

New Standards for Assessment and Accreditation of Cosmetic Surgery Programs of Study

ATTACHMENT A Proposed Outcome (Capability Statements)

January 2023

1. Background

The AMC accreditation standards for cosmetic surgery outline the standards for programs of study and providers. AMC accreditation of programs that meet these standards will provide the basis for the Medical Board of Australia to make decisions on approval of qualifications for endorsement in the area of practice of cosmetic surgery. The outcome (capability) statements set out in this document are part of the standards. They define the knowledge, skills, professional behaviours and attributes that graduates of an accredited cosmetic surgery program will be able to demonstrate and draw on a range of national and international surgical curricula currently being applied. This approach will ensure a program of study enables medical practitioners providing cosmetic surgery to practise competently and safely, and as such will support consumers to seek out medical practitioners who can provide a high-quality service. The purpose is not to restrict those who can practise cosmetic surgery, but to set out an education and training program so that medical practitioners can be endorsed in cosmetic surgery – enabling the public to know who holds an approved qualification.

The definitions for cosmetic surgery as invasive procedures that are aimed at 'changes to bodily features that have a normal appearance on presentation to the doctor' in the absence of any 'clinical or functional need for the procedure' provide the context for this project. This definition means that the concept of 'patient' is not aligned with the practice and that those undergoing cosmetic surgery are clients or consumers. For the purpose of setting out the capabilities, the term patient is retained.

The Independent Review of the regulation of medical practitioners who perform cosmetic surgery, with a focus on medical practitioners (doctors) (September 2022, p4), stated:

'Cosmetic surgery refers to operations that involve cutting beneath the skin to revise or change the appearance of normal bodily features where there is otherwise no clinical or functional need for the procedure.'

Providers of cosmetic surgery programs for medical practitioners must design learning and assessment programs that will enable medical practitioners to achieve the capabilities set out in this document. The capabilities build on the expectations set out by the Medical Board of Australia and Australian Health Practitioner Regulation Agency (Ahpra)² in the code of conduct for the medical profession. In describing what is expected of registered medical practitioners, the code clearly sets out the professional responsibility on medical practitioners to apply the guidance in the code. Specific aspects of the code that warrant consideration by practitioners of cosmetic surgery relate to professional values, providing good care, informed consent, management of adverse events and complaints, record keeping and 'delegation, referral and handover'. These specific aspects are set out in Appendix 1.

The outcome (capability) statements are groups as follows:

Outcomes (capabilities)	Domain 1	The cosmetic surgery practitioner
	Domain 2	The cosmetic surgery practitioner as a professional and leader
	Domain 3	The cosmetic surgery practitioner as a health advocate
	Domain 4	The cosmetic surgery practitioner as a reflective and evidenced informed practitioner

¹ Dean, N. R., Foley, K., & Ward, P. (2018). Defining cosmetic surgery. Australasian Journal of Plastic Surgery, 1(1), 37-45.

² Good medical practice: a code of conduct for doctors in Australia. October 2020. Medical Board of Australia

Pages 4 to 7 set out the draft capabilities for feedback

Domain 1 The cosmetic surgery practitioner

This domain describes the work expected of medical practitioners providing cosmetic surgery in assessing and caring for patients relating to their ability to perform clinical, non-clinical, and administrative roles and functions to ensure the provision of safe and high-quality care.

