

**Cabinet Secretary for Health and Wellbeing
Minister for Public Health and Women’s Health
Minister for Parliamentary Business**

UK Internal Market Act and NSCP bill

Priority and Purpose

1. **Urgent:** Further to my submission of 10 April this note:
 - Provides further information (para 6 onwards) requested on the impact of the UK Internal Market Act 2020 (“UKIMA”) [OUT OF SCOPE];
 - Provides a progress note (para 10 onwards) on steps taken to ask the UK Government to suspend the relevant part of UKIMA allowing us to make progress;
 - Provides contingency options (para 14 onwards) [OUT OF SCOPE]
2. [REDACTED– Section 30(c)]

Recommendation

3. Recommends that you note the further information and progress note on engagement with UKG. [OUT OF SCOPE]

Issue

4. [REDACTED – Section 30(c)]. In pursuing the request from the Cabinet Secretary for Health and Wellbeing to seek changes at UK level we have also now met colleagues in Department for Health and Social Care (“DHSC”) to set out the issues, [REDACTED – Section 28(1)], highlight our current understanding and secure initial agreement to work further with wider UKG colleagues.
5. [OUT OF SCOPE]

Further information

6. [OUT OF SCOPE]
7. [OUT OF SCOPE]
8. [OUT OF SCOPE]
9. [REDACTED - Section 28(1) and Section 30(c)]

Progress note

10. Following the 10 April submission the Cabinet Secretary for Health and Wellbeing asked us to engage with UKG to make a request that the relevant provisions of UKIMA be lifted to allow us to proceed with legislation. Unlike parts 1 and 2 of UKIMA, there is no provision in part 3 to adjust the coverage of the provisions that relate to the mutual recognition of professional qualifications. [REDACTED – Section 30(c)]. The relevant department, responsible for the Act and the ongoing review is the Department for Business and Trade (“DBT”).
11. On 15 April we met DHSC colleagues. [REDACTED – Section 28(1)]. They committed to considering in more detail and engaging with us with Cabinet Office and DBT. We sought a meeting this week (Week commencing 21 April), but DBT requested more time to consider the issue. [REDACTED – Section 28(1)].
12. We will also engage with colleagues in Welsh and NI administrations insofar as this issue may affect them. [REDACTED – Section 28(1)]. [REDACTED – Section 30(c)].
13. [REDACTED – Section 30(c)].

[OUT OF SCOPE]

14. [OUT OF SCOPE]

15. [OUT OF SCOPE]

16. [OUT OF SCOPE]

[OUT OF SCOPE]

17. [OUT OF SCOPE]

18. [OUT OF SCOPE]

19. [OUT OF SCOPE]

20. [OUT OF SCOPE]

21. [OUT OF SCOPE]

22. [OUT OF SCOPE]

23. [OUT OF SCOPE]

24. [OUT OF SCOPE]

25. [OUT OF SCOPE]

26. [OUT OF SCOPE]

27. [OUT OF SCOPE]

[OUT OF SCOPE]

28. [OUT OF SCOPE]

29. [OUT OF SCOPE]

30. [OUT OF SCOPE]

Quality Assurance

31. This submission has been cleared by Lynne Nicol. It has also been considered by colleagues in [REDACT – Section 30(c)] for their respective interests.

Conclusion

32. We will continue to provide updates on this issue as it emerges, [REDACT – Section 30(c)] to continue preparing to introduce a Non-Surgical Procedures Bill. We stand by to answer any additional questions or to respond to any decision made in relation to PfG.

[REDACTED – Section 38(1)(b)]
Healthcare Quality and Improvement

Cabinet Secretaries and Ministers Copy List	For Action	For Information Portfolio interest	For Information Constituency interest	For Information General awareness
Minister for Public Health and Women's Health	X			
Minister for Parliamentary Business	X			
Cabinet Secretary for Health and Wellbeing		X		
Deputy First Minister		X		
Cabinet Secretary for Finance and Local Government		X		
Lord Advocate		X		
Solicitor General		X		

Officials Copy List
Jennie Gollan Jeanette Campbell Legal Secretariat to the Lord Advocate Solicitor to the Scottish Government DG Health and Social Care CMO John Burns

**Cabinet Secretary for Health and Wellbeing
Minister for Public Health and Women’s Health
Minister for Parliamentary Business and Veterans**

UK Internal Market Act 2020 and Non-Surgical Procedures Bill

Priority and Purpose

1. **Routine:** Further to the Minister for Public Health and Women’s Health’s questions on 2 October and the follow up request for more information from the Cabinet Secretary for Health and Wellbeing, further information is provided which provides:
 - a. An update on discussions with UK Department for Business and Trade on UKIMA (para 12 onwards);
 - b. Information on the UK Department for Health and Social Care plans (para 17 onwards);
 - c. [OUT OF SCOPE]
 - d. [OUT OF SCOPE]
2. Background is also provided summarising Scottish Government’s current understanding of UKIMA and providing an update on introduction of the Non-Surgical Procedures Bill. Previous advice has been provided on UKIMA in two submissions of 10 and 24 April this year, as well as alongside other advice provided on the Bill. Information has also been included in products for publication, including the response to the consultation.

