

**ENSURING A CONSISTENT APPROACH TO THE REDUCED FEE FOR THOSE NOT
PRACTISING**

1. Do you consider the proposed policy statement setting out when the GCC will accept the reduced non-practising fee to be proportionate?

b. No

In 2015, the British Chiropractic Association pledged to increase the number of chiropractors in the UK from 3100 to 5000 by 2025 enabling increased access for UK residents and an increased partnership with other professions allied to medicine such as physiotherapy and sports and exercise rehabilitation. From this pledge, the Society for Promoting Chiropractic Education was formed, and to date has initiated the start of three new chiropractic programmes. Should each of these courses start successfully, the number of institutions providing chiropractic education will have doubled in the space of 4 years. This spike in programme availability brings with it the challenge of being able to staff them effectively. To achieve this ambitious goal for the profession, we must ensure that those with the desire to join the academic teams to deliver this education are encouraged to do so and are given access to programmes which will develop their skills.

With the now diverse range of education programmes, chiropractors must have the opportunity to acquire the skills of a professional educator alongside their progression as clinicians. There are, however, a number of challenges that limit the growth in the number of educators, including the income profile of teaching compared to the other responsibilities which a chiropractor may take on. The reality of being an educator in the UK in comparison to practising as a clinician, is that particularly for those in their early years of an academic career, the income potential is significantly lower. Whilst there are the additional benefits which come with being employed by an institution compared to the self-employed nature of clinical work, our members working or considering working in academia report that paying the full practising fee for registration is a substantial deterrent. Senior members of our professions academic cohort have raised concerns to us that there is the risk of a 'gap' forming, whereby the number of Senior lecturers required to deliver these new courses will exceed those competent and experienced to do so. We are concerned that any perceived deterrent may amplify this risk.

For clarity, the BCA feel that academics who have contact with the clinic year/ final year supervision and have any involvement in patient care must be fully registered to ensure continuity and academic standards alongside the Code.

Similar concerns hold true for those engaged solely in research. The BCA has demonstrated its support for the widening of the evidence base through the formation of the Chiropractic

Research Council and by funding this independent body in its entirety, and also by funding research bodies at the European (ECCRE) and World (WFCRC) level. It has been reported to us that it remains difficult to encourage students and young graduates to engage with research as a career path. The PERC Internships funded by the CRC are one way which we hope greater numbers will consider a research route, but as per those in academia, we would encourage proposals which do not deter chiropractors from exploring this career path.

Due to these concerns, the BCA feels that, whilst we agree with the GCC's proposed statement that the non-practising fee is inappropriate for the reasons stated, there should be consideration of a third (middle cost) tier which would provide a category for those in full time academia (with no clinical supervision) and research.

We envisage this category to be '**Practising – No Patient Contact**'

- Require the same CPD and learning cycle submission
- Be limited to those using their chiropractic education and professional registration SOLELY for their employment in an academic institution or research position
- Preclude the registrant from clinical / final year supervision and from patient contact or management in any way.

We would appreciate the GCC's consideration of the specific criteria that could be applied to this.

Educators do not enter this career path for monetary motivation, and we are concerned that forcing these registrants to now pay the far greater sum for practising registration will either lead to a situation whereby they leave that career path or do not join it at all, or a worse situation, these academics deregister from the profession entirely. It is important to note that whilst the comparison with the GOsC is fair with regards an overview on numbers, it is important to highlight that the GOsC registration fee is £320 compared to the GCC fee of £800.

Alternatively, given the GCC's renewed focus on developing the profession, we ask if there is scope to subsidise the full registration fee for the engaged in full time academia or research.

2. Do you believe the terms set out in the proposed new policy statement are clear?

a. Yes

3. Do you think that that it is appropriate to ask registrants to provide further information or evidence in some circumstances to establish whether or not they are using their chiropractic education and skills?

a. Yes

We would go further with this suggestion to ask how the GCC would manage individuals not registered but using their chiropractic education and skills with members of the public. We

consider there to be a risk to the safety of the public when seeking care from those with a chiropractic education but who are not registered with the GCC. This risk extends to the profession as a whole. With no recourse for poor practice and potential misconduct, these individuals have the capacity to pose a risk to the public using the skills learnt during their chiropractic education with no need to maintain CPD and abide by the COPSOP. In cases where an individual may be misleading the public as to their professional registration status, i.e. not calling themselves a 'chiropractor,' but stating that they have graduated with a Master of Chiropractic, would the GCC consider referral to the Advertising Standards Authority? It is our belief that a normal member of the public may be misled in this situation.

4. Please tell us of any impact (whether positive or negative) you foresee in relation to the proposed changes, including in relation to Equality and Diversity.

We ask that the GCC demonstrate compassion regarding those citing 'long term health issues' as their circumstance for applying for the reduced (non-practising) fee. We ask that the GCC avoid unduly causing any unnecessary stress to these registrants and attempt to utilise existing documentation where possible.

We would like the GCC to consider the situation where a student chooses to, and is accepted to, study chiropractic for the sole purpose of becoming involved in research or academia. If this were a student with physical disability, it may be a significant deterrent to that student choosing to study in the chiropractic profession, where there are pathways to allow those who have studies i.e. Medicine to work in both academia and research without the need to be registered with the GMC as a practising medical doctor.

5. Please provide any further comments you have on our proposed approach to the reduced fee.

We ask if the GCC have any data on complaints received regarding non patient contact issues. i.e chiropractic academic staff at institutions with no clinical contact; and chiropractic researchers. Whilst we understand and appreciate that the public risk posed by these individuals is indirect but real, we feel that both the risk of these individuals deregistering, and the risk of qualified chiropractors not entering these career paths is far greater. Giving consideration to the criteria as proposed, there are a number of examples where individuals are 'working in a capacity to develop the chiropractic profession' but are not chiropractors. Examples include Physiotherapists and Radiographers teaching solely on chiropractic programmes, researchers with no regulated healthcare profession status teaching research methods to a chiropractic programme. We feel that there is huge benefit in these people with such expert knowledge being involved with the profession but ask why we would disincentivise qualified chiropractors from engaging in a similar way?

A GAP IN THE POOL OF ACADEMIC STAFF

There exists a gap in the development of our pool of academics. We ask that the GCC consider the risk to the profession should we not actively support those taking on these roles. Universities have a number of quality assurance criterion which they must meet i.e. QAA; and we are concerned that by enforcing those academics with no patient contact to pay the full registration fee, we may see a decline in the number of chiropractors considering these roles and a lack of support from the institutions to continue to cover their registration fees.

NEW COURSES BEING ESTABLISHED

We must consider that there are now two courses yet to begin their recruitment for staff. How will these proposals encourage chiropractors to consider working in these institutions and developing the profession?

UNFAIR COMPARISON

We appreciate that the GCC have compared the statistics to the GOsC with regards the percentage of registrant paying the reduced fee, but we ask if the GCC consider this a fair comparison? Given that there is a difference of £480 (2.5x) in the cost of registering as an osteopath vs chiropractor, we suggest that a reduction in the current full fee to register may serve a greater benefit to the profession and the protection of the public by:

- Reducing the number of individuals with chiropractic qualifications from not registering, but continuing to practice without title
- Reducing the burden on those engaged in the profession and continuing to the development of the profession through teaching and research but with no patient contact

The current fee is inconsistent with the relatively low number of cases seen by the GCC each year and the cost per case is disproportionate in comparison to the 8 other regulators.

We ask that the GCC consider an extension to the proposed timeline to allow for further consultation and engagement with those affected.