



Cosmetic Surgery Accreditation Advisory Committee

The Australian Medical Council (AMC) is a national standards body for medical education and training. Its purpose is to ensure that standards of education, training and assessment of the medical profession promote and protect the health of the Australian community. It is Australia's designated accreditation authority for the medical profession, appointed by the Medical Board of Australia. The AMC develops accreditation standards, assesses medical programs against the standards and monitors programs to ensure they continue to meet standards through regular monitoring submissions.

Background Information

The [Independent review of the regulation of medical practitioners who perform cosmetic surgery](#), released in 2022, has led to new safeguards and regulation for cosmetic surgery.

In February 2023, Australia's Health Ministers approved a new Medical Board of Australia (the Board) [Registration standard: Endorsement of registration of registered medical practitioners for the approved area of cosmetic surgery](#) which sets out the Board's minimum requirements for:

1. granting endorsement of registration of registered medical practitioners for the approved area of cosmetic surgery
2. granting renewal of endorsement of registration of registered medical practitioners for the approved area of cosmetic surgery.


The registration standard came into effect on 1 July 2023.

Under the Medical Board of Australia's *Registration standard: Endorsement of registration of registered medical practitioners for the approved area of cosmetic surgery*, registered medical practitioners can apply for endorsement of registration for cosmetic surgery if they have been awarded a qualification approved by the Board or another qualification that in the Board's opinion is substantially equivalent to, or based on similar competencies to, an approved qualification. Approved qualification means a program of study accredited by the AMC and approved by the Board as providing a qualification for the purposes of endorsement for the approved area of cosmetic surgery.

The AMC's role is to set standards for cosmetic surgery education and training programs and accredit providers that meet those standards. The AMC is now establishing the Cosmetic Surgery Accreditation Advisory Committee for this process.

Cosmetic Surgery Accreditation Advisory Committee

The Committee's role is to oversee the establishment of the process for assessment and accreditation of programs of study leading to endorsement of registration for cosmetic surgery. The Committee is chaired by Associate Professor Jillian Sewell AM, and provides advice to the AMC Directors on the



accreditation of cosmetic surgery programs of study in Australia. The Terms of Reference of the Committee are attached.

The Committee's business includes:

- assessing applications for accreditation of programs of study and providers and making recommendations to AMC Directors as to accreditation
- constituting AMC accreditation assessment teams and overseeing accreditation activities including assessments and monitoring
- reviewing the implementation of the standards for accreditation and recommending changes, as required, to AMC Directors
- supporting improvement in medical education in Australia.

Committee members may be invited to join an accreditation team assessing a cosmetic surgery program during their term of office.

Members will be responsible for assessing applications and monitoring cosmetic surgery programs of study against the accreditation standards.


All members of the Committee are expected to:

- support professional accreditation, as a quality improvement and quality assurance mechanism, and to be willing to contribute to the review and development of the AMC processes
- be familiar with the [Standards for Assessment and Accreditation of Cosmetic Surgery Programs of Study](#) and the [Procedures for AMC Assessment and Accreditation of Cosmetic Surgery Programs of Study](#)
- be aware of current issues in medical education, and/or healthcare delivery
- be supportive of innovation and evolution in medical education and practice
- contribute to the fair and impartial assessment of medical programs by consistent application of accreditation standards and processes
- share information and experiences to encourage improvements in medical programs.

Time Commitment

Members of AMC Committees are appointed for four-year terms.

As this is a new AMC accreditation committee, the requirements for meetings have not been established. The meeting schedule will be determined by the number and timing of accreditation applications received. Three meetings a year is likely while the committee establishes itself.



Note: *The inaugural meeting of the Committee will be held in March 2024 with further details to be provided to members once appointments are confirmed.*

Committee will members have considerable reading material. They may contribute to the committee by leading discussion on an item, by contributing to the development of policy or procedures, and in the committee's own regular review of its work.

All committee members contribute to the review of monitoring submissions by accredited providers and may also contribute to AMC working parties and review groups.

AMC support to the Committee

The AMC:

- provides support, induction and training for members;
- pays a fee to members for participation in meetings of committees
- pays superannuation for individual members as required under Superannuation Guarantee legislation;
- arranges and meets the cost of necessary accommodation and travel; and the cost of meals and incidental expenditure such as taxi fares.

The AMC does not pay for time responding to correspondence (e.g. emails) from AMC staff.



Cosmetic Surgery Accreditation Advisory Committee

Terms of reference, membership and operations

Diversity and inclusion are considered essential to the AMC's continued success. The AMC values diversity of thought and experience and believes that an inclusive and collaborative culture underpins the accreditation and assessment of medical education. We celebrate and promote diversity as a key strength of our organisation.

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1. Terms of reference

1.1 Role

The Cosmetic Surgery Accreditation Advisory Committee has been established by the Australian Medical Council (AMC) to oversee the establishment of the process for assessment and accreditation of programs of study leading to endorsement of registration for cosmetic surgery and to perform functions in connection with standards of medical education and training, specifically standards of cosmetic surgery programs of study.

