



Law Society
of Scotland

Consultation Response

Regulating healthcare professionals, protecting the public

June 2021



Introduction

The Law Society of Scotland is the professional body for over 12,000 Scottish solicitors.

We are a regulator that sets and enforces standards for the solicitor profession which helps people in need and supports business in Scotland, the UK and overseas. We support solicitors and drive change to ensure Scotland has a strong, successful and diverse legal profession. We represent our members and wider society when speaking out on human rights and the rule of law. We also seek to influence changes to legislation and the operation of our justice system as part of our work towards a fairer and more just society.

Our Health and Medical Law sub-committee welcomes the opportunity to consider and respond to the Department of Health and Social Care consultation: *Regulating healthcare professionals, protecting the public*.¹ The sub-committee has the following comments to put forward for consideration.

Consultation Questions

1. Do you agree or disagree that regulators should be under a duty to co-operate with the organisations set out above? Please give a reason for your answer.

We have no specific comments.

2. Do you agree or disagree that regulators should have an objective to be transparent when carrying out their functions and should have these related duties? Please give a reason for your answer

We have no specific comments.

3. Do you agree or disagree that regulators should be required to assess the impact of proposed changes to their rules, processes and systems before they are introduced? Please give a reason for your answer

It is vital that regulators assess the proportionality of changes to their rules, processes and systems before they are introduced. Any change could have a significant impact on health professionals, health boards

¹ <https://www.gov.uk/government/consultations/regulating-healthcare-professionals-protecting-the-public>

and universities. Health Boards may incur costs in ensuring that health professionals meet the new standards. Universities and training providers may incur costs in adapting their courses.

We do note that devolving additional powers to regulators to make changes to their rules, processes and systems has the potential to create greater disparity between health professionals. Safeguards should be in place to mitigate any unforeseen or adverse consequences arising from this increased flexibility.

4. Do you agree or disagree with the proposal for the constitution on appointment arrangements to the Board of the regulators? Please give a reason for your answer.

Disagree. Moving to unitary boards has the potential to reduce bureaucracy. However, it is our experience that there is significant value in retaining a balance between lay and professional representation within the governance structures of regulators. Registrants are likely to have relevant expertise and an understanding of the profession which may not be shared by lay members, whilst lay members reflect the public interest ethos of regulation. This partnership approach serves to deliver appropriate checks and balances in order to maintain public confidence.

5. Do you agree or disagree that regulators should be able to set their own fees in rules without Privy Council approval? Please give a reason for your answer

We agree that in principle regulators should be able to set their own fees in rules without Privy Council approval. This would remove the discrepancy which currently exists whereby some regulators are subject to Parliamentary oversight, and some are not. However, there may be a risk that some smaller regulators may seek to charge higher fees. This could have a negative impact on health professionals and may lead to some leaving the profession, thereby having a consequent negative impact on the NHS. Consideration should be given to mechanisms to ensure consistency between regulators. Safeguards should also be in place to ensure that changes to fees are proportionate and subject to appropriate scrutiny. There should be mechanisms for consultation on proposed fee changes with registrants and potentially other regulators, and robust processes for regular review.

6. Do you agree or disagree that regulators should be able to set a longer-term approach to fees? Please give a reason for your answer.

See our answer to question 5, above. We have no further comments.

7. Do you agree or disagree that regulators should be able to establish their own

committees rather than this being set out in legislation? Please give a reason for your answer.

We agree that regulators should be able to decide their own committee structure. However, where committees are discharging regulatory functions they should have a balance of professional and lay members. See our response to question 4, above.

8. Do you agree or disagree that regulators should be able to charge for services undertaken on a cost recovery basis, and that this should extend to services undertaken outside of the geographical region in which they normally operate? Please give a reason for your answers.

Whilst we agree that it would be helpful for regulators to be able to charge for services undertaken on a cost recovery basis, in order to mitigate against such costs being passed on the registrants (see our response to question 5, above), great care would be required to ensure that third parties were not able to influence the function and independence of the regulator due to financial ties.

9. Do you agree or disagree that regulators should have the power to delegate the performance of a function to a third party including another regulator? Please give a reason for your answer.

