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Review of National Registration and Accreditation Scheme
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SUBMISSION TO THE REVIEW OF THE NATIONAL REGISTRATION AND ACCREDITATION SCHEME FOR HEALTH PROFESSIONALS

The Cosmetic Physicians Society of Australasia (CPSA) is pleased to make a submission to the Independent Reviewer’s consultation paper on National Registration and Accreditation Scheme for Health Professionals.

About the CPSA

The CPSA represents the largest group of doctors in Australia with a special interest in minimally-invasive cosmetic medicine. One of the CPSA’s primary endeavours is to safeguard the public by ensuring regulations are adhered to and standards upheld in this evolving area of medicine.

The CPSA has played a significant role in the development of standards to protect the public in recent years and actively works to highlight and eradicate bad practices. For example, it was involved in formulating the NS10010 National Standard – Accreditation of Cosmetic Clinics which caters for cosmetic medicine practices where minimally invasive procedures are performed.

The CPSA is also represented on the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA) working group that is examining suitable regulatory options for the use of lasers and IPLs for cosmetic purposes.

The CPSA would like to comment on the areas of most relevance to cosmetic medicine that have been reflected upon in this consultation paper.

Accountability

The CPSA supports the intention of the Independent Review to reconstitute the Australian Health Workforce Advisory Council to provide independent reporting on the operation of the National Scheme and supports its use as a mediator to addresses any unresolved cross-professional issues.
The future for regulation of health practitioners in Australia

The CPSA doesn’t support the option that a single Health Professions Australia Board be established to manage the regulatory functions that oversee all the regulatory workload of the current Boards. We believe that consolidating their workload will be less responsive. The CPSA supports the current five higher regulatory workload professions as it’s of the view that they are better placed in dealing with their issues in a timely manner and considering each case with a view to the standards of the relevant profession(s).

In regards to the lower regulatory workload professions, the CPSA would support the consolidation of functions whilst maintaining the nine boards.

For Professions seeking entry to the National Scheme

The CPSA advocates strongly that consideration of public safety and risk to injury and/or mistreatment should outweigh the cost benefit to the public in developing policy, particularly when it applies to the risk of unregulated providers delivering health services. The CPSA supports the development of standards of conduct for unregistered providers and procedures to manage breaches of those standards. The CPSA is of the view that the development of such standards could then be used to kick-start a national model.

Complaints and notification

The CPSA concurs that the current complaints and notification system, managed by AHPRA and Health Complaint Entities, can be improved to address the concerns that have been identified by the Independent Review. The CPSA supports Option 1 which retains the existing structure but improves current processes through administrative and legislative changes that aim to address the current concerns with the existing system. Though the CPSA does not object to Option 2, it is of the view that Option 1 can be achieved in a more timely manner, will cost less to implement and will not disrupt the current operations.

Public protection – advertising

The CPSA strongly supports the revised Australian Health Practitioner Regulation Agency’s (AHPRA) Guidelines for advertising regulated health services and its Social media policy which were developed and approved in May 2014. It also concurs with the view that practitioners who have social media sites should be responsible in ensuring through regular monitoring that any content on these sites – including user generated content - complies with the Guidelines.

Over the past four years, the CPSA has strongly advocated that advertising on group-buy, coupon and social media sites has the potential to induce and encourage the unnecessary use of regulated health services by the public. It has also expressed concern that user generated comment on social media does promote and market regulated health services to the public.

The CPSA’s position is supported by the Codes and definition for advertising set by the Australian Association of National Advertisers (AANA). The AANA defines advertising as:

“Any material which is published or broadcast using any Medium or any activity which is
undertaken by, or on behalf of an advertiser or marketer, and over which the advertiser or marketer has a reasonable degree of control, and that draws the attention of the public in a manner calculated to promote or oppose directly or indirectly a product, service, person, organisation or line of conduct.”¹

This definition includes user-generated comment on social media sites over which the advertiser has a reasonable degree of control.

The CPSA also refers the Independent Review to the Advertising Standards Board (ASB) which adjudicates on alleged breaches of the AANA Codes. In relation to user generated comment and social media it has stated the following:

“The Board considered that the Facebook site of an advertiser is a marketing communication tool over which the advertiser has a reasonable degree of control and that the site could be considered to draw the attention of a segment of the public to a product in a manner calculated to promote or oppose directly or indirectly that product. The Board determined that the provisions of the Code apply to an advertiser’s Facebook page. As a Facebook page can be used to engage with customers, the Board further considered that the Code applies to the content generated by the page creator as well as material or comments posted by users or friends.”²

The CPSA is of the view that the revised AHPRA Guidelines and Social media policy clarify the precise requirements of the National Law and the purpose; provide clarity; allow for consistent principles to apply to the guidelines; as well as provide a guide and clarify any previous ambiguity.

**Public protection – cosmetic procedures**

The CPSA notes the Independent Review’s comments and supports extending the practice protections to include cosmetic medicine and surgery.

The CPSA has supported and continues to advocate for the Inter-Jurisdictional Cosmetic Surgery Working Group, Clinical Technical and Ethical Principal Committee of the Australian Health Ministers’ Advisory Council’s recommendation for a national framework for cosmetic medicines and surgery to be implemented.

**Public protection – a national code of conduct for unregistered professionals**

The CPSA continues to advocate its concerns with the lack of regulation for unregistered providers of health services, particularly loopholes enabling non-medically-trained personnel to administer treatments which are potentially harmful.

The CPSA is of the view that certain factors need to be addressed to reduce the risk of injury by unregistered and/or untrained providers. These factors include:

- adequate training for operators – for example the most common cause of injury is the inappropriate use of laser/IPL devices by people with little or no training;
- appropriate levels of indemnity insurance – mandating adequate professional

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¹ The AANA Code of Ethics
² Advertising Standards Bureau Case Report, case number 0271/12 and case number 0272/12
indemnity insurance would give more patients access to compensation in cases of malpractice;

- infection control – infection control measures should be adhered to similar to those required by registered practitioners;
- drugs/alcohol – operators and patients should obviously not be under the influence of drugs or alcohol during the treatment;
- inaccurate claims – untrained providers should be prohibited from making claims about being able to recognise or treat skin cancers or any form of condition requiring a medical diagnosis.

These factors are supported by the Inter-Jurisdictional Cosmetic Surgery Working Group, Clinical Technical and Ethical Principal Committee of the Australian Health Ministers’ Advisory Council’s recommendations for unregistered providers.

The CPSA would consider supporting the Independent Review’s option for a National Code, if such a Code primarily addressed these factors and ensured that an accessible complaints mechanism was developed to deal with unregistered providers.

In conclusion, the CPSA supports the proposition of a regular Independent Review of the National Registration and Accreditation Scheme for health professionals to ensure that the system remains relevant and workable, but also to maintain good regulatory practice.

Yours sincerely,

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