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To whom it may concern

### **Consultation – cosmetic medical and surgical procedures**

Thank you for the opportunity to comment on the *Draft supplementary guidelines on cosmetic medical and surgical procedures for 'Good Medical Practice: A code of conduct for doctors in Australia'* (the Guidelines). We welcome the development of the Guidelines which describe the additional standards expected of doctors who perform cosmetic medical and surgical procedures.

#### **About us**

The Health Quality and Complaints Commission (HQCC) is an independent statutory body dedicated to improving the safety and quality of healthcare in Queensland. We regulate health services under the *Health Quality and Complaints Commission Act 2006* (the Act).

We work with healthcare providers, consumers and other organisations to prevent patient harm and improve service quality. To achieve our aim of better healthcare for Queenslanders, we:

- manage complaints about health services
- investigate serious and systemic issues and recommend quality improvement
- monitor, review and report on healthcare quality
- identify healthcare risks and recommend action
- share information about healthcare safety and quality, and
- promote healthcare rights.

#### **Analysis of our complaints**

We have recently analysed 115 healthcare consumer complaints about cosmetic medical and surgical procedures received by the HQCC between 1 July 2006 and 31 December 2011. Our analysis suggests:

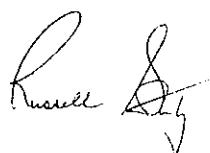
- Complaints about cosmetic medical and surgical procedures account for a relatively small proportion (approximately 1%) of all complaints received by us however these complaints were often serious, with 77% involving patient-reported harm such as post-operative complications (infection, scarring, pain etc.) and the need for further treatment or surgery.
- The top five reasons for complaints about cosmetic medical and surgical procedures were:
  - disappointed/dissatisfied with outcomes/results of surgery
  - concerns about further/corrective surgery to fix mistakes/issues
  - perceived lack of post-operative/follow-up care by the doctor
  - concerns with fees and charges
  - perceived lack of consent/information about complications.

We support the introduction of the Guidelines to improve the safety and quality of services provided to consumers of cosmetic medical and surgical procedures. We offer this submission (Attachment 1) for the consideration of the Board. Our submission has been prepared in consultation with our consumer and clinical advisory committees, and considers the issues identified through our analysis of healthcare consumer complaints about cosmetic medical and surgical procedures.

If you have any questions about this submission, please contact us on (07) 3120 5999 or email [info@hqcc.qld.gov.au](mailto:info@hqcc.qld.gov.au).

We wish you well with the consultation process and look forward to the finalisation of the Guidelines.

Yours sincerely



**Adjunct Professor Russell Stitz**  
**Commissioner**



**Adjunct Professor Cheryl Herbert**  
**Chief Executive Officer**

## Attachment 1

### **Submission on Draft supplementary guidelines on cosmetic medical and surgical procedures for ‘Good Medical Practice: A code of conduct for doctors in Australia’**

No	Reference	Comment	Suggested change or amendment
1.	Providing good care (page 1)	As identified in our analysis of healthcare consumer complaints, and in other national and international reviews <sup>1,2,3,4</sup> , ‘disappointment or dissatisfaction with outcomes or results of surgery’ is one of the most significant issues associated with cosmetic medical and surgical procedures.	We strongly recommend that the Guidelines address the issue of consumer expectations carefully, for example at 2(b) ‘Assessment should include... A thorough exploration of the person’s expectation of the requested surgery/procedure compared with an honest account of the range of possible outcomes to ensure the patient’s expectations are realistic.’
2.	Providing good care – children and young people (page 2)	It is unclear which of the five supplementary guidelines in relation to adults should be supplemented or replaced with the three supplementary guidelines for children.	We suggest the section be rewritten in full as a stand-alone section so that supplementary or replacement guidelines for children and young people are made explicit.
3.	Providing good care – children and young people (page 2)	We note that two jurisdictions in Australia, including Queensland, have legislation which restricts the carrying out of cosmetic medical and surgical procedures on children for non-medical reasons.	We suggest the Guidelines include a caveat to this effect such as ‘All cosmetic medical and surgical procedures performed on children and young people must be in accordance with relevant laws in your jurisdiction’.
4.	Providing a suitable patient management plan (page 2)	In relation to standards and infection control, the National Framework recommends ‘No matter where a medical practitioner undertakes cosmetic medical and surgical procedures, infection control and other standards should apply’.	We suggest this be included as a supplementary guideline, for example ‘All treatment and care provided must be in accordance with relevant standards and guidelines, including infection control’.
5.	Providing a suitable patient management plan (page 2)	In relation to follow-up care, the National Framework recommends that ‘the medical practitioner should be available personally or have a formal arrangement with another suitably qualified practitioner who has full access to the patient’s history and these arrangements should be made known to the patient’.	We suggest supplementary guideline 3 in this section be amended to more closely align with the key elements of this recommendation from the National Framework.
6.	Providing good patient care (page 3)	Analysis of our complaints has identified instances of medical practitioners misrepresenting their qualifications when advertising cosmetic medical and surgical procedures.	This issue could be addressed with a third supplementary guideline in this section such as ‘Use of titles, qualifications, and memberships should not imply that the practitioner is more skilled or has greater experience than is the case’.

