

## Accredited Registers Programme

### Accreditation Panel's Decision

Application for renewal from:	Treatments You Can Trust (TYCT)
Panel meeting:	26 October 2017 <b>(decision: remove accreditation)</b>
Appeal panel meetings:	15 December 2017 <b>(meeting Adjourned)</b> 26 February 2018
Appeal decision:	27 February 2018 <b>(Panel decision upheld: accreditation removed)</b>

The [Professional Standards Authority](#) accredits registers of people working in a variety of health and social care occupations not regulated by law. To be accredited, organisations holding such registers must prove that they meet our demanding [Standards for Accredited Registers](#) (the Standards). Accreditation is reviewed every twelve months.

The Accreditation Panel reviewed the accreditation of the register held by TYCT. The review was carried out in accordance with the Professional Standards Authority's published Accredited Registers Accreditation Guide (April 2016). Panel members reviewed the annual review application form, risk matrix, TYCT's query sheet responses, complaints documentation and a summary report from the Accreditation team. The Panel had to review TYCT's compliance with the Standards and decide whether to **renew accreditation**, **renew accreditation with conditions**, **suspend accreditation** or **remove accreditation**. The Panel could make recommendations in the form of:

- **Conditions** – changes that must be made to maintain accreditation. If Conditions are not met within the timeframe specified, accreditation may be removed.
- **Instructions** – actions that would improve practice but do not affect compliance with the Standards and that the Panel requires to be implemented and be satisfied of appropriate implementation within a given timeframe
- **Learning Points** – actions that would benefit the operation of the register, the implementation of which would be verified during the annual review of accreditation.

The Panel considered the range of options available to it, as outlined within the Accreditation Guide, when making its decision.

The Panel noted the assessment carried out by the Accreditation team for the annual review included:

- Documentary review (annual review form, query sheet response and risk matrix)
- Due Diligence checks and Patient/Service User journey
- Review of share your experience responses and concerns received during the year of accreditation
- Complaints Handling Review
- Site visit to review progress against the previously issued Condition, Instructions and Learning Points.

The draft summary report prepared by the Accreditation team was provided to TYCT for comment prior to the Panel meeting and these comments incorporated into the report provided to the Panel.

The Panel was asked to declare any conflicts of interest. Harry Cayton stated that he chaired the Chief Medical Officer's Expert Group on the Regulation of Cosmetic Surgery, whose 2005 report made recommendations to the Chief Medical Officer. Harry Cayton also declared a longstanding professional relationship with one of the Directors. The Panel was satisfied that that this was not likely to cause a conflict of interest. It was agreed that he should continue with the Panel to hear and decide the application.

The Chair of the meeting, Christine Braithwaite declared that she had sat on TYCT's former Governance Group and had resigned in November 2015, before TYCT applied for accreditation with the Authority. The Panel noted that she was not a member of TYCT's Accreditation Panel and was not a decision-maker therefore could continue as the Chair of the meeting.

There were no other declarations of interest from members of the Panel.

## Outcome

The Panel was not satisfied that TYCT continued to meet the Standards for Accredited Registers. It found that TYCT did not meet Standards 2, 4, 5, 7, 10 and 11. Full reasons for the Panel's decisions in relation to each standard are set out in Annex A. The Panel decided to remove accreditation because the failure to meet six of the eleven Standards, lapsed compliance with the Condition issued following suspension, and non-compliance with Instructions issued at initial accreditation meant that the Standards could not continue to be met.

The Panel considered all the options available to it in ascending order of seriousness, including the issuing of Learning Points and Instructions, the imposition of Conditions, Suspension and Removal of Accreditation. The Panel acknowledged the need to act proportionately by only taking the action necessary to achieve public protection. The Panel noted an ongoing issue with inaccuracies on the register, which had caused TYCT's accreditation to be suspended last year. Although a Condition imposed following the suspension had been met at the time, the annual review assessment revealed continuing inaccuracies in TYCT's register. The Panel concluded that, had the Condition still been in force, it would not have been met and that the accuracy of the register is fundamental to an Accredited Register and the protection of members of the public using health and care practitioners on Accredited Registers. The Panel noted that a number of instructions issued by the previous accreditation panel had not been met and that some Instructions issued by the previous accreditation panel had not been proactively addressed in a timely manner and were not implemented until prompted during this year's site visit. The Panel also noted that two Learning Points issued by the previous accreditation panel had not been considered. The Panel concluded that it did not have sufficient confidence that actions required to meet the Standards would be acted on adequately by TYCT based on non-compliance with Instructions and the recurrence of problems that had previously resulted in suspension and then a Condition being issued. The Panel did not consider that re-issuing learning points or instructions or re-imposing Conditions or suspension were adequate to achieve public protection, particularly because of the failure by TYCT to act in a timely manner in the past and because these options had been used previously but had not resulted in the Standards being met. Therefore, the Panel decided the only sufficient option to address the fundamental failings by TYCT was removal of accreditation. In making its decision to remove accreditation, the Panel took account of the impact of its decision on the public, TYCT, and its registrants. The Panel concluded that removal of accreditation was necessary to protect the public, despite the impact this would have.

TYCT appealed the decision of the Panel. After careful consideration of the points raised by TYCT in its appeal, the Appeal Panel decided to dismiss the appeal and accreditation was removed. The Appeal Panel's decision [can be accessed here](#).

