

Clare Haughey MSP
Convener
Health, Social Care and Sport Committee
Scottish Parliament
EH99 1SP

16 January 2026

Dear Convener,

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

I am writing, as the statutory registrar for chiropractors, in response to comments in the report of your meeting of 16 December asking for consideration that the General Chiropractic Council (GCC) and General Osteopathic Council (GOsC) be removed from the part 1 exemption in the above bill.

The GCC is an independent statutory body established by, and accountable to, Parliament to regulate the chiropractic profession. We protect the health and safety of the public by ensuring high standards of practice in the chiropractic profession. We set standards of practice and education, and take action when we believe these standards are not met.

As the regulator, our role is not to promote or lobby on behalf of the profession, but to consider the health and safety of the public.

I share the concerns of my colleagues at the NMC and GMC of the devastating harms that can result from cosmetic procedures of the type identified in the Bill and strongly support the intentions of the Bill to keep the public safe. I do not think that cosmetic treatments are within the scope of practice of a chiropractor – nor do I believe that the public expect their chiropractor to offer cosmetic procedures.

However, I am concerned that the suggestion to remove the GCC from the health care provider exemption would interfere with legitimate healthcare (prevention, diagnosis or treatment of an illness) for patients and could cause unnecessary confusion for the public.

Clarification

May I begin by respectfully clarifying two points¹ made during the meeting of Tuesday 16 December, to ensure any decision the committee makes is based on accurate information:

Firstly, chiropractors (and osteopaths) in the UK are autonomous statutorily regulated physical health professionals with recognised medical training (level 7 – equivalent to MSc). For comparison, a nursing or physiotherapy degree is level 6 (BSc). Chiropractors work alongside other health professionals and specialise in treating pain and mobility through manual techniques, rehabilitative interventions and providing education and advice to

¹ https://www.parliament.scot/chamber-and-committees/official-report/search-what-was-said-in-parliament/HSCS-16-12-2025?meeting=16767&io=143227#orscontributions_M3901E386P722C2757050

patients. They adhere to a Code of Professional Practice which expects evidence-based practice and continuing professional development of their skills. As their regulator, if we find they fall below these standards, we can apply sanctions which include removal from the register.

Secondly, the member is correct that chiropractors and osteopaths may not prescribe pharmaceuticals (they do not have independent prescribing rights). However, in common with many other statutorily regulated professions², they are permitted to supply or administer medication under a Patient Specific Direction (PSD - i.e. inject a drug prescribed by someone else) and administer medical devices. As specialists in musculoskeletal medicine and pain management, I believe it is appropriate for chiropractors and osteopaths (given appropriate training and safeguards) to perform these procedures within their scope of professional practice.

Our previous involvement with the Bill

In August 2025 the GCC met with the Scottish Government, alongside other regulators, to discuss our concerns that the Bill could inadvertently impact justified medical treatment and restrict patient access to the most appropriate care.

When the draft Bill was published, I was reassured by the proportionate approach taken by providing an exemption in Section 1, part 1b for a procedure³:

that is provided by a health care provider for the purpose of, or in connection with, preventing, diagnosing or treating an illness of the person

But I now understand there is a suggestion to remove chiropractors and osteopaths from the definition of health care provider, by excluding the GCC and GOsC from the list of regulators.

This suggestion does not appear to be based on risk to the clinical patient, but a misconception that a professional will abuse the exemption for commercial gain (an abuse that would be grounds for me to take regulatory action).

Impact on patients

My primary concern is for clinical patients and ensuring their access to the best possible care. As an evidence-based profession, the chiropractor works with the patient to diagnose and then treat their individual illness. If the patient has consented to the treatment, understands the risk, and the chiropractor is competent to deliver it, it is disproportionate to prevent the patient from receiving care based on the job title of their registered healthcare professional.

I suspect that this will not be well understood by patients, many of whom have chronic or long-term conditions, and who rely on their chiropractor's skills to help them manage their condition.

I am also concerned that removing the exemption could limit patient access to as-yet unknown or novel medical techniques that may not have been developed.

² For example: <https://www.hcpc-uk.org/standards/meeting-our-standards/scope-of-practice/medicines-and-prescribing-rights/our-professions-medicines-and-prescribing-rights/>

³ <https://www.parliament.scot/-/media/files/legislation/bills/s6-bills/non-surgical-procedures-and-functions-of-medical-reviewers-scotland-bill/introduced/spbill77s062025.pdf#page=3>

Regulatory Inconsistency and public confusion

The proposed Bill relies on the pragmatic approach of defining a “health care provider” through their registration with a statutory healthcare regulator.

While not perfect, this approach has precedent in both UK and Scottish legislation by either referring to the bodies by name ^(example: 4) or by reference to the NHS Health Service Reform and Health Care Professions Act (2002) ^(example: 5). Both approaches allow the exemption to be summed up in lay terms as “when provided by a registered healthcare professional”.

By excluding professions by virtue of the regulator of that profession, there is a significant risk of public confusion. We already see a substantial overlap in the public mind between physiotherapists (who are regulated by the Health and Care Professions Council (HCPC)) and chiropractors and osteopaths. This is understandable as they treat similar conditions with similar techniques. Conversely, there are many other valuable professions (for instance play therapists and speech therapists) which would retain the exemption based solely on their regulator (HCPC) but would not be expected to offer these treatments.

By defining “health care provider” through statutory registration, the Bill can demonstrate trust that the healthcare regulators, and the professionals that they regulate, will make a clear distinction between clinical need and cosmetic intent.

The committee can have confidence that the GCC would take strong action in the event of a registrant being suspected of providing cosmetic procedures, and I look forward to working with the Scottish Government and Healthcare Improvement Scotland in supporting the implementation and enforcement of the Bill.

Yours sincerely



Nick Jones

GCC Registrar and Chief Executive Officer

⁴ For example:

<https://www.legislation.gov.uk/asp/2007/14/section/30A#text%3D%22chiropractic%20council%22>

⁵ For example: <https://www.legislation.gov.uk/ssi/2006/604/article/2/made>