

## Accredited Registers Impact Assessment

Accredited Register: The International Federation of Aromatherapists (IFA)

Type of Review: Full Renewal Assessment

Period under review: 2021-2024

Date Approved for Panel: 29 May 2024

### Introduction

Before we make a decision about accreditation, we undertake an impact assessment to understand likely effects on different groups, and the wider health system. We begin to gather the information required for the impact assessment when a Register first applies for accreditation. We consider any changes to impacts when we renew accreditation, and when taking other decisions that affect accreditation status such as imposing Conditions or suspension.

A key part of the impact assessment is consideration of equalities. The Equality Act 2010 imposes a legal duty, the Public Sector Equality Duty on all public bodies to consider the equality impact of its policies and decision making. The duty is known as the Equality Duty and it requires a public authority, in the discharge of its function to consider the following three aspects which form the basis of the duty:

- Consider the impact and eliminate unlawful (direct or indirect) discrimination and any other conduct prohibited under the Equality Act 2010.
- Advance equality of opportunity between people with protected characteristics and those who do not share these characteristics
- Foster good relations between people with protected characteristics and those who do not share these characteristics.

This means that public bodies must consider equality impact on individuals protected under the Equality Act 2010 in carrying out their work. The Authority, therefore, needs to be always mindful of the public duty when carrying out its oversight role which includes the approving of registers. It needs to have 'due regard' to the needs to balance the three aspects which make up the Equality Duty when achieving its goals.

The Equality Impact Assessment is an important tool/mechanism for demonstrating 'due regard' through the consideration of evidence and analysis, actual and potential to identify positive and/or adverse impacts. The key groups we need to consider when making our decisions are, sex, age, ethnicity, disability, religion and belief, sexual orientation, gender reassignment, marriage and civil partnership, pregnancy, and maternity.

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### Impacts

#### Equalities impacts – summary

- The IFA collects some data regarding protected characteristics to help establish an evidence base for activities (for example webinars/ CPD courses, policies and practices and Codes).
- This is done to assess whether policies and practices are equitable and fair and do not disproportionately affect different groups during their review processes.
- This also allows the IFA to identify any gaps in performance, seek new approaches for improvement and adopt good practices.
- The IFA advised us that their registrants and services users are more likely to be female than male. This means that any changes affecting accreditation status are more likely to impact women, then men. This needs to be considered in terms of access to treatment, and on individual earnings.

#### Impacts on groups with protected characteristics

##### Age

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Positive	People aged 60 and over	<p>The IFA notes they collect the date-of-birth (DOB) of each member when they join the register. The IFA advised us this information is held on their database and anonymised in surveys (when collected).</p> <p>The IFA also advised us that a survey of members shows that majority of service users are over 60-years old. The IFA advised us that research</p>		May 2024

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		shows that individuals can be supported to age healthily which reduces the likelihood of multiple chronic illnesses, leading to an improved quality of life ( <a href="#">Ageing and the epidemiology of multimorbidity - PMC (nih.gov)</a> ). Further, aromatherapy has been shown to be beneficial for palliative care patients ( <a href="#">An evaluation of aromatherapy massage in palliative care - PubMed (nih.gov)</a> ).		
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### Disability

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Neutral		The IFA's survey of members and aroma-care course subscribers showed that the majority of recipients are children and elderly people suffering from a disability. We note the IFA has a <a href="#">Safeguarding Guideline</a> which sets out registrant's requirements for working with vulnerable groups.		May 2024

### Gender reassignment

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified

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Neutral				
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### *Marriage and civil partnership*

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Neutral				

### *Pregnancy and maternity*

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Positive	Pregnant women	<p>The IFA notes their registrants receive referrals for pregnancy and midwifery care.</p> <p>Aromatherapy is used in a variety of ways in maternity care. The IFA advised us that different modalities of aromatherapy can be used to reduce nausea and vomiting during pregnancy, and during labour to reduce anxiety and aid relaxation.</p> <p>Using an Accredited Register practitioner for accessing this treatment can ensure high standards.</p>		May 2024

### *Race*

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified

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Neutral		IFA collects data of their registrants and registrant's patients. Their survey of members showed that patients and survey users come from a multitude of backgrounds.		May 2024
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### Religion or belief

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Neutral				

### Sex

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Neutral		The IFA's survey results showed that majority of patients and services users are female. Users of complementary therapies are also more likely to be women ( <a href="#">2018: CAM Survey in England   Centre for Academic Primary Care   University of Bristol</a> )		May 2024

### Sexual orientation

Type of impact (positive/neutral/negative)	Group(s) affected	Description	Actions required	Date identified
Neutral				

### Cost and market impacts – summary

- More women than men and more people in higher socioeconomic groups than in lower socioeconomic groups used Complementary and Alternative Medicine (CAM). CAM use was almost twice as high in the south of England compared with the North and Midlands. Most CAM users either paid for treatment themselves or had it paid for by friends or family (67%). Most CAM users self-referred (either

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found the practitioners themselves or through a recommendation from a friend or family) (70%). A small proportion were referred by their GP (17%) or other health professional (4%) and more of these were from lower socioeconomic groups.

- The IFA advises they do not consider that the costs of accreditation will result in the need to pass costs directly to registrants and from them, to service users. Registrants typically have good client retention, and so the costs of accreditation are unlikely to impact their fees.
- We noted given most registrants are self-employed and therefore offer private treatment, treatment may not be accessible to all.
- Accreditation is considered to have a positive impact given that it will raise confidence and awareness in the profession, and therefore, increase referrals from GPs, alleviating pressures on the NHS.

### Social and environmental impacts – summary

- The IFA highlighted that wealthier people are more likely to engage with CAM and aromatherapy. As above, with greater recognition of the role of Accredited Registers, access to complementary therapies through subsidies routes such as the NHS could be achieved.

### Decision

The Accreditation Panel considered the Condition issued in Standard Two and further, acknowledge that Complementary and Alternative Medicine is more likely to be used by women than men, and also, by people in higher socioeconomic groups than those in lower socioeconomic groups. Registrants and service users are also more likely to be female than male. This needs to be considered in terms of access to treatment, and on individual earnings.

The Accreditation Panel decided overall, it is in the public interest to re-accredit the IFA.