

RCN Scotland's response to the Scottish Parliament Health, Social Care and Sport Committee call for views on the

Non-surgical Procedures and Functions of Medical Reviewers (Scotland) Bill



Introduction

The Royal College of Nursing (RCN) is the world's largest nursing union and professional body. It is the leading national and international authority in representing the nursing profession. We represent over half a million nurses, student nurses, midwives, nursing associates and nursing support workers in the UK and internationally.

The RCN has over 52,000 members in Scotland. We campaign on issues of concern to nursing staff and patients, influence health policy development and implementation, and promote excellence in nursing practice.

Background

The Scottish Government has introduced the Bill to make sure that non-surgical procedures are safe, hygienic, and regulated. They also believe that these types of procedure may cause children and young people physical or psychological harm. For this reason, the Government believes they should only be provided to adults.

The Scottish Government also wants to update the rules around certification of death. This decision follows discussions with the Death Certification Review Service and authorities representing other UK nations.



Consultation questions and RCN Scotland responses

Part 1 of the Bill: Non-surgical procedures

Q1- In your view, what impact will the Bill have on:

- a. People wishing to access non-surgical procedures detailed in Schedule 1?
- b. The level of risk to people who wish to access these procedures?
- c. Local businesses and individual practitioners?
- d. Organisations and staff who currently operate within a premises that meets the definition of permitted premises?

RCN Scotland response:

The Royal College of Nursing (RCN) is the world's largest nursing union and professional body. It is the leading national and international authority in representing the nursing profession. We represent over half a million nurses, student nurses, midwives, nursing associates and nursing support workers in the UK and internationally. The RCN has approximately 52,000 members in Scotland. We campaign on issues of concern to nursing staff and patients, influence health policy development and implementation, and promote excellence in nursing practice.

RCN Scotland responded to the Scottish Government's consultation on the Regulation of non-surgical cosmetic procedures in February 2025¹. The Scottish Government has essentially chosen to follow this proposal, with this draft legislation setting out the procedures which must be carried out in a HIS regulated premises (broadly including those procedures which were categorised as 'Group 2' procedures. 'Group 1' procedures will be able to be carried out by a non-healthcare professional in a local authority licensed regime and this will be established via a licensing Order under powers contained in the Civic Government (Scotland) Act 1982. Those procedures identified as 'Group 3' in the Scottish Government's consultation will be considered in discussion with the UK Government as limiting certain procedures to specific medical professionals is a reserved matter in so far as they involve regulating the provision of certain medications to patients.



The regulatory regime for these procedures will therefore be split across three different pieces of legislation; this Bill; Orders under the 1982 Act and unspecified amendments to reserved medicines regulations. This is far from satisfactory in terms of ensuring the rules in this area are well understood by practitioners and properly developed by policy makers. RCN Scotland would therefore suggest a much better approach would be to develop a regime for all these procedures concurrently.

RCN Scotland has a number of members involved in the provision of non-surgical cosmetic procedures. Our priority is therefore ensuring that appropriately trained individuals are able to carry out these procedures in a way which is safe for those accessing these services. It is our view that a clear and robust regulatory regime benefits service users, but it also benefits professionals. Accessible and clear guidance is therefore a necessity.

None of the procedures listed in this Bill are without risk and there is a lack of any reliable data on the cost to the NHS of complications arising out of these procedures. RCN Scotland therefore strongly supports attempts to gain a better understanding of this issue through data gathering and suggests that this would have been better done before any major regulatory changes were introduced.

RCN Scotland has concerns that some of the procedures listed in the Bill, particularly those which involve penetration of the skin, should be carried out by a non-regulated healthcare professional, even under the direction of a regulated professional. The risk of serious complications of some of these procedures, including necrosis, vascular occlusion, nerve damage and sepsis and the need to have a skilled understanding of physiology and anatomy, means that supervision may have to be so close it would effectively require a healthcare professional to be carrying out the procedure themselves. A safer option would be to only allow these procedures to be carried out by a regulated professional, in HIS licensed premises. We note that NMC guidance changes, brought in after the Scottish Government consultation, now prohibit remote prescribing by nurse prescribers in this area, which is a welcome change.

As we noted in the response to the consultation, there is a risk that the approach taken in the Bill may create an incentive to providers to seek to try to 'downgrade' their procedures in order to fall into a different group. There is some overlap in some of the procedures, such as chemical peels, with "deeper" peels being categorised as highest risk, but "medium depth" peels falling into the scope of this Bill. While it may be straightforward to accurately categorise these procedures, it may be that new products are developed which can be categorised as marginally lower risk in order to avoid a higher classification.

RCN Scotland welcomes the fact that training requirements of professionals may be



covered by regulation making powers in section 5 of the Bill. We presume that the intention of section 5 (3)(a) is that these regulations could specify insurance / indemnity requirement of premises and if so, RCN Scotland would again support that.

Finally, RCN Scotland welcomes the age limit proposed in the Bill. We would point out that at that age, faces and bodies are often still developing and we would therefore urge for further consideration to be given to introducing additional safeguards for younger people above the age of 18. We don't have sufficient evidence or data about the longer-term effects of some of these procedures and would therefore suggest a cautious approach in allowing them for younger adults. As well as an age limit, below which no procedures can take place, there is merit in considering additional safeguards such as limiting the number of times a procedure can be accessed, or requiring a GP review or healthcare professional to carry out all procedures on younger people.

Q2— 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?

RCN Scotland response:

RCN Scotland is concerned about the implications for Healthcare Improvement Scotland of this Bill. It will result in a significant number of additional premises requiring to be registered with HIS and new requirements in terms of enforcing this new duty (which will not be funded by registration fees). RCN Scotland is therefore of the view that the Financial Memorandum does not adequately estimate the costs associated with this legislation on HIS (a point which the FM appears to acknowledge).

Q3-Do you have any further comments about Part 1 of the Bill?

RCN Scotland response:

RCN Scotland is disappointed with some of the wording contained in the Policy Memorandum to the Bill. In particular, we strongly reject the assertion, in paragraph 33 that "healthcare professionals had unfairly influenced Scottish Government proposals." This comment appears to have come from non-healthcare business owners. RCN Scotland is a Professional Body and Trade Union representing over 52,000 members in Scotland. Our



priority is the safety of our members and the safety of their patients and the people they care for. It is extremely disappointing and wholly inappropriate that a comment like this has appeared in an official legislative document, not least from a group of organisations who so clearly have a vested interest in this area.

The sector is evolving, and with the rise of telemedicine, the Bill needs to be adaptable to cover changes in procedures and changes in digital and rural service provision. RCN Scotland would urge consideration to therefore be given about whether the order making power in section 4 allows for this flexibility. A review clause should also be considered as part of the Bill, to analyse the impact of regulatory changes and require data to be collected and reviewed about safety, regulation and any developments in the sector.

References

1 <u>https://www.rcn.org.uk/-/media/Royal-College-Of-Nursing/Documents/Countries-and-regions/Scotland/2025/Regulation-of-NSCP-130225.pdf</u>



Published: 14 November 2025