## Annex – Accreditation Panel’s Decision – application for renewal of accreditation

<b>Organisation:</b> Treatments you can Trust ( <a href="#">TYCT</a> )	<b>Outcome</b>
<b>Panel meeting Date:</b> 26 October 2017	<b>Accreditation Removed</b>
<b>Update on Conditions issued in the previous year</b>	
<p>In August 2016, TYCT’s accreditation was suspended due to significant inaccuracies on its register. TYCT undertook mitigating actions to remedy the inaccuracies within its register. Following this, TYCT’s suspension was lifted by the Panel later in August 2016. The below Condition was put in place by the Panel as part of lifting the suspension.</p> <p><b>1. TYCT must:</b></p> <p><b>a) Inform the Authority of the quality assurance conditions they put in place to assure the work of their Registrar</b></p> <p><b>b) Take steps to ensure that TYCT’s registrants are aware of, and fulfil, their responsibilities to inform TYCT of any changes in their circumstances. TYCT must inform the Authority of how they intend to do this and the timescales for implementation.</b></p> <p><b>TYCT is to report on its compliance with this Condition within one month of the issue of this report (no later than 19 September 2016)</b></p> <p>TYCT provided a report to the Panel on 16 September setting out the arrangements it was putting in place. The Panel considered the information provided by TYCT in response to the Condition and decided that it had met the Condition.</p> <p>As part of the annual review assessment the Accreditation team (the team) checked the implementation of the actions suggested by TYCT in its report and noted the following.</p> <p>One of the actions TYCT carried out last year was to update its <a href="#">terms and conditions</a> to include reference to the responsible officer role for large groups of clinics and the requirement for registrants to inform TYCT ‘<i>if you cease to be registered with your professional regulator or your registration is made conditional</i>’. At the time, the</p>	<p>The Panel noted that the Condition was met at the time, but that it appears to have lapsed when the implementation was tested by the team. The Panel noted the continuing errors on the register and reiterated that accuracy of the register is fundamental to an Accredited Register and compliance with standard 10. The Panel noted that this also affected compliance with Standards 2 and 5.</p>

team asked if TYCT had considered updating its terms and conditions to include the requirement for registrants to inform of any other changes such as change of name or practice address. TYCT indicated that it would be more explicit about the change notices required, amending its terms and conditions accordingly. TYCT confirmed in the query sheet for re-accreditation this year that it had made these changes, and provided a copy to the team for verification.

The team noted that the declaration for the responsible officer (for the large clinic groups the responsible officer is responsible for ensuring that the information provided to TYCT is accurate for the practitioners within their group) includes the following statement:

*“I will immediately inform The Registrar, Treatments you can Trust of changes that happen to the details of my clinic and the practitioners practising at it which are displayed on the Public Register published on this website ([www.treatmentsyoucantrust.org.uk](http://www.treatmentsyoucantrust.org.uk)) during the period of registration.”*

The Registrar function is outsourced to Northgate Public Services. A named individual within Northgate has the Registrar role. TYCT informed the Authority that it had appointed a Data Governance Officer who will set standards for and monitor data quality, data security and data manipulation and carry out quality checks by sampling the data. TYCT confirmed that these checks are being carried out weekly, monthly, quarterly or annually, depending on the type of check. TYCT informed the Authority that the Directors, data Governance Officer and the Registrar have weekly catch up meetings where any anomalies are discussed. TYCT defined the quality assurance standards and actions needed to ensure the quality of data. The team discussed the quality checks carried out by TYCT at the site visit. The Registrar checks the information provided by the applicant including professional regulator (GMC, GDC and NMC) number and Care Quality Commission (CQC) reports (where available). The majority of applications are on-line and as such the information is supplied to the Registrar in electronic format such as scanned copies or photographs of originals. The originals are then checked by the Director if they carry out the site visit. Once these checks have been completed the application goes to the Directors for the final decision with any comments from the Registrar. Once approved, there is a final check carried out by the Data Governance Officer before the registrant's profile is published. The registrant is then informed and asked to check that the details are correct.

For the large clinic groups, monthly checks are carried out on the information held by TYCT. Each month the Registrar sends a spreadsheet containing the practitioner information that TYCT holds for the group to the

<p>responsible officer. The responsible officer is required to check the information for accuracy and report any changes to the Registrar.</p> <p>As part of this assessment, on 9 August 2017 the team checked a random sample of the register - 46 registrants, some of which had multiple entries on the register (resulting in 55 register entries in total), approximately 10% of the register. The team found inaccuracies and inconsistencies in the majority of the register entries, which they reported to the Panel. Errors included different clinic names and addresses being recorded on the TYCT register when compared to the CQC and Healthcare Inspectorate Wales (HIW) registers, inconsistency in the way that clinics that had not been inspected by CQC and HIW were recorded, inconsistencies in the recording of treatments offered and an instance of the wrong regulator number being recorded.</p>	
<b>Update on Instructions issued in the previous year</b>	
<p>The Panel provided the following Instructions to be implemented by the timeframe provided or by annual review of accreditation as specified below:</p> <p><b>1. TYCT should notify the Authority if it plans to add new occupations, modalities or categories to its register</b></p> <p>A concern was raised with the Authority at the end of 2016 that TYCT had announced in its newsletter that it had applied to the Authority with a notification of change for the addition of laser users to its register before this had occurred. In January 2017 TYCT submitted a notification of change form for the addition of laser users to its register. TYCT decided not to continue with this change due to the potential cost of a notification of change.</p> <p>A concern was raised with the Authority in May 2017, that TYCT had announced that it had opened its register to dental therapists and dental hygienists without going through a notification of change process. In TYCT's May newsletter, it stated the following:</p> <p><i>'TYCT admits dental therapists and Dental Hygienists (DT/DH) to the Treatments you can Trust Register Following clarification of the GDC position (see TYCT February newsletter), and assuming the required training has been undertaken, TYCT will shortly welcome the first qualifying DT/DH to the TYCT Register of Injectable Cosmetic Treatment Providers.'</i></p>	<p>The Panel found that this Instruction had not been implemented.</p>