The committee's role relates to the following objects of the AMC:

- A. to improve health through advancing the quality and delivery of medical education and training associated with the provision of health services in Australia;
- B. to develop accreditation standards, policies and procedures for medical programs of study based predominantly in Australia
- C. to assess programs of study based predominantly in Australia leading to registration of the graduates or participants of those programs to practise medicine in Australia to determine whether the programs meet approved accreditation standards, and to make recommendations for improvement of those programs;
- D. to assess education providers based predominantly in Australia that provide programs of study leading to registration of the graduates of those programs to practise medicine in Australia, to determine whether the providers meet approved accreditation standards;
- H. to act as an external accreditation entity for the purposes of the Health Practitioner Regulation National Law;
- I. to advise and make recommendations to Federal, State and Territory governments, the Australian Health Workforce Advisory Council, the Australian Health Practitioner Regulation Agency, the Medical Board of Australia and State and Territory boards of the Medical Board of Australia, and any other state and territory medical regulatory authorities in relation to:
 - (i) matters concerning accreditation or accreditation standards for the medical profession
 - (ii) matters concerning the registration of medical practitioners.
- L. to do all such matters as are ancillary to, convenient for or which foster or promote the advancement of matters that are the subject of these objects.

1.2 Responsibilities

The Cosmetic Surgery Accreditation Advisory Committee:

- (i) Reviews and, as required, recommends development of accreditation standards including outcome (capability) statements and procedures for cosmetic surgery programs of study and the assessment of the programs and their education providers. It:
 - monitors the application of the approved accreditation standards and outcome (capability) statements for cosmetic surgery programs of study and recommends to Directors amendment to accreditation standards and procedures

- contributes to the development of guidelines and templates for accreditation processes.
- (ii) Oversees the AMC's accreditation activities for cosmetic surgery programs of study. It:
- appoints AMC assessment teams
 - considers data and information gathered by AMC staff on feedback from AMC assessment teams and education providers following each AMC accreditation assessment
 - considers reports and data in relation to the operation and application of the accreditation standards and procedures and recommendations by AMC staff to improve processes and standards
 - considers reports of findings by AMC teams, and reports and makes recommendations to the Directors on accreditation, revocation of accreditation, review and management of progress by accredited programs and their providers
 - monitors the continuing compliance of accredited programs and their providers with the approved accreditation standards.
- (iii) Supports improvement in medical education in Australia. It:
- sponsors and undertakes activities that promote improvement in medical education, with particular focus on cosmetic surgery, in response to evolving health needs and practices, and educational and scientific developments
 - cooperates and consults with AMC standing committees on matters of mutual interest.

1.3 Governance

The committee will conduct business according to AMC policies, accreditation procedures approved by Directors, and the *Code of conduct for Australian Medical Council accreditation*.

The committee:

- reports and makes recommendations to AMC Directors as required under section 1.2
- reports on its activities to each general meeting of the Members of the Council.

1.4 Delegated authority

The committee has authority to:

- (1) appoint accreditation assessment teams
- (2) complete routine monitoring of accredited cosmetic surgery programs of study and their providers.

The chair of the committee has authority to:

- (1) recommend to Directors short administrative extensions to accreditation of programs that meet the accreditation standards for periods of up to three months
- (2) approve the membership of a panel for selection of a committee member

(3) appoint substitute members of accreditation assessment teams.

2. Membership

The Cosmetic Surgery Accreditation Advisory Committee consists of those persons (not less than nine in number) from time to time appointed by the Directors.

The term of office of a member of the committee (other than the chair, in that capacity) may not exceed four consecutive years. The term of office of the chair of the committee may not exceed four consecutive years.

An appointment to an established position on the committee takes effect from the date of the vacancy in the position. For a new position, appointment takes effect from the date Directors make the appointment.

A member's term of office ends at the annual general meeting of the Council for the relevant year.

3. Chair

AMC Directors appoint the chair of the committee.

The chair of the committee may nominate a member to be the deputy chair of the committee. The appointment as deputy chair ends when that member's term on the committee ends. Appointment as deputy chair does not lead automatically to appointment as chair.

4. Operations

4.1 Appointment of members

The membership provisions and appointment processes are shown in Appendix A.

In selecting the first members of the Advisory Committee, the AMC will encourage expressions of interest from the members of the previous Cosmetic Surgery Project Advisory Group and Technical Advisory Group.

For a position that is filled after seeking recommendations from a nominating body, the AMC will seek nominations at least three months before the term of office ends. The AMC asks nominating bodies to provide at least two and desirably three nominations for each vacant position, to enable the AMC to appoint a committee with appropriate diversity.

For other positions, AMC staff will establish an open selection process, involving an invitation to submit expressions of interest, and short listing and interview by a selection panel, if required.

4.2 Meetings

AMC staff will set dates for committee meetings in consultation with committee members and based on the accreditation work program.