We agree that it may be appropriate for regulators to have the power to delegate the performance of a function to another regulator in certain specific areas. The consultation document refers to an example of a number of regulators accrediting the same training programmes, and we agree that using delegated powers in this situation could reduce duplication and improve consistency. However, safeguards would be required to ensure that there is no lowering of standards overall, and to ensure consistency.

Some functions should remain excluded from delegation. Regulators should not be able to delegate decision-making relating to misconduct and fitness to practice. Health professionals have a right to be governed by their own regulator.

Where functions are delegated, it should be made clear to registrants and others which functions are delegated and who they are delegated to.

10. Do you agree or disagree that regulators should be able to require data from and share data with those groups listed above? Please give a reason for your answer

The proposed power for regulators to obtain, process and disclose information to or from any organisation or person where it is required to fulfil their statutory objectives is a very wide one. It may be appropriate to

include certain caveats and limited exceptions, for example where there are clear commercial sensitivities. In respect of disclosure to government agencies, safeguards may be necessary to protect and preserve the independence of the regulator. There should be clear data protection protocols to prevent data breaches and unauthorised sharing of data.

11. Do you agree or disagree that regulators should produce an annual report to the Parliament of each UK country in which they operate? Please give a reason for your answer.

We agree that annual reporting can be helpful to parliament and is an important way in which health service issues can be highlighted. However, it is important that reporting requirements do not undermine the independence of the regulator.

12. Do you agree or disagree that the Privy Council's default powers should apply to the GDC and GPhC? Please give a reason for your answer.

We recognise the value of consistent powers applicable to all regulators. However, these powers must be clearly defined and safeguards must be in place to ensure that they cannot be used to undermine the independence of regulatory functions.

13. Do you agree or disagree that all regulators should have the power to set:

- **standards for the outcomes of education and training which leads to registration or annotation of the register for individual learners;**
- **standards for providers who deliver courses or programmes of training which lead to registration;**
- **standards for specific courses or programmes of training which lead to registration;**

- **additional standards for providers who deliver post-registration courses of programmes of training which lead to annotation of the register; and**

- **additional standards for specific courses or programmes of training which lead to annotation of the register?**

Please give a reason for your answer.

We agree that giving all regulators broadly consistent powers to regulate matters of education and training is consistent with the principles of reform set out in the consultation document.² It is our experience that regulators are best placed to determine the educational requirement of the profession, on the basis that they are in a position to monitor and react to emerging issues identified via their regulatory role.

14. Do you agree or disagree that all regulators should have the power to approve, refuse, re-approve and withdraw approval of education and training providers, qualifications, courses or programmes of training which lead to registration or annotation of the register? Please give a reason for your answer.

Yes. As per our answer to question 13, above, it is our experience that regulators are best placed to determine the educational requirement of the profession. In doing so, they need adequate powers to provide assurance that the education and training of regulated healthcare professionals meets the required standards. The existence of approved education and training providers, qualifications, courses and programmes of training also provides clarity and certainty to those seeking to enter the profession as to the career path or paths available to them.

15. Do you agree that all regulators should have the power to issue warnings and impose conditions? Please give a reason for your answer.

Yes. See our answer to question 14, above. The power to issue warnings and impose conditions supports effective and proportionate regulation.

² *Regulating healthcare professionals, protecting the public* consultation document, para 8 (page 5), available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/978833/Regulating_healthcare_professionals_protecting_the_public.pdf

16. Do you agree or disagree with the proposal that education and training providers have a right to submit observations and that this should be taken into account in the decision-making process? Please provide a reason for your answer.

We have no specific comments.

17. Do you agree that:

- **education and training providers should have the right to appeal approval decisions;**

- **that this appeal right should not apply when conditions are attached to an approval;**

- **that regulators should be required to set out the grounds for appeals and appeals processes in rules?**

Please provide a reason for your answer

We agree that education and training providers should have the right to appeal approval decisions. This is consistent with fair and effective regulation.

We are not clear as to why this appeal right should not apply when conditions are attached to an approval. There may be situations where the provider wishes to seek review of the conditions themselves, for example where they consider them to be unduly onerous.

We agree that regulators should be required to set out the grounds for appeals and appeals processes in rules. This will provide clarity for all parties, and is consistent with good governance. Allowing regulators to set out grounds for appeal and appeals processes in rules rather than in primary legislation will provide administrative flexibility and enable regulators to be more responsive to changing circumstances.