*To qualify to be admitted to the register a dental Therapist of Hygienist must be on the GDC Register and meet the TYCT admission standards for a practitioner. Because no DT/DH are qualified prescribers, TYCT will register DT/DH applicants to work with a lead practitioner who will conduct the face-to-face patient examination and prescribe appropriate treatments.*

*The GDC requires that remote prescribing should not be used in the provision of non-surgical cosmetic procedures such as the prescription or administration of Botox® or injectable cosmetic medicinal products.'*

The team queried this with TYCT, explaining that this type of change would need to be assessed through the notification of change process. TYCT published the following retraction in its [June newsletter](#):

*'Statement on status of Dental Therapists and Hygienists in relation to Treatments you can Trust Public Register*

*Following an intervention by the Professional Standards Authority, the following rules will apply to the Treatments You Can Trust Public Register exhibited on the **TYCT Website**.*

*Appropriately qualified Dental Therapists and Dental Hygienists who do not have prescription rights should perform injectable cosmetic interventions only under the supervision of a dentist holding understanding injectable cosmetic interventions. Only the dentist will be named on the Public Register, and will be shown as "Lead Practitioner".*

*TYCT will continue to validate and record dental therapists and dental hygienists in association with their lead practitioner against the date when they can be shown on the JCCP Public Register after November 2017.'*

**2. TYCT should list every registrant who meets its standards on the register, unless there were exceptional circumstances involving the safety of the registrant. The policy on exceptional circumstances to allow a registrant to have their name off the register should be clearly published on the register website**

TYCT noted that to date it has not been asked to keep a registrant's name off the register and therefore did not find a need to publish detailed rules. TYCT has added a note under its terms and conditions: '*If you believe that*

The Panel noted that TYCT had added a note to its terms and conditions but that it had not written a policy. The Panel found that this Instruction has not been fully implemented.

*publication of your name may imperil you in any way, please explain the circumstances for us to review.* The team asked what action TYCT would take if it was asked to keep a registrant's name off the register for safety reasons. TYCT noted that it would do as asked by the registrant and that the practitioner would be displayed as 'registered practitioner' under the clinic entry. TYCT noted that it is unlikely that a practitioner would want to opt out of the register given the competitive nature of the business. The team noted TYCT's response and discussed that if this happened TYCT would need to ensure that the presentation of this on the register was clear to the public.

**3. TYCT should ensure that they have an established and operational scrutiny process, for identifying and mitigating potential conflicts of interest within the register's governance structure.**

At the initial assessment, the Panel noted that it was not clear how TYCT handled actual and perceived conflicts of interest and so issued the above Instruction.

TYCT reports that: *'our answer in our original submission remains the same. No conflicts of interest have been declared by the Governance board. For the forthcoming meeting on 19 July 2017 this has changed, because one Board member is taking forward one of the modalities for CPSA.'*

The team asked TYCT how it became aware of the new conflict of interest and the actions taken. TYCT responded that the Board member emailed one of the Directors following the circulation of the papers. TYCT noted that the Board member was unable to attend the meeting, however they did not and would not have discussed the item in detail due to the conflict of interest. TYCT confirmed that conflicts of interest are asked for at the beginning of each Governance Group meeting.

The team discussed this with TYCT at the site visit. The TYCT Directors are bound by the [Articles of Association](#) which provides guidance on the handling of conflicts of interest for them. TYCT informed the team that it would be suggesting the following update to the Terms of Reference for the Governance Group:

*'Governance Board members recognise the seven principles of public life (The Nolan Principles) and will seek to act accordingly in respect of their responsibilities towards Treatments you can Trust and its aim to serve the public. Should any member of the Board believe that, in pursuing his duty on the Board, he is in conflict with those principles he will declare that conflict at the earliest opportunity, such as at the opening of a meeting of*

The Panel noted the actions taken by TYCT and found that this Instruction would be met subject to the Governance Board approving the updated Terms of Reference but that it was not yet in place. The panel noted that action was prompted by the team during the assessment period.

the Board. In such an instance, the Board will cause appropriate action to be taken in accordance with the Charity Commission Guidance of 23 May 2013

“Manage a conflict of interest in your charity” (<https://www.gov.uk/guidance/manage-a-conflict-of-interest-in-your-charity>)’

- 4. TYCT should ensure that only registrants use the Accredited Registers logo and other benefits of accreditation. TYCT will need to make clear that accreditation applies to practitioners only. TYCT should monitor how its registrants communicate accreditation. Monitoring should take place throughout the duration of this accreditation and an update should be provided at annual review.**

TYCT reported that the use of the Quality Assurance Mark is scrutinised annually at every renewal and whenever the registrant’s website is visited by the Registrar, the results of these checks are recorded on the register. TYCT noted that ‘*significant aberrations are reported to the Directors and the registrant requested to remedy the defect.*’ TYCT confirmed that a significant aberration is an instance where the quality mark is being used incorrectly, where is not being used at all or where an old version is being used. TYCT noted that it does not keep count of this aberration but that at the 2017 renewals it had to remind the majority of its registrants that the logo includes the Accredited Registers quality mark. TYCT reported that it would act on information received suggesting the incorrect use of the Accredited Registers quality mark, to ensure that registrants use it correctly. TYCT also publishes information about the use of the quality mark in its newsletters.

