

**Bowen Forum Regulation Seminar**  
**30 September 2006**

**Lydalls Hall Didcot**

**Present:**

Jean Nestor, Jenny Gordon, Angela Power, Lynden Lane, Janet Barry, Peter Briant, Angela Morris, Helen Perkins, John Francis, Anneke Loode, Ellen Cobb, Clifford Jones, Fiona Williams, Anne Mundker, Robert Ford.

**Apologies:**

Joan Probert, Effie Rahs, Jeanne Dymond, Diane Pannell, Lindsey Sandy, Mena Canning, Nogah Wilson, Sylvia Biggs, Pat Jeanes, Jenni Townsend, Margaret Cotton, Heather Lamacraft, Alison Lavington, Lynne Bardell, Julie Driscoll, Penny Gibbings, Shelagh Boughton, Brian Murphy, Tim Willcocks, Sue Hathaway, Annie Hazeldine, Juliet Dresser, Neelam Thapen, Rob Ferguson, Branka Mason, Christine McKay, Jan Lloyd, Marian Priestley, Liz Bridger, Ann Dahms, Kathie Maberley, Michael Nixon-Livy, Jill Norfolk, Caroline Kremer, Fran McCann, Mandy Hermitage, Rosemary Cunningham, Janet Graham, Robert Manning, Beth Darrall, Glynda Green, Linda Meredith, Sue Gassick, John Lynch, Sylvia Wilkinson, Penny Mallet, Randy Barber, Paula Esson, Laura Bowers, Kevin Jefferson, Aurele Broom, Sunayana Clark, Stuart Houston, Michael Morris, Alwyn Wood, Norman Ogden, Di Evans, Krystyna Monks, Diane Lowy, Barbara Tomlinson, Valerie Tyler, Diane Wyatt, Jane Phillips, Pauline Baker, Lin Gregory, Victoria Rossiter, Pat Bryden, Sheila Karapetian, Carol Clark, Jane Ross, Maggie Miles, Jan Conran, Rosemary MacAllister, Sally Tyler, Beverley Speir, Catherine Ford, Cheryl Liss, Julie Chellingsworth, Susannah Hall, Nikke Ariff, John Wilks, Trevor Griffiths, Teresa Elwell, Beth Darrell, Alastair Rattray, Tony Crimes, Nicola Morgan..

**Welcome**

**By Jenny Gordon, Independent Chair**

The purpose of today is to present and discuss the proposal to set up a Federal Body to operate a voluntary system of self regulation (VSR) to oversee various CAM therapies in the UK. Specifically, we will be discussing the results of the Consultation organised by the Prince's Foundation for Integrated Health (PFIH) in the summer, and introducing the results of a Feasibility Report commissioned by PFIH and published in September 2006.

**Committee of the Bowen Forum:**

Jenny Gordon (Lay), Independent Chair; Angela Power (BPA), Secretary; Peter Briant (BAUK), Treasurer.

Also sitting on Committee are:

Lynden Lane (lay member), who will be the main point of contact for the Education sub group; Janet Barry (BTER); Nikke Ariff (BTER); Helen Perkins (BAUK) & Nicola Morgan (BAUK) (job sharing).

### History:

The Forum came together with the purpose of establishing regulation for Bowen Therapy in the UK. Last year's inaugural meeting discussed different options for VSR:

1. A single regulatory body
2. A Federal body

A Federal body is the preferred option of PFIH, and the Forum has been working with them this year to ascertain the views of Bowen therapists.

A working team of practitioners has completed the National Occupational Standards (NOS) document which is available on the Forum web site. This document is awaiting approval from Skills for Health, after this has happened it will be a part of the regulation of Bowen practitioners.

PFIH commissioned a consultation between May & July this summer and the Forum invited all practitioners and other parties with an interest in Bowen to respond to this document. The document outlined a possible structure for a Federal Body for VSR of a group of complementary therapies.

Today Jean Nestor from PFIH will present the results of this consultation and recommend our next steps. After this presentation we will discuss the inclusion of Bowen within a Federal Body.

### **Results of the Consultation and the Feasibility Report**

#### **Jean Nestor; PFIH**

Jean has worked with the Bowen Forum for the last 18 months. She is a project manager for PFIH.

Copies of both the Consult period and Feasibility Report are available in the room, and also on PFIH web site.

In spring 2005 PFIH realised that some of the groups of complementary therapists that were pursuing regulation (including the Bowen Forum), were unlikely to be financially sustainable.