<sup>1</sup> Australian Health Ministers’ Advisory Council. Cosmetic Medical and Surgical Procedures: A National Framework – Final Report. Australian Health Ministers’ Conference; 2011.

<sup>2</sup> New South Wales Department of Health. The Cosmetic Surgery Report: Report to the NSW Minister for Health. New South Wales Department of Health; 1999.

<sup>3</sup> Healthcare Commission. Provision of cosmetic surgery in England - Report for the Chief Medical Officer Sir Liam Donaldson. Healthcare Commission; 2005.

<sup>4</sup> Green S. Review of independent sector cosmetic surgery claims. Medical Defence Union Journal. 2006 Dec;22(2):23-24.

No	Reference	Comment	Suggested change or amendment
7.	Working with patients - informed consent (page 3)	Refer to point 1 above regarding the importance of addressing issues associated with consumers' expectations.	We suggest supplementary guideline 1(b) be strengthened for example 'A <i>realistic account of the range of possible outcomes of the surgery/procedure, including long-term outcomes</i> '.
8.	Working with patients - informed consent (page 3)	Our analysis of complaints about cosmetic medical and surgical procedures suggests consumers frequently have 'concerns with fees and charges'.	We suggest the Board consider elaborating on the issue of 'informed financial consent', for example by elaborating on providing information about 'total costs' at 1(f).
9.	Working with patients - informed consent (page 3)		In accordance with the National Framework, we suggest written information should also be provided about: <ul style="list-style-type: none"> <li>• the patient's responsibility to truthfully disclose their medical history</li> <li>• other independent consumer information resources.</li> </ul>
10.	Working with patients - informed consent (page 3)	We believe complaints management is a critical element of best practice health service delivery which is relevant at all stages of care, not only at initial consultation.	We suggest supplementary guideline 1(i) about complaints management be made a separate guideline (i.e. not included under the guideline about initial consultation).
11.	Professional behaviour (page 3)	The National Framework recommends: <ul style="list-style-type: none"> <li>• 'The offering of cosmetic medical and surgical procedures as a prize be prohibited (noting that this had been achieved under Lotteries legislation in three jurisdictions)'.</li> <li>• 'When the National Law is next subject to substantive amendment, consideration be given to the need to further strengthen its provisions to prohibit the offering of gifts and inducements to attract people to undergo cosmetic medical and surgical procedures, and particularly to prohibit time-limited discounts'.</li> </ul>	We suggest the Board consider including an explicit supplementary guideline in this section, such as: <p>'You should not offer:</p> <ul style="list-style-type: none"> <li>• gifts or inducements to attract people to undergo cosmetic medical and surgical procedures</li> <li>• cosmetic medical and surgical procedures as a prize</li> <li>• time-limited discounts on cosmetic medical and surgical procedures.'</li> </ul>

<sup>5</sup> Medical Board of Australia. Guidelines for advertising of regulated health services. Medical Board of Australia; 2010.