18. Do you agree or disagree that regulators should retain all existing approval and standard setting powers? Please provide a reason for your answer.

This would appear to be contrary to the principles of reform set out in the consultation document. See our response to question 13, above.

19. Do you agree or disagree that all regulators should have the power to set and administer exams or other assessments for applications to join the register or to have annotations on the register? Please provide a reason for your answer.

We have no specific comments.

20. Do you agree or disagree that this power to set and administer exams or other assessments should not apply to approved courses or programmes of training which lead to registration or annotation of the register? Please provide a reason for your answer.

We have no specific comments.

21. Do you agree or disagree that regulators should be able to assess education and training providers, courses or programmes of training conducted in a range of ways? Please provide a reason for your answer.

We have no specific comments.

22. Do you agree or disagree that the GMC's duty to award CCTs should be replaced with a power to make rules setting out the procedure in relation to, and evidence required in support of, CCTs? Please give a reason for your answer.

We have no specific comments.

23. Do you agree or disagree that regulators should be able to set out in rules and guidance their CPD and revalidation requirements? Please give a reason for your answer.

We have no specific comments.

24. Do you agree or disagree that the regulators should hold a single register which can be divided into parts for each profession they regulate? Please give a reason for your answer.

We have no specific comments.

25. Do you agree or disagree that all regulators should be required to publish the following information about their registrants:

- **Name**

- **Profession**

- **Qualification (this will only be published if the regulator holds this information. For historical reasons not all regulators hold this information about all of their registrants)**

- **Registration number or personal identification number (PIN)**

- **Registration status (any measures in relation to fitness to practise on a registrant's registration should be published in accordance with the rules/policy made by a regulator)**

- **Registration history**

Please provide a reason for your answer.

We have no specific comments.

26. Do you agree or disagree that all regulators, in line with their statutory objectives, should be given a power allowing them to collect, hold and process data? Please give a reason for your answer.

Regulators should have a power allowing them to collect, hold and process data in line with their regulatory responsibilities and in order to protect the public interest. This should not be a blanket power to collect, hold and process data, and must be proportionate and within the boundaries of data protection legislation.

27. Should they be given a discretionary power allowing them to publish specific data about their registrants? Please give a reason for your answer.

We have no specific comments.

28. Do you agree or disagree that all regulators should be able to annotate their register and that annotations should only be made where they are necessary for the purpose of public protection? Please give a reason for your answer.

We have no specific comments.

29. Do you agree or disagree that all of the regulators should be given a permanent emergency registration power? Please give a reason for your answer.

We note the proposed role of the Secretary of State for Health and Social Care in notifying the registrars that an emergency is about to occur, is occurring or has occurred. We note the proposed role of the Department of Health NI in Northern Ireland. Consideration should be given to the role of the devolved administrations where an emergency occurs in their area, and to ensuring appropriate co-ordination between UK and devolved administrations and the registrars in case of emergency.

30. Do you agree or disagree that all regulators should have the same offences in relation to protection of title and registration within their governing legislation?

We are of the view that it is fundamentally important that the public can have the confidence to assume that the healthcare professional they engage with is suitably qualified and regulated to provide those services in order to meet healthcare needs. This can only be attained through the statutory protection of professional title. Protecting the use of title provides the regulator with the vires to ensure that only those who undertake and can demonstrate extensive education, qualification, and training are allowed to provide healthcare services. From a public perspective, this will ensure, not only that the person is entitled to

provide healthcare, but that the necessary safeguards, regulation and redress schemes are in place in the unlikely event that an issue arises.

For information and from a comparative perspective; the term 'solicitor' is a protected title in Scotland and the rest of the UK. It is a criminal offence for any person to pretend, wilfully and falsely, to be a solicitor. There are, however, no such restrictions around the use of the term 'lawyer'. As a result, any person, regardless of qualification, experience or regulation, can legitimately refer to themselves as a 'lawyer'. Even a person with a serious criminal conviction can use this title. Our own research has shown overwhelming public support for restrictions on who can call themselves or advertise themselves as a lawyer. We suggest that strong public support may likely be evident also for protecting professional titles within the healthcare sector, where public confidence is crucial.

