these changes, although overall beneficial to patients, may make the procedures more expensive in regulated premises as businesses cover costs of regulation. This may disproportionately affect people from lower socioeconomic groups and rural areas. Additionally, the number of businesses offering these services may decrease therefore decreasing choice and competition which in turn may increase prices and have more impact on those of lower socioeconomic groups and in more rural areas. The impact on service users in these groups should be monitored.

b The level of risk to people who wish to access these procedures?

Please provide your response in the box provided.:

Risk should decrease if people are seen in regulated premises as premises will have been assessed as meeting regulatory standards such as HIS or a professional regulator e.g. General Pharmaceutical Council with respect to pharmacy premises.

The risk is significantly reduced for under 18s as they won't be able to access these services however it may have to be considered if it will drive them to access these services in unregistered premises or access procedures abroad where rules are less stringent, therefore actually increasing risk to this cohort overall. Consideration should be given to how the impact of the Bill on this group could be monitored.

Regulating these procedures in this way may increase people's awareness of the potential risk of non-surgical procedures in general and lead to an increase in peoples own risk/benefit assessment before proceeding with these interventions.

As described in our response to the Scottish Government consultation on non-surgical cosmetic procedures, we think the Bill should explicitly require emergency equipment and trained staff to be available to manage adverse events.

c Local businesses and individual practitioners?

Please provide your response in the box provided.:

There is going to be a cost implication for businesses to comply with HIS registration requirements and ask that consideration is given to ensuring the time scales for businesses to comply with new regulations are reasonable.

Individual practitioners may face a loss of business/income if they don't meet the legislative requirements or regulatory standards outlined in the Bill.

Individual practitioners may need to seek alternative premises to ensure compliance which, in all likelihood, would incur additional costs.

The responsibility to check age will mean businesses will have to have new procedures in place to ensure that they can evidence that they are compliant with age check requirements. This will include how they protect confidentiality when checking legal identification and any relevant record keeping. They will have to consider how this will work where more than one practitioner is involved in patient care.

d Organisations and staff who currently operate within a premises that meets the definition of permitted premises?

Please provide your response in the box provided.:

We anticipate that the impact on these organisations and staff will be minimal. There will have to be new procedures in place to ensure that they can evidence that they are compliant with age check requirements.

Overall, for both individual practitioners and businesses in permitted premises, the Bill has patient safety at its centre and raises standards in delivery of non-surgical procedures. Therefore this will also benefit those working in this area by empowering practitioners to improve practice standards and improve the reputation of legitimate providers.

2 What are your views on inspection, offences and enforcement powers set out in the Bill? For example, do you think they are fair and appropriate?

Please provide your response in the box provided.:

Our Board would ask that the Scottish Government considers the capacity implications for HIS in taking on inspections for all premises carrying out non-surgical procedures and that the timescale for businesses to comply with the new regulations are reasonable.

We agree that the standard fine structure used by HIS would be appropriate and proportionate.

3 Do you have any further comments about Part 1 of the Bill?

Please provide your response in the box provided.:

The Royal Pharmaceutical Society is the professional body for pharmacists and provided feedback to the Scottish Government consultation on Non-surgical Cosmetic Procedures in February 2025. We are pleased to note that our feedback has been taken on board and translated into the Bill as introduced.

Our Board is supportive of the Bill allowing for additional restrictions to be introduced, as non-surgical procedures will evolve over time and new procedures may emerge that are not currently available. This gives flexibility to add these new procedures to the Bill and assure they are regulated appropriately.

We note that the Bill makes allowance for additional restrictions to be introduced in relation to the education and training requirements of practitioners offering non-surgical procedures. In our response to the Scottish Government consultation on non-surgical cosmetic procedures we emphasised that

pharmacists and other practitioners must have appropriate training and competence. We suggest the Health, Social Care and Sport Committee consider the appropriate timescale to develop these regulations. Our organisation remains available to work constructively with Scottish Parliament on any future developments.