



The Australian Society of Dermal Clinicians (ASDC)

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2nd of July, 2021

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Re: Feedback on SHB60219 Advanced Diploma of Skin Therapy Draft 2

The Australian Society of Dermal Clinicians (ASDC) is writing to provide feedback on the above mentioned program.

We provide this feedback as an industry body representing professional skin health practitioners from various industry backgrounds and educational levels, including vocational and higher education. Our members have also provided feedback that we have collated from their perspectives as industry employers of potential graduates of this program and industry peers working within the aesthetic medical sector.

As an industry organisation, we advocate for safety and standards of care for consumers receiving skin therapies and the provision of therapy utilising an evidence-based approach. We also support the continued education and increased professionalisation of the discipline of skin health and therapy.

We acknowledge that the aesthetic medical /cosmetic sectors are a very lucrative (billion-dollar) industry that is currently poorly regulated. This has created significant risks to the public with untrained practitioners operating devices and using techniques that require more highly developed expertise and knowledge as well as to operate within an evidence-based paradigm. We understand that the intention of developing this qualification has been to reduce the risk of entirely un-trained practitioners operating on the public. The ASDC do, however, have concerns after reviewing the proposed program and its unit of study.

Further, the ASDC was not contacted or invited to be involved in the consultation or advisory of this program, which is quite unfortunate. We would be able to provide expert feedback as representatives with a high level of understanding of the skills, expertise as well as the breadth and depth of knowledge required for delivering skin therapies with the goal of safe practice. Consequently, we have provided critical areas for your perusal before the program is further put forward for endorsement. This feedback is provided below.

Provision of skin “health services”

Skin “health services” are those that claim, or are able to, alter the structure or function of the skin. This may be for cosmetic purposes or to correct dysfunction, disorder or disease. These services no longer act superficially on the skin, nor are the effects solely cosmetic, temporary and completely reversible. They have the capacity to cause longer-term, and in some cases, more permanent alterations. Such examples include therapies aimed to increase collagen density of the skin or those that alter, or reduce, the presence of pigment or vascularity. These therapies are associated with greater risk due to their mechanism/s to cause side effects and adverse events that may also be more significant and long term. Therefore, practitioners who perform skin “health services” are held to higher standards of clinical governance, risk assessment, prevention and management, standards of care, and nationally legislated codes of conduct because they are a greater risk to public safety.

This program, including its units of study, is developing a qualification for skin “health” practitioners. So, therefore, we need to bring to your attention some of the possible areas that this program will leave education providers and graduates at risk if not further considered as this is crossing into the realm of training skin “health” professionals.

Pre-requisite and program body of knowledge

Practitioners performing therapies with the potential to alter the structure and function of the skin, using modalities such as intense pulsed light (IPL) and skin needling, require knowledge of the skin and the individual in both healthy and complex situations. This is to understand risks, interactions and complications associated with some of these therapies seen in specific patient populations.

These techniques potentially affect or alter skin integrity and function. Therefore an understanding of when and when not to treat is vital. It is impossible to separate these into “cosmetic” or “health” applications, as techniques will have the exact mechanism regardless. Therefore, more knowledge than just basic skin biology is needed. Knowledge of common skin conditions, disorders, and other underlying conditions and comorbidities commonly seen in the Australian population are essential, as is understanding how other medical and holistic management strategies can impact skin health when combined with these strategies.

Qualifications such as the Diploma of Beauty Therapy prepare students and graduates for performing superficial, cosmetic skin treatments on healthy populations. They do not prepare students adequately for the level of critical thinking and risk assessment or management required to conduct health services and manage all possible side effects or complications within their scope of practice.

Our professional body comprises clinical practitioners, educators and industry representatives. In our opinion, the learning objectives and applied competency outcomes are incredibly ambitious concerning the duration and AQF level of study of this program, pre-requisite study required and experience for entry into the proposed skin therapy program outlined in Draft 2. Further, our view is that it is a significant risk to not prepare graduates sufficiently for the reality and spectrum of risk associated with performing these techniques on the broader Australian public.

A qualification that merely concentrates on the applied techniques and not on the underpinning scientific principles is quite dangerous and irresponsible. It promotes an attitude that these procedures are simple and without risk, which is not accurate. Understanding the mechanism of the procedures, and identifying and managing risks and complications is a critical foundational element

in conducting these therapies. Therefore, we strongly recommend returning to the pre-requisite of a Diploma of Beauty Therapy prior to commencing the Advanced Diploma of Skin Therapy. Each of these qualifications should be twelve months duration each.

The requirement of two (2) years duration with the first qualification focusing on the skin and clients in healthy populations, and the second qualification focusing on the more complex client and skin scenarios is more realistic and aligned with other educational pathways that effectively prepare students to manage clients safely.

The following key areas are required to prepare these skin health professionals for professional practice and should be considered for inclusion in the Advanced Diploma of Skin Therapy.

