

EHTPA Council Report

September 2017

Introduction

This is the ninth Council Report for Professional Associations, Teaching Institutions and other organisations on the work of the EHTPA Council.

The Council met on 4 September. The following summarises the main items discussed at the meeting.

Accreditation

The Council agreed to begin the review of the current accreditation procedures with the aim of making the whole process more flexible. It is hoped that a revised model will be put in place during the latter half of 2018.

Education Group

It is intended to hold a meeting of representatives of teaching institutions, the Professional Associations and the EHTPA in December. Details will be circulated in due course.

Campaign for Statutory Regulation

Following the general election, the Council decided to renew its engagement with Government to promote the value of Statutory Regulation for herbal medicine. As well as contacting key decision-makers, the Council will be circulating the letter on page 3 to all HM professionals, patients and other interested parties.

Pyrrrolizidine alkaloids

Following the recent publication of the European Food Safety Authority's publication on pyrrolizidine alkaloid (PA) exposure and intake in foodstuffs, we are awaiting the Food Standards Agency's response. This will set the UK's food policy, and this policy may possibly have an effect on the Medicines & Healthcare products Regulatory Agency's current guidelines. THE EHTPA still advises that practitioners continue **not** to use PA-generating herbs internally, and to only use them externally for 2-6 weeks.

EUROCAM

EUROCAM (<http://www.cam-europe.eu>) last met in 20 June. Its current activities include:

- Working on a three-year plan of collaboration with WHO that should be agreed jointly by EUROCAM and WHO. The plan may include organizing policy briefings with WHO on AMR, palliative care and supportive cancer care in the European Parliament and contributing to WHO's Knowledge Platform and its database for clinical evidence.
- Planning, in collaboration with some members of the European Parliament, a CAM Interest Group meeting in the European Parliament about the role of CAM in the management of musculoskeletal disorders. It is expected to take place in Spring 2018.
- Communicating with the Joint Research Centre of the European Commission about organizing an event on best practices of CAM for Commission officials. Support of some members of the European Parliament is needed for this.

The Working Group on Health of the European Parliamentary Committee on the Environment, Public Health and Food Safety is organizing a meeting in the European

Parliament on 16 October under the title: “Complementary and alternative therapies for patients today and tomorrow”. EUROCAM has been invited to propose some speakers; speakers with a critical view on CAM will also be invited.

Menopause research

Work on this project is continuing.

Approved Suppliers Scheme

There are now fourteen members of the Herbal Practitioner Suppliers’ Section of the British Herbal Medicine Association (www.bhma.info/?s=Hpss). These suppliers are working to implement a quality management system across the herbal practitioner suppliers’ industry.

Herbmark

Herbmark (<http://www.herbalist.org.uk/how-to-find-a-herbalist.html>) has been adopted by a large number of EHTPA PA practitioners and is being widely used on their websites, promotional literature and labelling.

Harvey Woolf
5 September 2017

Dear Herbal Supporter,

The Government has reneged on its promise to recognise herbal practice in the UK. Please write to your MP to demand statutory regulation of herbal practitioners giving herbal practitioners a tried and tested legal basis for herbal practice to support patients in the 21st century.

Summary of the situation

- The Government has reneged on a firm promise made in 2011 to bring in legal recognition of herbal medicine practitioners in the UK via statutory regulation.
- Instead, the Government is considering introducing a voluntary registering system for practitioners that will fail to provide genuine public safeguards as exist for all statutory regulated health professionals like doctors, nurses and physiotherapists. Crucially, registration rather than statutory regulation means that anyone can set themselves up in practice without adequate training or practice standards. This is not in the interest of vast numbers of patients who consult herbalists in the UK!

Voluntary regulation – no security for patients or practitioners

- Voluntary regulation means that herbal practitioners will continue to be legally indistinguishable from ordinary members of the public. Failing practitioners cannot be prevented from practising, as would happen with statutory regulation, and there will be no long-term security of access to potent herbal remedies granted for herbal use under legislation passed in the early 1970s. In the long-term, lack of legal professional identity will undoubtedly undermine the herbalist's right to prescribe herbal medicines. *It is clear that access to a full range of herbal medicines can only be preserved if herbal/traditional medicine practitioners are statutorily regulated.*

Voluntary regulation/licensing – no UK professional standards & no referrals

- Imposing a licensing scheme will mean that statutorily regulated health professionals (e.g. doctors) will not be allowed to make referrals to herbal medicine practitioners. It will also fail to deliver the essential benefits of professional statutory regulation such as independent accreditation of training programmes, mandatory continuous profession development and the development of best practice towards which for the last decade the profession has been working in anticipation of statutory regulation.
- Statutory regulation of this sector was recommended by the House of Lords' Select Committee on Science and Technology and two subsequent Department of Health Working Groups. A report from a more recent Working Group was rejected by the majority of its members who never saw the report before it was published. Ministers must be called to account for their U-turn and asked how they can justify the reduced public choice and increased public risk if statutory regulation does not go ahead.
- **With ever increasing numbers seeking treatment from the herbal/traditional medicine and acupuncture sector, failure of Government to honour its long-term commitment to statutory regulation of these professionals is a betrayal of the public interest**
- Please do write as soon as you can to your MP to ask him/her to take up your concern with the responsible Minister - Steve Brine MP, Parliamentary Under-Secretary of State for Health.