Recommendation

3. [OUT OF SCOPE]

Background

Policy intention

4. Our aim is to ensure that individuals undergoing non-surgical procedures (ie for cosmetic and/or wellbeing purposes) receive high-quality care from suitably qualified practitioners, in settings that are appropriately regulated. We set out our approach to achieving this in the response to our consultation published in June 2025. In these proposals we described three groups of procedures. Group 1 procedures would be those procedures that do not require the support or intervention of a healthcare professional. As such we proposed the introduction of a licensing model under the Civic Government (Scotland) Act 1982, under which procedures would be required to be undertaken in a licensed premises, by licensed practitioners. Group 2 and 3 procedures would be those where we considered a healthcare professional is required, and these would therefore be restricted, in the main, to Healthcare Improvement Scotland registered settings. Group 3 procedures would also be restricted to be undertaken by an

appropriate healthcare professional, whereas Group 2 procedures could be undertaken by either a healthcare professional or a suitably trained practitioner.

Understanding of UKIMA and how it has impacted the drafting of the Bill

5. [OUT OF SCOPE]
6. [OUT OF SCOPE]
7. [OUT OF SCOPE]
8. [OUT OF SCOPE]

Current legislative action / plans

9. The Non-surgical Procedures and Functions of Medical Reviewers (Scotland) Bill was introduced on 8 October. We plan to lay an order under the Civic Government (Scotland) Act 1982 to establish a licensing scheme for Group 1 procedures during the current Parliamentary session. This will require procedures to be undertaken from a licensed premises but will not include provision requiring practitioners to hold a licence. That can be put in place with a later order.

Options

10. [OUT OF SCOPE]
11. [OUT OF SCOPE]

Discussions with the UK Department for Business and Trade (DBT) on UKIMA

12. Officials have undertaken a number of discussions with counterparts in the Department for Business and Trade (DBT). These discussions had a number of objectives:
 - To seek further information to inform our ongoing consideration of the impact of UKIMA;
 - To seek to come to a shared understanding of that impact between SG, DBT and DHSC;
 - [REDACTED – Section 28(1)]
13. The conversations have been helpful in achieving our first aim. [REDACTED – Section 28(1) and 30(c)].
14. [REDACTED – Section 28(1) and 30(c)]
15. [REDACTED – 28(1) and Section 30(c)]
16. [REDACTED – Section 30(c)].

UK Department of Health and Social Care plans

- 17. As previously advised, colleagues in DHSC are not as far advanced in their own plans as our own. DHSC published their response to the consultation undertaken under the previous administration in 2023, this summer (2025). Their current approach builds on the consultation responses but also incorporates new priorities of incoming ministers, which are largely to address the highest risk procedures such as the brazilian butt lift that led to the death of Alice Webb last year. In practice this means that they wish to prioritise restricting their “red list” (which is similar, but not identical to, our Group 3) to appropriate healthcare professionals.
- 18. DHSC’s broad proposals remain similar to SGs, including division of procedures into three categories. Many correspondents have highlighted that the outline proposals for their “amber list” which includes botox and dermal fillers, will allow these procedures to be undertaken in a licensed setting – unlike our own proposals. This at first appears to be quite a different approach to our own, but we note that how the principle of supervision enforced or required (which has not yet been set out), following consultation may end up with proposals which are no less onerous for businesses.
- 19. DHSC will now undertake further consultation and policy development. Officials may discuss their emerging policy in detail as they have asked for more information about the decisions we made in refining our proposals. It is in our interests to collaborate with DHSC to ensure that we are working from a shared evidence base, and decreases the likelihood of substantial divergence between our approaches.
- 20. Like us, DHSC are considering the impact of UKIMA on their plans. [REDACTED – Section 28(1)].

Legislative Consent

- 21. [OUT OF SCOPE]
- 22. [OUT OF SCOPE]
- 23. [OUT OF SCOPE]
- 24. [OUT OF SCOPE]

Non-Legislative mechanisms

- 25. [OUT OF SCOPE]
- 26. [OUT OF SCOPE]
- 27. [OUT OF SCOPE]

Quality Assurance

[REDACTED – Section 38(1)(b)]
[REDACTED – Section 38(1)(b)]
[REDACTED – Section 38(1)(b)]
PLU Bill Programme
PLU SSI Programme
[REDACTED – Section 38(1)(b)]
[REDACTED – Section 38(1)(b)]
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[REDACTED – Section 38(1)(b)]
[REDACTED – Section 38(1)(b)]
Erin Mckee
SGLD Legislation Co-ordinators: Janet
Bartlett, Graham Fisher and [REDACTED
– Section 38(1)(b)]