TYCT reported that it issued revised directions on its use of the quality mark in January 2017. These were reviewed by the Accreditation team who noted that the directions for use of the logo covered the TYCT logo but not the combined quality mark. TYCT’s addendum does however state that the Accredited Registers mark should also be used and it provides combined versions to its registrants.

The team noted that TYCT produced window stickers for clinics that included the Accredited register quality mark. TYCT reported that very few of its registrants use them so ‘*the window display QAM is being replaced by a more explanatory display certificate for use by the clinic.*’ The team reviewed the certificate and noted that it includes the following statement:

*“this quality assurance mark has been awarded to practitioners in this clinic that display our certificate.”*

The Panel noted the actions taken by TYCT to implement this Instruction and considered that this Instruction had been met.

This was discussed at the site visit, where TYCT proposed that it would start quarterly checks using google image search to monitor the use of its quality mark. Any aberrations will be reported and acted on. TYCT will also continue using its newsletter to inform registrants about the use of the quality mark.

**5. The Governance Group should review the process for assessing course suitability to ensure that decisions made are fair and consistent. The outcome should be reported to the Accreditation team at annual review**

TYCT reported that *'since this instruction was issued, JCCP has announced its intention of setting up a register of suitable education and training providers. While the specifics are being decided, the governance Group has advised TYCT continues to accept evidence of training, additionally advising registrants to enquire before undertaking training whether the training provider is working towards implementation of the HEE Qualifications requirements; and only accept those that do.'*

TYCT confirmed that initial assessments of training evidence are carried out by the Registrar, but final say on the suitability of training for the register rests with one of the Directors. The Directors use TYCT's training principles to assess the suitability of courses. TYCT reported that the process and way forward was discussed by the Governance Group.

This was discussed at the site visit. TYCT noted that a pilot is currently being carried out relating to the education and training standards which is due for completion in December. Once completed, the education and training standards will need to be updated.

**6. TYCT should put a system in place to ensure that it is clear to the public when a registrant has been added to the register but where a clinic assessment has not yet been carried out. This should be completed within three months of accreditation.**

The Panel granted TYCT an extension to complete this work. It was reviewed by the original Panel in January 2017 who agreed the Instruction had been implemented. TYCT confirmed the use of the following:

- *Regulatory Body: **CQC Not Registered*** - for those premises not registered with a system regulator and not yet inspected by TYCT
- *Regulatory Body. **CQC Awaiting Inspection*** - for premises registered with a system regulator and not

The Panel noted that TYCT's approach to education and training had been discussed by the Governance Group but it was not clear from the evidence that it had carried out a review of the process. The Panel found that this Instruction had not implemented.

The Panel noted that TYCT had created the categorisation which was the basis for accepting that this Instruction had been implemented in January. However, the Panel considered the inconsistencies found in the register checks and noted

yet been inspected by the system regulator

- *Removed. **Failed TYCT Standards*** - for premises registered with a system regulator and failed two or more relevant sections of the inspection
- **CQC (Old Inspection number)** - for premises registered with a system regulator and changed ownership or Registered Person since the last inspection and the inspection report has been Archived.

In the annual review form, TYCT noted that it has introduced a further category. This category is for registrants working in premises that are not CQC registered and where TYCT inspects the premises against its standards. This will read '**TYCT inspection, meets TYCT Standards**'.

The team reviewed a selection of the register as part of its assessment and noted that some clinics had no note to state that it had not been inspected yet. TYCT reviewed its register and amended as necessary.

#### **7. TYCT should fully document policies regarding restoration of registration or readmission**

TYCT updated its terms and conditions, adding the following statement:

*'Application to be restored to the Register, may be made. We will treat any such request as a new application <http://treatmentsyoucantrust.org.uk/make-a-new-application> and not a renewal <http://treatmentsyoucantrust.org.uk/make-a-renewal-application>.'*

The team clarified how long an individual would need to wait until re-applying. TYCT confirmed that the ex-registrant need to wait until the disciplinary action has been spent and that they would mirror the requirements of the statutory regulator for those who had been removed. The team discussed this at the site visit and suggested that this should be made clear. TYCT added this to its sanctions guidelines.

#### **8. TYCT should ensure their complaints procedures are fully documented and make their complaints procedures for complaining about registrants and the organisation clear to the public**

##### Complaints against registrants

TYCT's procedures for complaints against registrants can be found on the [website](#).

At the initial Panel meeting, the team reported that:

that the implementation of the Instruction did not appear to be effective.

The Panel found that TYCT had not acted on this Instruction during the course of the accreditation year and that it was met only following intervention from the Accreditation team during the annual review assessment.

The Panel found that TYCT had not acted on this Instruction during the course of the accreditation year and that it was met only following intervention from the Accreditation team

*'As part of the acceptance onto the register, all individuals/clinics are expected to have a written policy and procedure for investigating and handling complaints which includes how to raise a concern, timeframes and how to contact the professional regulator if the complaint cannot be resolved. If the service user is still not satisfied following this, they can raise their complaint with TYCT under their stage 2 complaints procedure. TYCT will then refer this to the CEDR [the Centre for Effective Dispute Resolution] who facilitates mediation. This process is free of charge to the complainant. The web page explains what mediation is, but does not provide any further guidance. TYCT provided information about the mediation process to the accreditation team. This includes information such as timings for resolution and what happens with the person's complaint once it has been referred to the mediator. This information is not currently on the website. TYCT reported that further guidance is provided after they have received and assessed the complaint.'*

The Panel noted that the process had not been fully documented and so issued the above Instruction.