There seems strong merit in creating consistency across all the healthcare professions where it is intended that there will be protection of title though on some occasions, exactly what title is to be protected is yet to be identified and ascertained. If the title is to be protected, there seems no good reason why any healthcare profession would be treated differently. The consultation does not refer to any historical reason or justification why this should be the case and therefore on policy grounds, there seems no basis, and there should not be, any differentiation.

Materially, it would avoid cases such as Zholia Alemi who practised for 22 years in the NHS without any qualifications. Her practice extended to both Scotland and England where we understand that she was convicted of fraud and theft at Carlisle Crown Court. As well as making these statutory offences, the NHS must also carry out robust and rigorous checks on those who they are employing.³

What is more important is exactly the detail of the relevant offences as clarity in criminal law is essential given the effect if convicted. It is not just about any sentence imposed but also about the effects of sentence on careers and travel perspectives. If there are titles which are to become protected, there needs to be publicity to ensure that is well and effectively understood, and signals that change or more appropriate recognition has been made.

31. Do you agree or disagree that the protection of title offences should be intent offences or do you think some offences should be non-intent offences (these are offences where an intent to commit the offence does not have to be proven or demonstrated)? Please give a reason for your answer.

Mention is made in the consultation of relevant protection to title offences in the Dentists Act 1984 and Opticians Act 1989 where the relevant sections appear to be sections 39 and section 28. These appear strict liability offences to us.

³ <https://www.bbc.co.uk/news/uk-scotland-glasgow-west-46437141>

We consider that all these offences should be strict where intent need not be proved. It is not clear why people would use the title unless to imply that they were qualified etc. We cannot envisage a situation where there was not a purpose. To afford the maximum protection, we do consider that strict liability offences give that effect. There would be the option to provide in the relevant legislation without reasonable excuse. This is in effect the imposition of a reverse burden where the accused /defendant could show that there was an excuse. Its use would create the actus reus of an offence and it would be up to the defence to show on a balance of probabilities that there was an excuse. However, despite what is stated in the consultation, not knowing the law is not an excuse.

Were the offences to remain intent, the common law of fraud in Scotland would be available without any offence being created through criminal law- requiring only a reference to the statutory provisions which will indicate that it is a title which is protected. It seems easier and more cohesive to have this set out in one statute- what is protected by way of title and the consequences i.e. offences from a criminal perspective were this not to be observed.

From a comparative perspective it may also be helpful to consider the provisions of section 31 Solicitors (Scotland) Act 1980 which makes it a (non-intent) offence for a person to hold themselves out (to pretend) to be a solicitor. This has the effect of reserving the terms 'solicitor' and 'notary public' to those who are qualified to use such terms.

We refer to our answer to Question 30 with regard to the need for publicity once it is decided what titles are to be protected.

32. Do you agree or disagree with our proposal that regulators should be able to appoint a deputy registrar and/or assistant registrar, where this power does not already exist? Please give a reason for your answer.

We have no specific comments.

33. Do you agree or disagree with our proposal that regulators should be able to set out their registration processes in rules and guidance? Please give a reason for your answer.

We have no specific comments.

34. Should all registrars be given a discretion to turn down an applicant for registration or should applicants be only turned down because they have failed to meet the new criteria for registration? Please give a reason for your answer.

We have concerns about this proposal. It would not appear to be consistent with transparent decision-making. We would suggest that situations such as that described in the consultation document (an applicant who has had a long break in practice and is unable to provide evidence to demonstrate that this break in practice was mitigated by taking steps to keep their knowledge and skills up to date) could be better addressed by clear criteria relating to knowledge and skill or revalidation requirements.

35. Do you agree or disagree that the GMC's provisions relating to the licence to practise should be removed from primary legislation and that any requirements to hold a licence to practise and the procedure for granting or refusing a licence to practise should instead be set out in rules and guidance? Please give a reason for your answer.

We have no specific comments.

36. Do you agree or disagree that in specific circumstances regulators should be able to suspend registrants from their registers rather than remove them? Please give a reason for your answer.

We agree that there may be circumstances where suspension from the registers may be more appropriate than removal. However, there should be a mechanism for the regulator to add an annotation explaining the reason for the suspension. Suspension could create an unwarranted negative inference about ability, which would not be in the public interest. Suspension should also only be used on a temporary basis, whilst the circumstances giving rise to the suspension are considered. There must be clear processes to challenge or appeal a decision to suspend, and a suspension should be lifted where appropriate conditions are subsequently met.