Professor Julie Stone of the University of Lincoln was commissioned to produce a study into feasibility options for these groups. She looked into 3 options:

1. Maintain the status quo: that is the groups could continue establishing a single voluntary regulatory body for each therapy.
2. Statutory Regulation: this would offer protection of title of the therapist but is expensive.
3. A Federal Body for voluntary self regulation: this would involve the groups joining together to form a council that would oversee regulation of several therapies.

The Stone report concluded that the Federal Body was the preferred option. This report is available on the PFIH web site, and by a link from [www.bowenforum.org.uk](http://www.bowenforum.org.uk).

As this report did not propose a model for a Federal Body, PFIH held a workshop in January 2006 to address this. Several members of the Bowen Forum committee attended this workshop and all therapies had issues and questions that were raised. After the feed-back from this workshop, these issues were fed into the consultation document that was published at the beginning of May 2006. The consultation period ran until 28 July, and the purpose of this consultation was to obtain feed-back from practitioners and other interested parties to these issues.

This document was circulated to practitioners, the Department of Health, Higher Education establishments, Consumer Associations, Professional Associations, and it was also available to everyone on the PFIH web site.

The results of the consultation were analysed independently by Abi Masterson Consulting Ltd. The report is now available on PFIH website.

At the same time as the consultation, a Feasibility Report was commissioned from a steering group. This group included representation from PFIH, the Department of Health, and other interested parties. No therapy forums were included in the steering group.

Both these reports have contributed to PFIH's recommendations for pursuing a Federal Body.

#### Results of the Consultation

438 responses were received.

68% **agreed** with the principle of a voluntary federal regulatory body for complementary healthcare professions.

71% **agreed** with the criteria for the professions to be regulated by a federal council

68% **agreed** with the fundamental functions and duties of the council

The biggest concern raised was the future role for professional associations.

#### Results of the Feasibility Study

The Steering group looked at and compared other regulatory systems and took into account the recommendations of the Foster Review, and of the Donaldson Report that the government commissioned, and which were published in July 2006.

As a result of this, five options were identified. The first three of these were not possible due to confusion between the roles of a regulatory body and professional associations.

The two remaining options (referred to as 'Approaches 4 & 5') are:

1. The Federal Body, broadly as described in the PFIH Consultation Document;
2. The Ontario Model

Ontario Model:

(Further details of this can be found in the Feasibility Study.)

This model is organised with a small overseeing Council. Each therapy is represented by a profession centred group that sits directly beneath the Council.

The leaner organisation of this model allows a greater opportunity for each therapy group to concentrate on issues relating to their own profession.

In conclusion:

The responses received indicate a clear mandate for a federal approach to regulation.

There are two approaches worth considering to establishing federal regulation.

PFIH intend now to invite complementary therapy groups to participate in the next stages towards establishing a federal body.

### Next Steps

PFIH recommend that a working group is established with a representative from each modality that plan to be included within a Federal Body. This working group will meet monthly between January and September 2007, with the aim of producing a report on a viable Federal body in October 2007.

There are criteria that each group needs to demonstrate to be included on this working party, as follows:

- Profession specific NOS
- Code of conduct & ethics
- Complaints processes
- Lay representation
- Standards for current regulation
- Sustainable income

The Bowen Forum is eligible for participation on the working party. They don't yet demonstrate all the above criteria, but are able to demonstrate that they are capable of establishing these in the near future.

Remit of working group:

1. Explore in detail the preferred approach for a federal structure, concentrating on Approaches 4 & 5 from the Feasibility Study. Taking into account:

- Results of the consultation
- Contents of the Feasibility Report
- The Foster & Donaldson Reports
- The on-going work of the Joint Working Group for Herbal Medicine and Acupuncture, and any associated government proposals

2. Make the following proposals that are to be acceptable to all participating therapies:

- Model for a federal structure
- Identify a comprehensive communication strategy, for public and professions
- Implementation timetable
- Transitional arrangements

3. Seek the Government's views on its proposals.
4. Prepare a report on its findings, to be published in October 2007.
5. Consider whether further consultation is required and in what form.

PFIH's commitment:

As the working group is to be up and running by January 2007, if the Bowen Forum wishes to participate they will need to apply by the deadline, 15 December 2006. Once accepted, a candidate (plus an alternate) needs to be selected to sit on and represent the Bowen profession at **every** working party meeting.

FIH will support the working party by preparing a budget and terms of reference and scope. A Lay Chair and Lay representation will be sought with secretariat and project management support provided as and where necessary.

Funding for this working group needs to be identified, with solutions.

FIH will liaise with the Department of Health to keep it updated on prioritisation.

In all of these next stages lines of communication are vital.

Bowen professionals now need to decide if they want to be part of this and work towards a Federal Body.

