



AUSTRALIAN MEDICAL
ASSOCIATION
ABN 37 008 426 793

T | 61 2 6270 5400
F | 61 2 6270 5499
E | ama@ama.com.au
W | www.ama.com.au

39 Brisbane Ave Barton ACT 2600
PO Box 6090 Kingston ACT 2604

AMA Submission to Draft National Safety and Quality Cosmetic Surgery Standards

Email: cosmeticsurgery@safetyandquality.gov.au

The AMA supports the development of the draft National Safety and Quality Cosmetic Surgery Standards as part of a broader suite of reforms that are being introduced to address concerns about the performance and outcomes of cosmetic surgery. It is important that these reforms improve standards and protect the public. It is equally important that an appropriate amount of time is given to properly consult on these standards. Like many of the other consultations in this reform process, the window to comment on these standards has been insufficient.

Cosmetic surgery may take place in a range of types of facilities extending from those operated by single or small group practitioners that specialise in cosmetic procedures alone to those more complex day surgery centres and hospitals where facilities and surgeons may incorporate cosmetic procedures into lists of other procedures undertaken at that facility.

The AMA notes that a main issue identified in reporting on unacceptable patient outcomes from cosmetic surgery was the performance of surgical procedures – often major – in facilities owned by the practitioner, with no independent oversight of scope of practice. Major hospitals and responsible day hospitals have independent medical directors overseeing clinical governance. We welcome moves to improve the clinical governance in all facilities where cosmetic surgery is to be performed.

As facilities will be assessed against the proposed standards once they are adopted, they will form an important part of the regulatory framework and it is important that the regulatory framework strikes an appropriate balance between ensuring all facilities meet acceptable minimum standards without at the same time imposing an additional regulatory burden on those facilities already meeting, if not exceeding existing standards.

The AMA welcomes the intention set out at page 4 of the Consultation document indicating that the Commission will map the existing National Safety and Quality Health Service (NSQHS) Standards with the new National Safety and Cosmetic Surgery (NSCS) Standards to ensure that facilities already meeting the NSQHS Standards will only have to meet the additional requirements of the NSCS Standards to be taken as meeting both sets of Standards.

We note that further work is required with states and territories to develop a National Licensing Framework for Cosmetic Surgery which would accredit facilities against these standards. The AMA is supportive of such a framework, noting the focus should be on facilities currently without existing accreditation.

The AMA would generally not support additional administrative burdens being imposed on facilities where there have been no problems. An unintended consequence of this may be that facilities which were already compliant and hosting safe procedures would limit their operations resulting in reduced access to services by patients. This is why it will be important that sufficient time is available to address issues being raised by existing facilities and their representatives – without at the same time compromising patient safety.

The AMA appreciates that the Australian Commission for Safety and Quality in Health Care (ACSQHC) has been given a very short time-frame by Health Ministers to develop these Standards and the associated licensing framework. Patient safety is of paramount importance and these Standards and the licensing framework being developed for implementation by jurisdictions needs to be as well as timely.

However, the AMA has become increasingly concerned that the many regulatory entities involved in implementing the broad suite of reforms to cosmetic surgery appear to be acting hastily and without careful coordination. While there is an undoubted urgency in addressing the shortcomings in the cosmetic surgery industry, there is also a significant risk that hasty and poorly considered measures in response may result in poor medical practice which will undermine the intent of these reforms.

MAY 2023