As part of its annual review process, the team reviewed the information on the website. The website stated that complaints should first be raised with the treatment provider for local resolution. If the provider and complainant cannot agree a way forward, the complaint will be sent to either the head office of the clinic group (if one exists) or to TYCT for resolution by CEDR. The website suggested that TYCT will appoint an independent mediator. If this does not work, the complainant can complain to TYCT requesting the *'stage 2 complaint procedure.'*

Following its review of the summary report, TYCT changed the wording of the information on its [website](#) to make this clearer.

TYCT's website states that complaints about professional conduct can be put to the regulator and provides links to the GMC, GDC and NMC. It also states that TYCT may refer complaints if they think that the information provided merits it.

The team asked TYCT to confirm how it would handle a concern that was not suitable for the CEDR process. TYCT responded that: *'A number of Clinic Organisations subscribe to ISCAS [Independent Sector Complaints Adjudication Service] and would route concerns through that organisation. For further details of ISCAS, see [www.iscas.org.uk](http://www.iscas.org.uk) . Under the terms of ISCAS, providers must make their complaints process known to all patients. ISCAS is approved by all UK competent authorities. Single aesthetic clinics are unlikely to belong to ISCAS, which is why CEDR is offered. It does what its title suggests, give effective dispute resolution. As you are aware, we refer concerns about professional conduct to the professional regulator; and those about system*

during the annual review assessment.

*failures to the system regulator if appropriate; and otherwise appropriately (e.g., a local authority) within the law.'*

The team asked TYCT what process it would use if a concern was not suitable for the CEDR process of referral to the professional regulator or system regulator. TYCT stated *'we expect the CEDR process to address all normal concerns, using proper process. Examples that we envisage where CEDR could not act include: criminal investigation (e.g., false claim to be statutorily registered as a doctor) (police); improper advertising of drugs (MHRA); tax evasion - HMRC; illegal employment - Borders Agency; unsubstantiated claims of quality etc. - ASA; imperfect premises – CQC or local authority.'*

At the initial assessment, the team asked TYCT how it would handle a case that suggested a breach of its standards but was not suitable for CEDR or referral to the regulator. TYCT stated that the initial investigation would be carried out by one of the Directors. If this suggested a breach, it will be reported to a sub-Panel of the Governance Group who would decide if a breach has occurred and what sanctions to apply. TYCT reported that this was a new process that would be documented by the end of August 2016. The team discussed this with TYCT at the site visit in October 2017. Following the site visit, TYCT documented how it will handle complaints that are not suitable for CEDR or referral to the regulator. TYCT published its new procedure on its website.

#### Complaints against the organisation

TYCT's complaints against the organisation policy was previously only found on the 'for health professionals' section of the website under [managing complaints and disputes](#). It stated:

*'if a complaint against actions by TYCT cannot be settled between the parties, TYCT will refer the matter to CEDR for mediation, on a shared-cost basis division of the CEDR charge of £500.*

*If not then settled, the complaint will be referred to the TYCT Governance Board.'*

The team noted that a member of the public who wanted to complain about TYCT might not find this information and if they did could be dissuaded by the suggestion that the cost would be on a shared basis. The team raised this with TYCT at the initial application where it said that a member of the public would not be expected to share the costs and that it would make its procedures clear on the website.

The team asked TYCT to clarify the procedure to be used by a member of the public as part of the annual review assessment. TYCT provided the link to the above page and noted that '*Since this was written, ISCAS has derived new guidance on handling vexatious (unreasonable behaviour) complaints (to which TYCT is open) and we are considering adopting this and thus removing the £250 financial hurdle implied in our present policy.*'

Following its review of the summary report, TYCT updated its website and now has added a separate section called [compliments and concerns](#) under the 'for patients' tab describing how a member of the public could complain against the organisation. This now states:

*'Treatments You Can Trust (TYCT) expects that, if anyone has a complaint or concern about TYCT actions, this will first be put to TYCT for local resolution.*

*If a concern or complaint about actions by TYCT cannot be settled between the parties, TYCT will, with the agreement of the complainant, refer the matter to the independent **Centre for Effective Dispute Resolution (CEDR)** for mediation. [See the CEDR website](#)*

*Failing such agreement or if mediation does not result in agreement, then a complaint may be made to the **Professional Standards Authority (PSA)**. PSA states that "if you are unhappy with the way that TYCT handled your complaint or another part of its role and think it does not meet our standards you can Contact Us". [See the PSA website](#)*

**Note:** *PSA do not consider complaints about individuals on the TYCT Accredited Register, as PSA expect TYCT to handle these complaints'*

#### **9. TYCT should develop mechanisms to ensure complaints decisions are fair and consistent, for example indicative sanctions guidelines**

The team noted that TYCT published the sanctions that are available, however it was not clear in what circumstances these would be applied, the process for issuing these, and who would apply them. This was discussed with TYCT at the site visit. Following the visit TYCT produced guidelines that provided more information about the sanctions available. The team noted that TYCT will also publish relevant sanctions that are issued by the regulator, however its process for deciding if a sanction was relevant to the registrant's non-injectable cosmetic practice was not clear.

