

Call for views on The Civic Government (Scotland) Act 1982 (Licensing of Non-surgical Procedures) Order 2026

Response from Healthcare Improvement Scotland (HIS)

9 January 2026

We support the proposal that non-surgical procedures listed in the Order should be carried out in a licensed premises and by appropriately trained and competent practitioners. The Order will complement the provisions of the Non-surgical Procedures and Functions of Medical Reviewers (Scotland) Bill (the Bill). Together they will enable people wishing to access non-surgical cosmetic procedures (NSCPs) to gain further assurance that there is governance in place to ensure the quality and safety of services that provide these treatments. In addition, we are pleased to see that again the combination of the Order and the Bill will mean that NSCPs are prohibited from hospitality venues, exhibition venues and any other commercial locations out with a licensed or permitted premises.

We fully support the proposed age limit on the provision of NSCPs. NSCPs should not be available to individuals under the age of 18 as this may adversely impact the natural development of their body at a critical time of life. We would like to ensure that the age limit articulated in the Bill is also applied to premises that will be licensed under this Order. It is important that local authorities also have the power to act in respect of the offence of performing a procedure on an individual under 18.

We recommend that a campaign of public health messaging is taken forward regarding the new legislation. This has not previously been done in relation to the regulation of NSCPs. This would be helpful for both consumers and the providers of services.

We do not have any comment on the list of procedures in schedule 1, however we note that term “non-ablative laser procedure” may be too vague and should be further specified as to what type of laser and laser procedures can be carried out or used by practitioners in licensed premises.

We know that the landscape of NSCPs is fast-paced and continually evolving. Therefore, a mechanism to amend or update the defined procedures in schedule 1 should be considered to avoid the need for future legislative changes and to ensure that inspection, offence and enforcement provisions remain relevant.

The inherent risk associated with a procedure will not change because of the proposals, but the risk can be controlled and mitigated to greater effect if the Order is implemented.

We support the proposal that the procedures in schedule 1 should be carried out by trained practitioners in licensed premises, as this will further mitigate risks. Requirements regarding qualifications, training and experience of staff to undertake these procedures in licensed premises are fundamental to improving the health, safety and welfare of patients accessing non-surgical cosmetic treatments in Scotland. Defined qualifications, training and supervision requirements for both healthcare professionals (HCPs) and non-HCPs would be a useful addition within the secondary legislation. Without minimum defined education standards in place, local authorities and Environmental Health Officers cannot promote consistency in their role as a regulator.

Individuals who are not HCPs and who offer schedule 1 procedures will be able to obtain local authority licensing under the proposed Order. However, an HCP will not be allowed to choose this route as current legislation and proposals in the Bill do not permit it. Allowing a route for HCPs offering Group 1 procedures to be regulated via a local authority licence would ensure a parity of regulation. Those HCPs would still be personally responsible for operating to their professional registrations, including being aware of the need to register with HIS if the portfolio of treatments changed. This would require an amendment of the current definitions of independent healthcare services. This may be too complex to address as part of these proposals, and it should be noted that it may be that case that this two-tier system could remain in place for some time.

At present it is not clear, nor is it possible to reasonably estimate, how many services that are currently 'non-healthcare professional operated aesthetic services' will be able to employ an appropriate HCP to enable conversion to an independent clinic because of the proposed provisions in the Order. We remain cognisant that the proposals will create demand for HIS that may require additional resource, over and above any additional fee revenue, and should be considered accordingly for timelines with any implementation plans.

It is anticipated that the associated impact assessments for any legislative changes will be undertaken by the Scottish Government. These assessments would form the evidentiary basis upon which HIS can develop the necessary implementation plans for these future regulatory proposals.