AMC staff will, in discussion with the committee chair, cancel meetings for which there is insufficient decision-making items to warrant a meeting.

The committee will meet as required by a mix of face-to-face meetings and meetings by videoconference (or other technology-enhanced platform).

Papers will be distributed electronically by the AMC's portal for distribution of papers.

A member who wishes to have a matter discussed at a committee meeting should advise AMC staff ten days before the meeting (the deadline for agenda items). Sufficient background information must be provided to allow for adequate discussion.

4.3 Quorum

The quorum of the committee is the whole number which is the next number after dividing the total number of appointed members by two. Members present in person includes participation in the meeting through any electronic means approved by the chair of the meeting.

4.4 Determination of decisions/recommendations

Voting: Where voting on an item is required, decisions will be based on a simple majority of members present with abstentions not counted in the total number of votes. Voting will be by show of hands, with alternate provisions for members participating by teleconference.

Items dealt with out of session by circular resolution: If the committee needs to make a decision outside a regular meeting, AMC staff will circulate the resolution and background papers to members. A deadline for response to the resolution will be provided. Where there is no response by the deadline, and no indication that the member is unavailable to respond, it will be assumed the resolution is agreed. Decisions will be made on the basis of a simple majority of members.

4.5 AMC secretariat

The AMC will select a staff member to support the committee, who will be the contact point for members of the committee. This AMC staff member is responsible for:

Supporting good practice and efficient decision making

- providing training and induction on AMC systems and processes
- managing communication with the Medical Board of Australia, Medical Council of New Zealand and education providers
- managing the flow of information and decision items between AMC committees

Organising meeting

- scheduling meetings and notifying committee members
- inviting specialists/subject experts to attend meetings when agreed by the chair
- issuing notices of meeting

Agenda papers

- consulting the chair on agendas
- preparing agendas and supporting documentation
- distributing the agenda and meeting materials five working days prior to the meeting

Meeting reports and follow-up action

- taking notes of proceedings and preparing minutes of meetings
- distributing the minutes no more than four weeks after the meeting.

A separate document sets out the AMC administrative responsibilities for organising travel and accommodation, and payment of fees.

5. Declarations of interest

Members of AMC committees must complete AMC standing notices of interest and must update these regularly.

AMC staff will make declarations of interest available at each meeting of the committee and will list in the agenda conflicts identified.

The agendas for AMC committee meetings will begin with a 'declaration of interests', in which members are requested to declare any additional personal or professional interests which might, or might be perceived to, influence their capacity to undertake impartially their roles as members of the committee.

Members will not vote on matters on which they have a declared personal or professional interest. The AMC will provide guidelines to each committee on the management of other common interests (e.g. faculty member or fellow of an accredited education provider in the field of specialty practice or a related specialty). The committee will decide how each member's interest in a particular item will be managed, for example by exclusion from the meeting or from discussion of the relevant item, within AMC guidelines.

All declared interests will be recorded in the committee minutes, as will the committee's decision in relation to the interest.

Where the chair is the subject of the conflict of interest, the deputy chair or a temporary chair appointed for that purpose will lead the discussion on the relevant item(s) of business.

6. Evaluation and review

The committee will establish a regimen for review and acting on outcomes.

The committee will report annually to Directors on outcomes of its evaluation and review processes.

The role and function of the Advisory Committee will be reviewed after three years of operation.

APPENDIX A: Membership of Cosmetic Surgery Accreditation Advisory Committee

Members may fill more than one category of membership.

| Membership category | Selection process: Nominations/Expression of interest (EOI)/Direct appointment |
|--|---|
| Chair – appointed by AMC Directors | Direct appointment, Chair of former Project Advisory Group |
| Deputy Chair – appointed by AMC Directors on advice of the Chair | Direct appointment, Chair of former Technical Advisory Group |
| At least one member of the Council | Identified by Chair from among the members of Council based on the needs of the Committee at the time |
| Aboriginal and/or Torres Strait Islander member | Nominations by the AMC Aboriginal and/or Torres Strait Islander and Māori Committee |
| One member with experience in setting professional standards drawn from the medical profession | Nominations by the Australian Medical Association |
| At least three members with expertise in accreditation of medical programs | EOI (initially from the Project/Technical Advisory Groups and then broadly, as/if required) |
| At least two members with experience in education and training in related medical and health disciplines (e.g. anaesthesia, intensive care, psychiatry, nursing) | EOI (initially from the Project/Technical Advisory Groups and then broadly, as/if required) |
| A member on behalf of the state/territory health jurisdictions | Nominations by the Health Chief Executives Forum |
| A member with experience in representing medical trainee interests | From the Council or EOI |
| At least two members with experience of representing health consumer perspectives | EOI (initially from the Project/Technical Advisory Groups and then broadly, as/if required) |
| A member who holds a senior position at a private health service in Australia | EOI |
| A nominee of the Australian Commission on Safety and Quality in Health Care (ACSQHC) | Nominations by the ACSQHC |