- 1.1 Assess patients for suitability for surgery, including using techniques to explore their intent and motivations and screen for psychosocial issues that would warrant referral to a psychologist or other expert practitioner, and refer to a psychologist or other mental health professional where there are indications of underlying issues.
- 1.2 Communicate effectively to obtain informed consent, including financial consent, with effective communication of risks and benefits and to decline the patient's request for surgery if deemed not in their best interests, note specific requirements for patients under 18 years of age, fully explain and adhere to a cooling off period for consent to surgery, and support patients when they are disappointed with outcomes or who have suffered complications.
- 1.3 Ensure the facilities in which they practice are appropriate for the procedures performed and that the equipment is suitable for safe patient care.
- 1.4 Implement and maintain processes to ensure effective infection control.
- 1.5 Demonstrate knowledge of, safely plan and perform a range of cosmetic surgery procedures, exercise effective clinical judgement, including understanding co-morbidities and protocols for managing complications and work in a technically safe manner.
- 1.6 Demonstrate core knowledge of surgical sciences relevant to cosmetic surgery, specifically
 - anatomy, pathology, physiology, pharmacology and microbiology relevant to cosmetic surgery, including, but not limited to genetics, principles and mechanisms of wound healing, mechanism of action of local and regional anaesthetic agents, and principles of general anaesthesia.
 - characteristics of implants, biomaterials and autologous tissue transfer
 - technical characteristics of imaging modalities, diathermy and relevant processes.
- 1.7 Demonstrate technical competence with relevant equipment and advances in best practice and incorporate into their practice where appropriate.
- 1.8 Arrange anaesthetic assessment and make peri and post operative plans in consultation with anaesthetists and deliver high quality postoperative care, including the provision of appropriate pain management, and refer for specialist care when needed and make discharge and follow up arrangements.
- 1.9 Follow protocols for managing complications, making prompt assessment of deteriorating patients, recognising and managing acute events, and complications e.g., anaphylaxis.
- 1.10 Make appropriate judgement about practising within their scope and demonstrated competencies and with consideration of having kept training up to date.

Domain 2

The cosmetic surgery practitioner as a professional and leader

This domain describes the work expected of medical practitioners providing cosmetic surgery in communicating effectively, demonstrating leadership and teamwork, and applying appropriate ethical and professional judgement and behaviour.

- 2.1 Demonstrate self-regulation of their practice, engage in continuing professional development aligned with scope of practice and comprehend the significance and obligations that go with the endorsement of the title related to the practice of cosmetic surgery, and contribute to the education and training of others.
- 2.2 Undertake interprofessional practice, work effectively in a team, and ensure all team members contribute to effective interprofessional practice.
- 2.3 Develop and maintain effective clinical governance systems to ensure high quality care is provided and ensure they are appropriately indemnified.
- 2.4 Undertake effective record keeping, including appropriate clinical photography, and describe the procedure undertaken in sufficient detail to enable another practitioner to take over postoperative care and/or operate on the patient in the future with an adequate understanding of what has been carried out.
- 2.5 Understand their professional obligation to report poorly performing practitioners and for notifications, engage in open disclosure for adverse events or outcomes and comply with obligations for reporting to the coroner.
- 2.6 Demonstrate ethical practice and balancing with corporatisation elements, managing personal interests, and maintaining patient centred care.

Domain 3

The cosmetic surgery practitioner as a health advocate

This domain describes the work expected of medical practitioners providing cosmetic surgery in engaging in holistic appraisal and effectively navigating the Australian healthcare system and medico-legal standards and processes.

- 3.1 Make a holistic appraisal of the health of the patient leading to effective assessment and advice on surgery options, assess the patient's understanding of the benefits and risks of cosmetic surgery, providing patient centred care at all times, and practice in a culturally safe manner, with awareness of biases and other influences and encouraging liaison and discussion with the general practitioner.
- 3.2 Understand components of appropriate advertising, including the role of social media and influencers, the legal standards, avoid targeting vulnerable groups, and contribute to the development of processes to ensure patients can easily identify endorsed practitioners.
- 3.3 Communicate processes to patients around e.g. notifications relating to their experience of cosmetic surgery, follow appropriate processes around notifications, refunds, revision surgery or compensation and understand the medical and legal perspectives of the contractual agreement with the patient.

Domain 4

The cosmetic surgery practitioner as a reflective and evidenced informed practitioner

This domain describes the work expected of medical practitioners providing cosmetic surgery in keeping their knowledge, skills, and capabilities up to date, building these into practice, and engaging in activities that create, maintain and improve high quality patient outcomes and care.