Issues & Questions Raised

**Robert Ford: The time scale is tight, and the working party needs to be unanimous – how will this be dealt with?**

A tight timescale should prevent a never ending situation; the report might conclude that further consultation needs to be taken. During the working party session, consultation might be needed to clarify some issues, with decisions being deferred.

**Clifford Jones: Can the Feasibility Study be respected – as it is not determining real issues, only hypothetical ones?**

The Feasibility Study is not set in stone; it will be up to the working party to decide what are the real issues and options, presenting these in their report. Maybe aspects of both options will be utilised, maybe a third option will become evident.

**Ellen Cobb: There is great difficulty in keeping informed as it is very confusing.**

The purpose of the Forum is to disseminate the information and pass onto to practitioners and other professionals. The Forum is striving to improve communication links. There is the need to avoid rumours which give rise to false issues and fears. The Forum intends to provide correct information for all interested parties.

**Clifford Jones: Is the Working Group building on sand – could nothing work at the end of the period?**

There is a need for a starting point, even a hypothetical one. The group need to begin somewhere. Maintaining flexibility is important.

**Robert Ford: On the PFIH web site, Chiropractors and Osteopaths are classified as CAM – are these going to be a part of the Federal Body?**

These other therapies have their own established regulation; they therefore do not need to be a part of the Federal Body. Only those therapies that currently are pursuing voluntary self regulation but which have not yet established a regulatory body would be part of this Federal Body. For a full list of potential therapies see the PFIH web site. At this stage, PFIH are about to invite these therapies to become involved in the Working Group, but they do not yet have confirmed specifics.

**Robert Ford: What are Statutory Regulation and Voluntary Self Regulation?**

These are very different. Statutory Regulation protects by law the therapist's title. In a risk assessment to the patients, more invasive and potentially higher risk techniques require Statutory Regulation. The House of Lords is satisfied that the CAM therapies, which are listed as working with PFIH towards a federal system, carry a low enough risk that they can be regulated under a voluntary system.

**Robert Ford: How can we maintain standards at a high enough level?**

The process of regulation aims to do this, and the involvement of the Forum and other Bowen professionals will enable us to achieve this. By the Forum's presence on the Working Group, we can ensure that standards in Bowen are high, even if other therapies have a different standard of training. All the other therapies share this concern.

**Robert Ford: Are we looking at Statutory Regulation in the near future?**

The House of Lords does not consider light touch therapies to be dangerous. Therefore statutory regulation is not an option at the moment. This does not mean that a lower risk factor equates lower efficacy, or importance. Indeed the establishment of a Federal Body with Department of Health support promotes the importance of these therapies. VSR is about highlighting standards, using a system that is recognisable to the public to mark that a practitioner meets the required standards.

**John Francis: How do we know how many Bowen professionals responded to the Consult Document?**

It is difficult to do statistical analysis as non-responses might be in agreement, just not responding. Also, multi-modality practitioners might have registered their response under another therapy.

In general it can be presumed that non-responses are more likely to be in agreement, as the motivation to respond is often to disagree with a point.

The Forum performed their own survey by e-mail to monitor Bowen professionals' response to the Consultation.

**Anneke Loode: One candidate per therapy is not representative. Is this fair and acceptable to the larger therapies?**

As the representative for each therapy will be taking votes within their therapy and then presenting the Working Group with the mandate, representation by one candidate per therapy is relevant. No particular therapy can dominate and each candidate is there to ensure relevance to their own professionals.

**The HPC (Healthcare Practitioners' Council) is covered by statutory regulation.**

**Will therapies registered with this body be deemed better?**

Professions deemed to present a higher risk need to be covered by Statutory Regulation to protect the public. Statutory regulation generally means more costs and paper work for therapists, in order to prove that they are safe to practise on the public. VSR for CAM does not detract from the professionalism of the therapies; they should still be recognised as healthcare professionals.

**The public are confused, there are so many bodies and organisations. Will a Federal Body add to this confusion?**

A Federal Body will help to make this clearer, since there would be just one register.

**Ellen Cobb: Teachers are not allowed to become Committee members. This is wrong in my opinion.**

Professional Associations are not allowing educators to be represented on their committees either, and for exactly the same reason. This is because there is a potential conflict of interest, and the organisations could make themselves vulnerable to accusations of vested interest. The organisation's decisions would lose credibility if this happened.

This doesn't exclude any individual from having input and decisions are to be made by mandate. Schools in particular have important contributions to make with regard to educational standards, and trainers will be able to influence these standards through the Education sub-group.

Due to the timescale of the Working Group, professionals need to keep themselves up to date on a regular basis, so that their opinions and concerns are included. The Forum are addressing communication plans to keep fast open communication with all interested parties.

