

**STEERING GROUP ON STATUTORY REGULATION OF ACUPUNCTURE,
HERBAL MEDICINE AND TRADITIONAL CHINESE MEDICINE PRACTITIONERS
(AHTCM)**

Minutes of the Second Meeting held on Tuesday 19 September 2006
West Yorkshire Playhouse, Quarry Hill, Leeds

Attendees:

Mike Pittilo, Chair

Mauroof Athique }
Peter Conway } representing Herbal Medicine
Ned Reiter }

Ming Zhao Cheng }
Benny Mei } representing Chinese Medicine
Yilan Shen }

Mike Cummings }
Val Hopwood } representing Acupuncture
Jasmine Uddin }
Ken Ward-Atherton }

Mercy Jeyasingham – Chair, Acupuncture stakeholder group
Michael McIntyre – Chair, Herbal/Traditional medicine stakeholder group
Mike O'Farrell – Chair, Chinese medicine stakeholder group

Amrit Ahluwalia, European Herbal Practitioners Assn
Ian Brownhill, Foundation for Integrated Health
Kat Caldwell, Department of Health
Sharon Corner, Department of Health
Kate Ling, Department of Health
Sam Mars, Health Professions Council
Bill Scott, Scottish Executive Health Department

Frances Dow, Lay Member
Valerie McKie, Lay Member
Meeling Ng, Lay Member

Apologies:

Deepika Gunawant, practitioner
Nick Lampert, practitioner
Tom Lane, Skills for Health
Thomas Scott, DHSS Northern Ireland
Julie Stone, CHRE
Susan Wynn, Welsh Assembly

1. Mike Pittilo opened the meeting and thanked everyone for attending. The minutes of the meeting on 22 June were confirmed as an accurate record.

Attendees round the table introduced themselves and explained which traditions they were representing at the meeting.

2. Mike Pittilo referred the Group to his paper WG2/D, implications of the Foster Review. He highlighted that the Report recommended that any new profession coming into statutory regulation should be regulated by one of the existing regulatory bodies, in this case probably the HPC, and that there would be no new regulators for the foreseeable future. However, the report recommended that the number of regulators should be reviewed in five years. Mike talked about the concept of revalidation, group standards, CPD and highlighted key challenges e.g. entry criteria to the HPC register makes it difficult to see how CAM professions will be regulated by them. Sam Mars stated that the HPC could possibly review their entry criteria for these professions. Mike O'Farrell suggested taking advice from the HPC on how they see statutory regulation of CAM professionals progressing.

It was agreed to invite the HPC to make an in-depth presentation at the next JWG meeting.

Action : DH to seek a meeting with HPC to discuss the above issues and the way forward.

Action: DH to invite HPC to make a detailed presentation at the next JWG meeting on 28 November.

Mike Pittilo also pointed out that there are many other aspirant groups wanting to be regulated by the HPC and the Government is keen to push some of these forward for statutory regulation.

Mike Pittilo stated that he would, on behalf of the JWG, produce a response to the Foster Review by the closing date for consultation, 10 November 2006.

Action: Mike Pittilo to draft response to consultation.

Action: Mike Pittilo to write to HPC (Marc Seale, Rachel Tripp) outlining the Group's concerns and highlighting what the Group would like to see from HPC as a regulator, together with a list of recommendations and options to present to them.

3. Michael McIntyre presented paper WG2/E which was produced by Richard Woodfield, MHRA with input from the EHPA. Michael explained the background to S12(1) of the Medicines Act 1968 and discussed the paper with the Group. Mike Pittilo suggested that Michael, together with the MHRA, produce a paper to present to the Group setting out what is required of the Group in terms of professional regulation in order to fit in with S12(1) reform. Michael McIntyre suggested that paper WG2/E be discussed further at Stakeholder group meetings and feedback given at the Group meeting via Stakeholder Chairs.

Mike Pittilo stressed the importance of working closely with the MHRA and EHPA on this matter and that the timetable was crucial. Given key elements of S12(1) reform depend on the existence of a body of statutorily regulated herbalists, the timing of the introduction of S12(1) reforms will depend on progress of statutory regulation. All

manufactured herbal medicines must be licensed by 2011. If herbal practitioners are not regulated by this date, they will not be able to access manufactured herbal products via their authorised health professional status.

Mike Pittilo suggested that Group members might like to look at the MHRA website to further familiarise themselves with their work. www.mhra.gov.uk

Bill Scott suggested the RPSGB might be a more suitable regulator for these CAM professions. Mike Pittilo suggested talking to RPSGB and exploring what this might mean for the Group.

Action : Michael McIntyre/MHRA to progress work on what is needed by the Group and report back.