The Panel found that TYCT had not acted on this Instruction during the course of the accreditation year and that it was met only following intervention from the Accreditation team during the annual review assessment.

<p><b>10. TYCT should document its procedure for publication of sanctions with clear timescales for length of publication</b></p> <p>The team noted that this had not been implemented at the time of submission of annual review documentation and discussed with TYCT at the site visit. TYCT added this to its sanctions guidelines.</p> <p><b>11. TYCT's Governance group should review TYCT's Complaints Procedures within the following 12 months and provide an update at annual review of accreditation.</b></p> <p>TYCT reported that the Governance Group approved the procedures as described within the renewal form at the February 2017 Board meeting. The team asked for the minutes of this discussion. The team noted that the discussion appeared to be limited to the CEDR process for registrants and that the focus of the discussion was based on the communication and promotion of this service.</p>	<p>The Panel found that TYCT had not acted on this Instruction during the course of the accreditation year and that it was met only following intervention from the Accreditation team during the annual review assessment.</p> <p>The Panel noted that the Governance Group had discussed complaints, however from the evidence provided it was not clear that the Governance Group had fully reviewed TYCT's complaints procedures. The Panel found this Instruction had not been implemented.</p>
<p><b>Update on Learning Points issued in the previous year</b></p>	
<p>The Panel provided the following Learning Points to be revisited at the next annual review of accreditation:</p> <p><b>1. TYCT should continue the implementation of Patient and Public Involvement (PPI) strategies to inform and involve the public and service users in what they do, and provide an update of progress at the annual review of accreditation. TYCT should continue to explore options for engaging service users</b></p> <p>This was discussed further at the site visit, where TYCT noted that it wants to promote the positive side of the industry. TYCT stated that communications are discussed at the Governance Group meetings on a regular basis.</p>	<p>The Panel noted the actions taken by TYCT and found that the Learning Point had been considered.</p>

The team noted that the main avenue TYCT uses to communicate with the public is through the website. TYCT reports that it has used newsletters which are published on its website and sent via email to its distribution list. TYCT also use Twitter and Facebook. TYCT regularly attend and present at conferences and publish articles in journals to raise the profile of the organisation within the sector.

The team noted that in the initial application, TYCT stated that the Governance Group would be responsible for carrying out annual customer surveys to seek the views and experiences of the service users. The team asked for an update on this work. TYCT reported that *'the outcome of registrant's customer surveys are reviewed. Registrants are encouraged to feedback on contents of the TYCT Newsletters.'*

Also at the initial application, TYCT stated that it would work with Northgate to collect data from practitioners relating to their practice to try to increase the information available to the public. TYCT stated that *'starting in 2015 we contracted Northgate Public Services (which has national experience in this type of work) to define the data set for collecting adverse incidents which is advised by a set of denominators. The data collection already undertaken by the largest provider on the register has been included so that the results are meaningful and practical. This large amount of original work under our oversight has not been previously undertaken in the cosmetic industry. The resultant body of work has now been gifted to CPSA to form the basis of its adverse incident and volume data formation.'*

The team asked for an update. TYCT stated that *'Northgate has been named as the preferred provider to JCCP for this work, including co-operation with TYCT. The contract has yet to be costed and signed. However the original work with sk:n is currently influencing the work for the way forward.'*

**2. TYCT should consider developing criteria and a mechanism for managing registration while investigations are ongoing to protect the public**

TYCT noted that this would be actioned on a case by case basis and would involve the Governance Group. This was discussed with TYCT and will be reviewed as part of its work on documenting its complaints policy.

**3. TYCT should consider having a policy that establishes formal lines of reporting for professional associations, relevant bodies including statutory regulators and NHS departments to raise concerns about registrants to the register, including notification of complaints against registrants. This could be included in Memoranda of Understanding (MOU).**

The Panel noted that this Learning Point had not been considered.

The Panel noted TYCT's response and found that the Learning Point had not been considered.

<p>TYCT stated that: <i>'This valuable recommendation was overtaken by JCCP's announcement that it will arrange MOUs with all statutory regulators. Rather than cause confusion with a double set of negotiations, we have not pursued this.'</i></p>	
<p><b>Standard 1: holds a voluntary register for people in health and/or social care occupations</b></p>	
<p>TYCT reported that as of 1 July 2017, there were 394 registrants on the register, including 153 new registrants. TYCT stated that out of the 93 registrants that were removed from the register for non-disciplinary reasons, 57 were replaced by new staff at clinics.</p>	<p>The Panel found this Standard was met.</p>
<p><b>Standard 2: committed to protecting the public and promoting public confidence</b></p>	
<p>During the initial assessment, the team discussed the publication of sanctions on TYCT's public register. In the Panel outcome it was noted that <i>'TYCT also confirmed that registrants who have been removed or suspended will remain visible on the register.'</i> During its patient / service user journey the team noted that the terms and conditions state that <i>'We do not publish the names of practitioners who have been removed from the Register.'</i></p> <p>The difference between removal for administrative purposes and disciplinary procedures was discussed at the site visit. The publication of sanctions was considered as part of TYCT's work in documenting its complaints process as noted in the Instructions.</p> <p>Also at the initial assessment, the team noted that TYCT proposed that where a practitioner was under sanction by the regulator, they would provide a link to the sanction notice to ensure that the public were informed. TYCT has adopted this, but the team noted that TYCT's process for deciding if a sanction was relevant to the registrant's non-injectable cosmetic practice was not clear.</p> <p>The firewall between TYCT's business requirements and the register are discussed under Standard 5.</p>	<p>The Panel considered the ongoing errors identified in the register, TYCT's lack of timely response to the Instructions and not meeting standards 5, 7, 10 and 11 did not demonstrate sufficient commitment to protecting the public. The Panel found that this Standard was not met.</p>

