

RDAA submission to the Independent review of the regulation of health practitioners in cosmetic surgery consultation

About RDAA

The Rural Doctors Association of Australia (RDAA) is the peak national body representing the interests of doctors working in rural and remote areas, and their patients and communities.

RDAA's vision for rural¹ communities is simple – excellent medical care. This means high quality health services that are: patient-centred; continuous; comprehensive; collaborative; coordinated; cohesive; and accessible, and are provided by doctors and other health professionals who have the necessary training and skills to meet the needs of their communities.

Response

RDAA welcomes the opportunity to provide a submission to the Independent review of the regulation of health practitioners in cosmetic surgery.

It is unacceptably still the case that rural Australians experience inequities across all aspects of health care, including access to cosmetic medical and surgical procedure practitioners. For example, Bryant and Dean point out that “For plastic surgery services, there is very little understanding of what the aggregate needs of rural communities are, or how these needs vary by community. We know by anecdote that there is significant inequity in plastic surgery services and that rural and regional locations often have unfilled positions and diminished services. We note that 80 per cent of specialist plastic surgeons live and work wholly within the five largest Modified Monash level 1 (MM1) Australian cities.¹ Only 8.5 per cent of specialist plastic surgeons are permanently based outside those five cities.”²

In rural areas, not only are there fewer plastic surgeons, there is also a dearth of dermatologists. For example, the Australasian College of Dermatologists notes that in New South Wales (NSW) the dermatology workforce is “extremely maldistributed” with only 10 percent of the workforce (35 Fellows) practicing outside of metropolitan and greater Sydney, Newcastle and adjacent areas. These clinicians “are the main providers of specialised dermatology services to the 2.276,000 residents of regional, rural and remote NSW and the 414,000 residents of the ACT.”³ Some are located in Canberra, which means that there are even fewer practitioners in rural areas.

Anecdotal evidence suggests that demand for cosmetic medical and surgical procedures in rural areas reflects the growth in demand for these services in more urban areas, and that where such services are provided, they are well consumed.

¹ RDAA uses the term 'rural' to encompass locations described by Modified Monash Model (MMM) levels 3-7. Rural doctors are rural GPs, Rural Generalists and consultant specialists (resident and visiting) who provide ongoing medical services in these areas.

² <https://ajops.com/index.php/ajops/article/view/299/448> Viewed 05 April 2022

³

<https://www.parliament.nsw.gov.au/lcdocs/submissions/69799/0247%20The%20Australasian%20College%20of%20Dermatologists.pdf> Viewed 11 April 2022

RDAA makes the following comments for consideration:

- Rural people should have access to cosmetic medical and surgical procedures as close as possible to home.
- Better systems must be put in place to vet the qualifications of all those performing any cosmetic medical or surgical procedure, and ensure that they are working to their scope of practice.
- Under-qualified professionals practicing cosmetic medical and surgical procedures can be dangerous and inappropriate care may be provided to vulnerable individuals.
- Low risk cosmetic procedures could be provided by professionals that have undertaken appropriate, accredited training courses and have been assessed as competent to perform the procedures they are undertaking.
- More complex cosmetic medical and surgical procedures should be undertaken by trained, qualified, and credentialed clinicians. In principle, these clinicians do not have to be consultant specialists, but they should have undertaken accredited training courses that include a supervised hands-on component to reduce the risk of poor outcomes. Online-only courses are insufficient.
- Rural GPs and Rural Generalists, who have the appropriate training, advanced skills, accreditation and experience, can provide cosmetic medical and surgical procedures within their scope of practice that address some of the demand issues.

These rural doctors also have a key role in essential skin cancer prevention, detection and early intervention services, including removal of suspicious skin lesions before it becomes a clinical necessity. "Diagnosis and treatment of skin lesions are essential skills for primary care practitioners."⁴

Any regulation changes must not restrict the scope of practice of rural GPs and Rural Generalists who provide essential skin cancer prevention, diagnosis and early intervention services, and ensure that they are not disadvantaged as an unintended consequence.

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⁴ Australian College of Skin Cancer Medicine, <https://www.skincancercollege.org> Viewed 05 April 2022