- 4.1 Reflect on their practice and monitor cosmetic surgery outcomes by understanding and participating in audit and service improvement.
- 4.2 Demonstrate evidence-based practice, including evaluating the latest techniques and technologies, and making changes to practice accordingly.
- 4.3 Engage in continuing professional development and maintain competence in cosmetic surgery.

Appendix 1: Specific aspects aligned with expectations of practitioners of cosmetic surgery – as set out in *Good medical practice: a code of conduct for doctors in Australia. (October 2020. Medical Board of Australia)*

2.1 Professional values

- Doctors have a duty to make the care of patients their first concern and to practise medicine safely and effectively. They must be honest, ethical and trustworthy.
- Good medical practice also involves practising in a way that is culturally safe and respectful;
 being aware of your own culture and beliefs and respectful of the beliefs and cultures of others,
 and recognising that these cultural differences may impact on the doctor—patient relationship
 and on the delivery of health services.
- Doctors have a duty to **keep their skills and knowledge up to date**, to develop and refine their clinical judgement as they gain experience, and contribute to their profession.

3.1 and 3.2 Providing good care

- **Assessing the patient**, taking into account the history, the patient's views, and an appropriate physical examination. The history includes relevant psychological, social and cultural aspects.
- **Referring a patient** to another practitioner when this is in the patient's best interests or as required by legislation.
- Recognising and working within the limits of your competence and scope of practice.
- Ensuring you have adequate knowledge and skills to provide safe clinical care.
- Maintaining adequate records.

4.5 Informed consent

Ensuring that your patients are informed about your fees and charges in a timely manner to
enable them to make an informed decision about whether they want to proceed with
consultations and treatment.

4.11 Adverse events

When adverse events occur, you have a responsibility to be **open and honest** in your communication with your patient, to **review** what has occurred and to report appropriately. When something goes wrong you should **seek advice** from your colleagues and from your professional indemnity insurer. Good medical practice involves:

- Recognising what has happened.
- Acting immediately to rectify the problem if possible, including seeking any necessary help and advice.
- Explaining to the patient as promptly and fully as possible in accordance with open disclosure policies, what has happened and the anticipated short-term and long-term consequences.
- Acknowledging any patient distress and providing appropriate support.
- Complying with any relevant policies, procedures and reporting requirements.
- Reviewing and reflecting on adverse events and implementing changes to reduce the risk of recurrence.
- **Reporting adverse events** to the relevant authority, as necessary

 Ensuring patients have access to information about the processes for making a complaint (for example, through the relevant healthcare complaints commission or the Medical Board).

4.12 Complaints

- Acknowledging the patient's right to complain.
- **Providing information** about the complaints system.
- Working with the patient to resolve the issue, locally where possible.
- Providing a prompt, open and constructive response, including an explanation and, if appropriate, an apology.
- Ensuring the complaint does not adversely affect the patient's care. In some cases, it may be advisable to **refer the patient to another doctor**.
- Complying with relevant complaints law, policies and procedures.
- Reflecting on the complaint and learning from it.

6.3 Delegation, referral and handover

• Ensuring there are arrangements in place for **continuing care** of patients when you are not available. These arrangements should be made in advance when possible, and communicated to the patient, other treating practitioners and any relevant facilities or hospitals.

10.5 Medical records

- Keeping accurate, up to date and legible records that report relevant details of clinical history, clinical findings, investigations, diagnosis, information given to patients, medication, referral and other management in a form that can be understood by other health practitioners.
- Ensuring that the records are sufficient to facilitate continuity of patient care.
- Making records at the time of the events, or as soon as possible afterwards.
- Dating any **changes** and additions to medical records, including when the record is electronic.
- Recognising patients' **right to access** information contained in their medical records and facilitating that access.
- Promptly facilitating the **transfer of health information** when requested by the patient or third party with requisite authority.

Retaining records for the period required by law and ensuring they are destroyed securely when they are no longer required.