<b>Standard 3: risks</b>	
<p>There have been no significant changes reported or noted since last year.</p> <p>TYCT noted that the risks remain unchanged and so did not submit an undated risk matrix. The team have supplied the Panel with the risk matrix submitted with the initial application.</p>	<p>The Panel found this Standard was met.</p>
<b>Standard 4: Financial sustainability</b>	
<p>The team reviewed the information provided from Companies House as well as additional information provided by TYCT. The team note that TYCT continues to operate at a loss but the Directors provided reassurance that debtors and future income would ensure sustainability of the register.</p>	<p>The Panel had concerns about the financial sustainability of TYCT. The Panel found that this Standard was not met.</p>
<b>Standard 5: capacity to inspire confidence</b>	
<p>There have been no significant changes reported since last year.</p> <p>As part of its assessment for this Standard, the team reviewed the openness and transparency of TYCT. The team noted that TYCT publishes details of its Governance Group on the home page, including brief biographies. TYCT also publishes its last three newsletters which can be accessed from the homepage. At the initial assessment, the team suggested that TYCT could improve its openness and transparency by publishing minutes of the open parts of the Governance Group meetings on its website. The team asked TYCT if it had considered this. TYCT responded that it publishes relevant information discussed at the Governance group meetings within its newsletters.</p>	<p>The Panel noted the issues already identified in relation to the inaccuracy of the register and TYCT's response to the Instructions. It also noted that standards 2, 7, 10 and 11 were not met. The Panel considered these matters adversely impacted TYCT's capacity to inspire confidence and</p>

	found that this Standard was not met.
<b>Standard 6: knowledge base</b>	
<p>There have been no significant changes reported or noted since last year. At the initial assessment TYCT stated that it would be working with Northgate to collect data from practitioners about their practise to try to increase the information available to the public and within the sector. The team asked TYCT for an update on this work. TYCT noted that: <i>'Northgate has been named as the preferred provider to JCCP for this work, including co-operation with TYCT. The contract has yet to be costed and signed. However the original work with sk:n is currently influencing the work for the way forward.'</i></p>	The Panel found this Standard was met.
<b>Standard 7: governance</b>	
<p>There have been no significant changes reported or noted since last year.</p> <p>As noted within the Instructions section, TYCT was provided with an Instruction to ensure that it has an established and operational scrutiny process, for identifying and mitigating potential conflicts of interest within the register's governance structure. At the site visit, TYCT reported the changes that were to be put before its Governance Group at its next meeting. During the site visit the team assessed TYCT's handling of complaints and noted a situation where there appeared to be financial and personal conflicts of interest which could blur the firewall between running the business and making decisions about registration.</p> <p>From the evidence provided by TYCT, including responses to Instructions, the effectiveness of the oversight provided by the Governance Group was not clear.</p> <p>TYCT reports that it has engaged with relevant stakeholders over the past year, including writing articles for journals, publishing its newsletter which can be accessed via the website and working with the JCCP.</p> <p>As part of its assessment of the Standard 7f, the team carried out a patient / service user journey on the new website. The team highlighted some points which are discussed under the relevant Standards.</p>	<p>The Panel considered the implementation of the actions in response to the Condition, TYCT's response to the Instructions and issues noted in this report. The Instructions provided at initial accreditation that required specific actions from the Governance Group were deemed by the Panel to have not been implemented. The Panel considered therefore that there was insufficient evidence of the effectiveness of oversight</p>

	provided by the Governance Group. The Panel found that this Standard was not met.
<p><b>Standard 8: setting standards for registrants</b></p>	
<p>There have been no significant changes reported or noted since last year.</p> <p>In the annual review form TYCT noted that it has <i>‘implemented changes to the registration and renewal procedures to ensure that registrants recognised the new standards of conduct required of them.’</i> The team clarified what these changes were with TYCT. This refers to the changes made to the declaration forms where registrants are required to sign to say they are in good standing with their professional regulators.</p>	<p>The Panel found this Standard was met.</p>
<p><b>Standard 9: education and training</b></p>	
<p>There have been no significant changes reported or noted since last year to Standards 9a to 9d.</p> <p>At month eight of accreditation, TYCT was reminded of the implementation of Standard 9e:</p> <p><i>9e) Makes its education and training standards explicit and easily accessible to the public to enable all those using the register to make informed decisions</i></p> <p>TYCT reports that it publishes information for patients in its <a href="#">FAQs</a> on its website. On this page TYCT states that:</p> <ol style="list-style-type: none"> <li>1. <i>‘Must be registered and licensed by the doctors’ professional regulator, GMC, and/or must be registered with the dentists’ professional regulator, GDC; or registered with the nurses professional regulator, NMC. We do NOT register anyone else and advise patients not to submit to treatment by anyone not a doctor, dentist or registered nurse.</i></li> <li>2. <i>Meet the Health Education England qualification requirement which, in short , requires Graduate or post-graduate training in cosmetic injectable substances. We say:</i></li> </ol>	<p>The Panel found this Standard was met.</p>