### **Results of the "Survey Monkey" survey of Bowen therapists**

**Peter Briant**

After the Consultation period closed, the Forum commissioned a mini survey to gauge Bowen professionals' responses. This was deliberately kept brief to encourage a large response.

The questions asked were:

- a. Did you respond to the PFIH Consultation?
- b. If not, why not?
- c. What are your general views on the regulation of Bowen?:
  - i. Bowen should be regulated by a Federal Body
  - ii. Bowen should set up its own regulatory body

353 therapists had responded by 30 September, and the responses were:

- a. 97 Therapists said they responded to the Consultation Document. This creates an apparent disparity to the Report on the Consultation, which might be due to multi disciplinary therapists not registering their response under Bowen, or to responses being directed through the Forum or through a professional association rather than directly to Abi Masterson Consulting Ltd.
- b. A variety of reasons were given, with many people saying that they had not received the document.
- c. 51.2% were in favour of a Federal Body, 39.1% wanted a regulatory body just for Bowen, 6.5% were undecided, and 3.2% didn't want regulation.

From this feedback the Forum are confident that pursuing a Federal Body is preferable at this stage. The size of the response was also reassuring that communication lines are operating.

Using small surveys of this nature is an effective tool for accessing professionals' feedback, and will be used in future.

### **Workshops**

Everyone divided into two smaller groups, each with members of the Forum Committee attending, to further discuss and highlight issues of regulation. Attention given to issues that would need to be raised in the Working Group. Jean Nestor attended both groups to answer queries as they arose.

The groups reconvened together to discuss the issues raised. Each individual had a sheet of paper to list in order from 1 – 10 their priorities with regards concerns and issues of VSR for Bowen. These lists were handed in to the Committee.

### **Feedback**

- Communication – This is a key issue, especially when planning for the next year as part of the working group. There is still a lot of confusion amongst Bowen professionals. Information passing both from and to the Forum needs to be efficient. Voting especially will need good communication links established.
- Costs – Another key issue, and are especially relevant to practitioners that operate with more than one modality. Lots of paper work, extra training and registering costs are especially of concern.
- Maintaining high standards – especially with regards training and CPD. Core modules that are common to all modules would need to be maintained at a high enough standard for Bowen therapists (such as Anatomy & Physiology and First Aid).
- CPD schemes – The relevance of these for practitioners that are multimodality. A format needs to be agreed that maintains standards, but is affordable and manageable for all therapists.



- Multi registration – For practitioners operating more than one modality, there is the opportunity to register under one of these therapies but mislead the public as to registration for all therapies offered.
- Role of the Professional Associations –The difference between a Federal Body and a Professional Association needs to be made clear, both for professionals and the public. There needs to be clear criteria of how communication will occur between a Federal Body and Professional Associations.
- Credibility and public confidence – A system of voluntary regulation will need a careful agenda to persuade the public that it is maintaining high standards. An informative media presentation would help make the public aware of the federal system.
- Government might ‘move the goal posts’ – Concerns are being expressed that after pursuing a voluntary system the government might suddenly declare that this is not acceptable. Another system for regulation will then need to be researched
- Regulatory Body is monitored – In its establishment, the federal system needs to set up monitoring and regulation of the regulator. Complaints procedures, transparent decision making, unnecessary expenditure, excessive paper work; are all concerns.
- What if the working group is inconclusive – If the report due out next October states that it is unable to establish a federal system; the Forum needs to be aware of what the next steps would be.
- Learning from other regulatory bodies – the opportunity to cherry pick the best parts.
- Joining and setting up period – the time scale of this is crucial for practitioners, especially multi-modality, as they might need to complete courses in more than one therapy. The transitional period needs to accommodate this.
- Grand-parenting scheme – linking in with the setting up period issue (above), any grand-parenting scheme needs to be realistic to include as many professionals as possible.

### **Questions**

#### **How will the Forum select the candidates for the Working Group?**

Members from the Committee should be selected – PFIH has expressed a preference for this, as the candidate will need to be up to date with regulation concerns. This candidate will be a practitioner of Bowen, and not a lay member.

The Forum is establishing a mailing list and will regularly contact via this list and post information on the web-site. "Survey Monkey" will be used to monitor feedback. For interested parties who are not on e-mail, postal mailing will be used, but this is slower and more expensive and therefore not as efficient.

Many practitioners have expressed a desire for a single Professional Association. However, this is a matter for the professional associations, and not for the Bowen Forum, which is concentrating its work on regulation. The creation of one professional association might occur and the Forum will support this if it does, if not strong communication links with the current Associations are important.