- Public health and working inter-professionally to provide skin health therapies.
- Scientific underpinning knowledge for the mechanism of treatment modalities.
- Evidence for practice.
- Skin biology in health and disease.
- Wound/injury management.
- Psychology and understanding of reasons for seeking cosmetic/aesthetic procedures and common disorders that would preclude treatment.
- Work, Occupational Health & Safety, licencing requirements, working with non-ionising radiation, infection control and compliance with health regulations, working with chemicals and controlled substances such as topical anaesthetics.

Scope of practice

Scope of practice is relevant to knowledge and expertise and is defined through education, training and experience. It requires the ability to evaluate and apply critical thinking to scenarios around client and procedure risk factors to identify, prevent and manage the complications that will commonly arise during routine treatment and clinical practice.

Scope of practice within the field of skin health and therapy is essential. This qualification will play a role in the commitment of the industry to self-regulate when national and standardised regulation is lacking. The ASDC supports making the scope of practice clearer through more robust and rigorous formalised education and training pathways for practitioners providing skin health therapies.

The ASDC, as a professional body, wants to make our position clear on the scope of practice for graduates of this proposed program in support of their professional careers. In this instance, the scope of practice would be limited to the formal education and training received during the program. Any techniques applied outside of this education would be considered outside of the graduate's scope of practice and would need to be recommended to more appropriately trained and experienced skin health professionals.

The ASDC advocates for all skin health professionals to work together to achieve optimal patient outcomes. Referring to more appropriately educated and experienced skin health professionals is necessary when the presenting skin concern, symptoms or client risk factors are outside of the scope of the treating practitioners education. This factor should be re-iterated within this program, with a clear recognition of where the individual's scope of practice starts and ends when performing these therapies. Due to this qualification's duration, depth and breadth, the scope of practice will be more

limited in the scenarios that graduates can perform safely. Pathways currently exist in education and training to expand this scope of practice.

Governance and standardisation

It is the position of the ASDC that those that have expertise in the governance requirements for working as skin health practitioners should inform and guide the practice of skin health professionals. As beauty therapy is not currently held to these standards, it will be imperative to seek guidance to ensure that course and module development are informed by policy and governance requirements. This ensures that it complies with current standards of practice, regulatory and licencing requirements for skin health practitioners.

Education and training resourcing

The feedback that we provide any program within the realm of skin health that comes before us for feedback in development or consultation with accrediting bodies such as TEQSA includes commentary regarding barriers to meet education facilities and staffing requirements. Benchmarks currently exist for the delivery of programs in "skin/dermal/aesthetic" programs, and it would be prudent to adhere to similar requirements for endorsement and ongoing accreditation of providers of this program.

Educators should hold an AQF higher than the qualification and have relevant clinical and academic experience to mentor skin health professionals. This is extremely important, particularly for understanding and correct interpretation of the scope of practice and standards of care. Facilities and clinical equipment must comply with higher cleaning and infection control standards, Occupational Health & Safety, and storage of chemicals than usually seen in beauty environments.

Graduate outcomes and possible implications for a diploma level qualification.

We also feel the need to highlight some of the possible ethical implications for implementing this program and considerations for graduates of this program, particularly regarding expanding the scope and earning potential.

At this particular time, the Hair and Beauty award does not recognise beyond a level 6 Beauty Therapist or any other titles used within the industry, including Skin or Dermal Therapist. Currently, a graduate of this program may not expect to earn any more after completing this advanced diploma program than they do as a level 6 Beauty Therapist. Many businesses in the industry do pay above the award rate that aligns with extra training with more significant revenue generated for the business. Dermal Clinicians with a Bachelor Degree, depending on the environment they are working within, are viewed as Allied Health Professionals and may fall under different awards and expectations. Their pay rate can increase in levels based on duties, experience, and degree of autonomy.

The ASDC perspective is that this qualification could potentially be used to exploit the demand for these procedures with less qualified and lower-paid employees. We feel it necessary to highlight the possible risks and ethical considerations for both businesses and employees in this scenario. This is especially a risk if the scope of practice is not clearly defined and industry endorsement and support beyond beauty and laser clinics are not sought.

In summary, the ASDC advocate for safety and standards of care for consumers receiving skin therapies and provision of therapy with an evidence-based approach. We support the continued education and increased professionalisation of the discipline of skin health and therapy.

We have provided this feedback as an industry body representing professional skin health practitioners from various industry backgrounds and educational levels, including vocational and higher education. Our members have provided feedback that we have collated from their perspectives as both industry employers of potential graduates of this program and industry peers working within the aesthetic medical sector.

We trust that you will consider and address the above feedback in future developments of this program or prior to it being prepared for endorsement.

Kind regards



Jennifer Byrne

Chairperson of the Australian Society of Dermal Clinicians.