- *The clinician must have the appropriate clinical qualifications to make a safe assessment as to the suitability of treatment based on the medical history of the patient prior to the commencement of any treatment. Clinicians should be able to demonstrate to patients that they are trained and competent to perform the procedures. The clinician must have the appropriate training to meet Health Education England requirements for the treatment intended, or appropriate national equivalent qualifications to meet the standards.'*

TYCT states that it provides the following further information to its registrants:

### ***'B. Making clear our education and training standards to registrants.'***

*The TYCT Standards remain extant as the only approved UK National set of standards for injectable cosmetic interventions. They are displayed on the TYCT Website. Every applicant is required to certify they have studied them before admission to the Register. Existing Registrants are similarly required to certify they have read them at annual renewal of registration. These TYCT Standards are, as previously explained in our original application for accreditation (indirect regulation), linked to the standards of all relevant responsible authorities and, as such, change when they change them (e.g., issue of GMC Guidance).*

*Our Training Standards for non-surgical cosmetic practice were absorbed and expanded by Health Education England at Government request; the resulting Qualification Requirements have been passed to JCCP, and in turn, it is intended, to CPSA. We have adopted them and promulgated them to all registrants with our Newsletters. (We confirm they have been received when we do the annual renewal checks.) We also promulgate such important documents as the April 2016 GMC Guidance to doctors who practice cosmetic interventions.*

### ***C. Matters affecting education and training standards in the sector***

*As the Royal College of Surgeons advances its programme of reforming surgical standards, so non-surgical standards will be affected and we will need to ensure our registrants are helped to make any changes in practice. If the Nuffield Report of this month recommendation is met, then the General Dental Council and the Nursing and Midwifery Council will also make changes to their expectations of their members and we will similarly draw attention to them. Once the CPSA stands up later this year, we can expect to see a fully detailed*

<p><i>set of Education and Training Standards which will be applied by us in anticipation of passing the TYCT Register to JCCP as the foundation of the new register. We do not intend to further amend the TYCT Standards.'</i></p> <p>The team noted that information about the education and training standards can be found on the following page <a href="http://treatmentsyoucantrust.org.uk/for-health-professionals/standards">http://treatmentsyoucantrust.org.uk/for-health-professionals/standards</a>. TYCT also reports any changes in its newsletter which can be accessed by members of the public as well as practitioners.</p>	
<p><b>Standard 10: the register</b></p>	
<p>There have been no significant changes reported or noted since last year.</p> <p>The team reviewed a sample of the register and noted a number of inaccuracies and inconsistencies.</p> <p>At the site visit, the Registrar presented the application process for both new applications and renewals. The team noted that for renewal applications, there is no set timeframe for applicants to provide their documentation to the Registrar. TYCT reported that it does this on an individual basis taking into account the personal circumstances of the practitioner and public protection. The team noted that this could lead to inaccurate information being presented on the website.</p> <p>TYCT checks that practitioners are carrying out continuing professional development related to non-surgical cosmetic injectables at the annual review. TYCT does not currently set a minimum number of hours for continuing professional development as the number of hours required is based on the number of practise hours and this differs between individuals.</p>	<p>The Panel noted the number of errors identified in the register this year. The Panel noted that TYCT's accreditation was suspended last year for errors and inaccuracies in the register. The Panel considered the implementation of the actions in response to the Condition were inadequate. The Panel found that this Standard was not met.</p>
<p><b>Standard 11: complaints and concerns</b></p>	
<p>TYCT reported that it had received one complaint against the organisation and no complaints against registrants.</p> <p>TYCT's handling of complaints is discussed under the Instructions above.</p>	<p>The Panel found that this Standard was not met. In making this decision, the Panel considered the lack of</p>

	actions taken by TYCT in response to the Instructions. The Panel also considered TYCT's actions when considering the publication of the warning as noted under Standard 7.
<b>Share your experience and concerns about the Accredited Register received in the previous year of accreditation</b>	
<p>The Accreditation team did not receive any responses to the invitation to share experience. The team received three concerns within the accreditation year. Two of the concerns related to the announcements made by TYCT in its newsletter, one about the extension to include dental hygienists to the TYCT register as discussed above and the other about the announcement of its application to the Authority for the addition of laser therapists to its register before it had applied via the notification of change. The other concern was from a registrant who no longer wished to be on TYCT's register. The complaint related to the tone of communications from TYCT and its insistence that all removed registrants should remain on the register.</p>	
<b>Equality duty under the Equality Act 2010</b>	
<p>The Panel must consider the Authority's equality duty under the Equality Act 2010 when considering an application for renewal of accreditation.</p>	<p>The Panel had regard to its duty under the Equality Act 2010 when considering this application for renewal of accreditation.</p>

Impact Assessment	
<p>There have been no significant changes reported since last year. The Panel must consider the impact of its decision.</p>	<p>The Panel noted and took account of the impact on the public, TYCT and its registrants of its decision to remove accreditation.</p> <p>It noted that the purpose of the Accredited Registers programme is to protect the public through registers meeting the Standards for Accredited Registers.</p> <p>The Panel considered that there may be negative financial and reputational impacts on TYCT as an organisation, but that this decision does not prevent individuals from registering with TYCT or prevent TYCT from continuing its work.</p> <p>The Panel's decision will not prevent any individual practitioner from working and does not remove access to the Accredited Registers programme for these practitioners or for the</p>

public. The Panel noted that there could be financial impact on registrants who had paid a fee to register with TYCT as an accredited register.