Action : Stakeholder Chairs to discuss paper WG2/E at Stakeholder meetings and feedback to next JWG meeting on 28 November.

Action: Mike Pittilo to talk to RPSGB to explore what statutory regulation would mean for this Group.

4. Kate Ling introduced her paper WG2/F and clarified that the purpose of the paper was to try to help the Group by providing guidelines on what the report to Ministers needs to include, and to invite the Group to ask any questions.

Michael McIntyre had formally responded to Kate Ling's paper raising a number of issues which Kate addressed in the meeting.

Val Hopwood asked about dual registration and the potential effect this could have on practitioners. Kate confirmed that decisions had not yet been made either within the professions or by the regulator(s).

Mercy Jeyasingham and Mike O'Farrell both raised concerns about the significant amount of work that needs to be done in the timescale set out and the proposed difficulties in reaching a consensus within and between the stakeholder groups. Kate Ling confirmed that the DH does not have a rigid timetable for this work and that it depends on the speed with which the various issues can be resolved. Certainly regulation of these professions will not likely be in place before 2008, and the speed with which regulation can be taken forward will depend on DH obtaining legal resources, Parliamentary time etc. There is pressure, however, on these professions to meet the 2011 deadline on medicines as discussed earlier.

Mike Pittilo announced that Amrit Ahluwalia of the EHPA would be working with the Stakeholder Chairs and DH to facilitate the work the Stakeholder Groups are doing outside the Steering Group.

Action : Kate Ling to arrange a meeting with HPC and to include Ros Mead from DH as Ros has significant experience in regulating new professions.

Action : Mike Pittilo will draw up a table of contents to see whether any gaps are emerging, for discussion with Stakeholder Chairs.

5. Mike Pittilo asked the three Stakeholder Chairs for brief reports from their Groups. He also stressed that the three Groups must have a common set of standards albeit with sub-standards for each of their different professions.

Acupuncture Stakeholder Group

Mercy Jeyasingham reported back from the ASG as follows :

There are eleven groups in membership each of which has a register and offers training in acupuncture. The ASG represents about 16,000 practitioners using some form of acupuncture with needles or the use of acupuncture points. Although the ARWG covered a lot of ground, this new group needed to work through some of these same areas – for instance the definition of acupuncture.

The ASG recently carried out a survey on the aspirations of each member. All agreed that they wanted a say in educational standards and that each professional body wanted to continue in some capacity post regulation, although most appreciated this would be in more limited way.

Chinese Medicine Stakeholder Group

Mike O'Farrell reported back from the CMSG as follows :

There are seven organisations represented on the CMWG including 40% of the clinics. So far the CMSG has covered

- (a) Code of Practice
- (b) Core Curriculum

and all agreed on the content, (hard copies will be circulated separately). Both of these documents are very similar to the Register of Chinese Herbal Medicine (RCHM) and the British Acupuncture Council (BAcC) documents of the same name and have been reviewed by officers from these organisations.

The next step will be for the same exercise to be carried out on the Code of Professional Conduct and the Audit for Clinics. The group has also produced a list of educational establishments offering TCM and the courses are accredited by either the British Acupuncture Accreditation Board (BAAB) or EHPA and are in many cases the same courses, (again a hard copy list will follow). It is clear by the statements above that the CMSG is covering much the same ground as the other Stakeholder Groups.

The big issue in TCM has been the reputation of the clinic sector which, arguably, is seen as "the public face" of Chinese medicine in the UK - particularly as far as the media, Environmental Health officers and Trading Standards officers are concerned.

At this stage the group has received the following commitments from the body representing this sector:

1. The members working in the shops will come from authorised bodies.
2. They will pilot an independent audit of the stores which they will then expand, making results available.
3. They will agree to the acceptance of all the codes that the people working in their stores must adhere to.

It is the statutory regulation of these professions that is forcing progress in the development of standards across this sector.

Mike O'Farrell had been asked why does the CMWG need to exist, to which he responded:

- (a) They were offered as a possibility, a separate protected title in the white paper
- (b) They felt excluded from the early discussions on regulation and the clinics were not included in any discussions at any stage.

Herbal Medicine Stakeholder Group

Michael McIntyre had already submitted a report from the Herbal Medicine Stakeholder Group, which was circulated with the meeting papers. Michael confirmed that the Group has also invited organisation not represented by the EHPA (e.g. Unani Tibb) to attend. Michael confirmed that draft scope of practice statements have been written and hopes to circulate this at the next Group meeting.

- 6. Any other business. Action: Amrit Ahluwalia to circulate dates of the three Stakeholder Chairs meetings to lay members for their possible attendance.
- 7. Date of next meeting – 28 November 2006 at the West Yorkshire Playhouse in Leeds, to start at 12 noon.

Department of Health
October 2006