37. Do you agree or disagree that the regulators should be able to set out their removal and readmittance processes to the register for administrative reasons in rules, rather than having these set out in primary legislation? Please give a reason for your answer.

Agree. Allowing regulators to set out their removal and readmittance processes to the register for administrative reasons in rules rather than in primary legislation will provide administrative flexibility and enable regulators to be more responsive to changing circumstances.

38. Do you think any additional appealable decisions should be included within

legislation? Please give a reason for your answer.

We would suggest that appealable decisions should be set out in secondary, rather than primary, legislation to ensure flexibility. See our answer to question 37, above.

39. Do you agree or disagree that regulators should set out their registration appeals procedures in rules or should these be set out in their governing legislation? Please give a reason for your answer.

We agree that regulators should set out their registration appeals procedures in rules, rather than in legislation. This will provide administrative flexibility and enable regulators to be more responsive to changing circumstances.

40. Do you agree or disagree with our proposal that the regulators should not have discretionary powers to establish student registers? Please give a reason for your answer.

We have no specific comments.

41. Do you agree or disagree with our proposal that the regulators should not have discretionary powers to establish non-practising registers? Please give a reason for your answer.

The proposal that regulators should not have discretionary powers to establish non-practising registers would appear to be consistent with the purpose of regulation, and would also promote consistency and clarity. However, it would be important to preserve mechanisms for non-practising health professionals to remain on the registers with an appropriate annotation to reflect their non-practising status. We are aware that may retired clinicians act as medical experts, for example, and consequently will wish to maintain their registration despite not undertaking clinical work. That option should be preserved.

42. Do you agree or disagree that the prescriptive detail on international registration requirements should be removed from legislation? Please give a reason for your answer.

Agree. This will provide administrative flexibility and enable regulators to be more responsive to changing circumstances.

43. Do you agree or disagree with our proposal that regulators should be given powers to operate a three-step fitness to practise process, covering:

- **1: initial assessment**
- **2: case examiner stage**
- **3: fitness to practise panel stage?**

Please give a reason for your answer.

We have no specific comments.

44. Do you agree or disagree that:

- **All regulators should be provided with two grounds for action – lack of competence, and misconduct?**
- **Lack of competence and misconduct are the most appropriate terminology for these grounds for action?**
- **Any separate grounds for action relating to health and English language should be removed from the legislation, and concerns of this kind investigated under the ground of lack of competence?**
- **This proposal provides sufficient scope for regulators to investigate concerns about registrants and ensure public protection?**

Please give a reason for your answers.

We have no specific comments.

45. Do you agree or disagree that:

- **all measures (warnings, conditions, suspension orders and removal orders) should be made available to both Case Examiners and Fitness to Practise panels; and**
- **automatic removal orders should be made available to a regulator following conviction for a listed offence?**

Please give a reason for your answers

We have no specific comments.

**46. Do you agree or disagree with the proposed powers for reviewing measures?
Please give a reason for your answer.**

We have no specific comments.

47. Do you agree or disagree with our proposal on notification provisions, including the duty to keep the person(s) who raised the concern informed at key points during the fitness to practise process? Please give a reason for your answer.

We have no specific comments.

48. Do you agree or disagree with our proposal that regulators should have discretion to decide whether to investigate, and if so, how best to investigate a fitness to practise concern? Please give a reason for your answer.

We have no specific comments.

49. Do you agree or disagree that the current restrictions on regulators being able to consider concerns more than five years after they came to light should be removed? Please give a reason for your answer.

We have no specific comments.

50. Do you think that regulators should be provided with a separate power to address noncompliance, or should non-compliance be managed using existing powers such as “adverse inferences”? Please give a reason for your answer.

We have no specific comments.

51. Do you agree or disagree with our proposed approach for onward referral of a case at the end of the initial assessment stage? Please give a reason for your answer.

We have no specific comments.

52. Do you agree or disagree with our proposal that regulators should be given a new power to automatically remove a registrant from the Register, if they have been convicted of a listed offence, in line with the powers set out in the Social Workers Regulations? Please give a reason for your answer.

We have no specific comments.

