

SUBMISSION

Wednesday, 28 February 2024

AMA Submission in response to proposals for regulation of health practitioners who perform and who advertise non-surgical cosmetic procedures

AhpraConsultation@ahpra.gov.au

The AMA welcomes the opportunity to respond to the consultation being undertaken by Ahpra and the Boards on proposed changes to the guidelines that apply to practitioners who perform and advertise non-surgical cosmetic procedures.

The AMA has generally welcomed the measures taken by regulators in relation to improving standards in the cosmetic surgery industry – noting that the full impact and benefits of their implementation will take time to manifest.

Procedures undertaken in the rapidly expanding aesthetics industry similarly need to be subject to increased scrutiny and oversight. The proliferation of practitioners performing these procedures has left consumers at significant risk of harm, particularly where practitioners are under or unqualified. Premises are being established in easy to access locations such as shopping centres and extensive promotion is occurring on social media.

AMA members report increased instances of being required to treat patients who have been harmed – sometimes quite seriously – by non-surgical procedures. These procedures were incompetently performed and/or performed in inappropriate facilities, often by under-qualified practitioners.

Consistent with our support for the tightening of the regulation of cosmetic surgery, the AMA broadly supports these proposed measures, which will provide greater protections for consumers undergoing non-surgical cosmetic procedures without unduly restricting access to procedures being provided by those practitioners who are doing the right thing.

In relation to the consultation documents, the AMA makes the following comments, which pertain to both the proposed Guidelines for Registered Nurses and Nurse Practitioners, as well as to Registered Health Practitioners who perform non-surgical cosmetic procedures.

Requirement for non-medically qualified practitioners to assess suitability for the non-surgical cosmetic procedure

The proposed guidelines require an assessment of the patient's suitability for the procedure to be undertaken, including an assessment for body dysmorphic disorder (BDD). In the case of RNs and NPs this includes the requirement for the use of an evidence-based and validated

screening tool. Given the term “assessment” usually has specific connotations within the fields of psychiatry and psychology, it may not be realistic for other professions whose training and scope of practice does not cover significant psychiatric disorders to be making such assessments.

The AMA would support the use of the following words, which we understand are being proposed by the Australian Society of Plastic Surgeons:

“the health/medical practitioner who will perform the surgery/cosmetic procedure/cosmetic injection must evaluate the patient for their suitability for the surgery/procedure, including whether there may be any underlying psychological condition which may make them an unsuitable candidate...etc”.

Additionally, we note that non-medical practitioners providing non-surgical cosmetic procedures often work as part of a team which may include medical practitioners. As the Medical Board Guidelines for medical practitioners who perform cosmetic surgery and non-surgical cosmetic procedures require the medical practitioner to assess a patient for suitability, the requirements on non-medical practitioners to also undertake an assessment of the suitability of a patient would appear to duplicate the requirement already imposed on the medical practitioner.

The AMA would suggest that the requirement for a similar assessment by a non-medical practitioner is not necessary where the non-medical practitioner can satisfy themselves that a medical practitioner has already made that assessment. The requirement for the non-medical practitioner could be changed to a requirement that they have taken steps to ascertain that the assessment of the patient in relation to the proposed procedure has already been undertaken by the medical practitioner.

Medicines and injectables

The AMA notes and supports the requirement in the proposed guidelines that practitioners need to have regard to the relevant poisons legislation in force in each jurisdiction, including the limitations on which health practitioners are legally able to prescribe the Schedule 4 medicines and injectables used in the aesthetics industry. Additionally, the AMA considers that these sections would be further enhanced by adding reference to the relevant parts of the MBA's revised Telehealth guidelines, in particular:

Prescribing or providing healthcare for a patient without a real-time direct consultation, whether in-person, via video or telephone, is not good practice and is not supported by the Board.

This includes asynchronous requests for medication communicated by text, email, live-chat or online that do not take place in the context of a real-time continuous consultation and are based on the patient completing a health questionnaire, when the practitioner has never spoken with the patient.

Any practitioner who prescribes for patients in these circumstances must be able to explain how the prescribing and the management of the patient was appropriate and necessary in the circumstances.

Guidelines for registered health practitioners who advertise non-surgical cosmetic procedures (including medical practitioners).

The AMA considers these proposed Guidelines are generally appropriate.

The challenge will be in ensuring sufficient resources are available to support the enforcement of these Guidelines given the high number of practitioners in this industry and the propensity of those on the fringes of the industry to ignore existing regulation.

Conclusion

The AMA is broadly supportive of the proposed guidelines subject to the following areas being addressed:

- changing the language to more closely reflect the training and scope of practice of nurses and other health practitioners in relation to assessing a patient's suitability to undergo a cosmetic procedure
- Clarifying whether nurses and other health practitioners need to assess a patient for suitability where a medical practitioner is part of the team and has already completed this assessment
- Ensuring that nurses and other health practitioners comply with regulations regarding Schedule 4 medicines and suggesting that the relevant parts of the MBA telehealth guidelines be adopted in the guidelines for non-medical practitioners.

Contact

[REDACTED]