53. Do you agree or disagree with our proposals that case examiners should:

- **have the full suite of measures available to them, including removal from the register?**

- **make final decisions on impairment if they have sufficient written evidence and the registrant has had the opportunity to make representations?**
- **be able to conclude such a case through an accepted outcome, where the registrant must accept both the finding of impairment and the proposed measure?**
- **be able to impose a decision if a registrant does not respond to an accepted outcomes proposal within 28 days?**

Please give a reason for your answers.

We have no specific comments.

54. Do you agree or disagree with our proposed powers for Interim Measures, set out above? Please give a reason for your answer.

We have no specific comments.

55. Do you agree or disagree that regulators should be able to determine in rules the details of how the Fitness to Practise panel stage operates? Please give a reason for your answer.

We have no specific comments.

56. Do you agree or disagree that a registrant should have a right of appeal against a decision by a case examiner, Fitness to Practise panel or Interim Measures panel? Please give a reason for your answer.

We have no specific comments.

57. Should this be a right of appeal to the High Court in England and Wales, the Court of Session in Scotland, or the High Court in Northern Ireland? Please give a

reason for your answer.

We have no specific comments.

58. Do you agree or disagree that regulators should be able to set out in Rules their own restoration to the register processes in relation to fitness to practise cases? Please give a reason for your answer.

We have no specific comments.

59. Do you agree or disagree that a registrant should have a further onward right of appeal against a decision not to permit restoration to the register? Please give a reason for your answer.

We have no specific comments.

60. Should this be a right of appeal to the High Court in England and Wales, the Court of Session in Scotland, or the High Court in Northern Ireland? Please give a reason for your answer.

We have no specific comments.

61. Do you agree or disagree that the proposed Registrar Review power provides sufficient oversight of decisions made by case examiners (including accepted outcome decisions) to protect the public? Please provide any reasons for your answer.

We have no specific comments.

62. Under our proposals, the PSA will not have a right to refer decisions made by case examiners (including accepted outcome decisions) to court, but they will have the right to request a registrar review. Do you agree or disagree with this proposed mechanism? Please provide any reasons for your answer.

We have no specific comments.

63. Do you have any further comments on our proposed model for fitness to practise?

We have no specific comments.

64. Do you agree or disagree with the proposed approach to the regulation of PAs and AAs? Please give a reason for your answer.

We agree that PAs and AAs should be subject to statutory regulation, in order to protect both the public and the profession. We do have some concerns as to whether the GMC is the most appropriate regulator for this purpose. We note that the consultation document indicates that there will be “some differences between PAs and AAs and doctors in the way they are regulated by the GMC to reflect the contexts in which each role practises and the risks posed”.⁴ If the GMC is required to develop new processes to fulfil this additional function, there is a risk that this will lead to increased bureaucracy and possible additional costs. Careful consideration should be given to how these significant changes can be properly managed and resourced.

65. In relation to PAs and AAs, do you agree or disagree that the GMC should be given a power to approve high level curricula and set and administer exams? Please give a reason for your answer.

We have no specific comments.

66. Do you agree or disagree with the transitional arrangements for PAs and AAs set out above? Please give a reason for your answer

We have no specific comments.

67. Do you agree or disagree that PAs and AAs should be required to demonstrate that they remain fit to practise to maintain their registration? Please give a reason for your answer.

⁴ *Regulating healthcare professionals, protecting the public* consultation document, para 376 (page 84), available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/978833/Regulating_healthcare_professionals_protecting_the_public.pdf

We have no specific comments.

68. Do you agree or disagree with the benefits identified in the table above? Please set out why you've selected your answer and any alternative benefits you consider to be relevant and any evidence to support your views.

We have no specific comments.

69. Do you agree or disagree with the costs identified in the table above? Please set out why you've chosen your answer and any alternative impacts you consider to be relevant and any evidence to support your views.

We have no specific comments.

70. Do you think any of the proposals in this consultation could impact (positively or negatively) on any persons with protected characteristics covered by the general equality duty that is set out in the Equality Act 2010, or by Section 75 of the Northern Ireland Act 1998?

- **Yes – positively**

- **Yes - negatively**

- **No**

- **Don't know**

Please provide further information to support your answer.

We have no specific comments.



Law Society
of Scotland

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