



21 September 2012

Mr Bruce Cooper  
General Manager  
Intelligence, Infocentre and Policy Liaison Branch  
Australian Competition & Consumer Commission  
GPO 3131  
Canberra ACT 2601

By email: [phireport@acc.gov.au](mailto:phireport@acc.gov.au)

Dear Mr Cooper

### **ACCC Report to Senate on Private Health Insurance**

Thank you for the opportunity for the Australian Orthopaedic Association (AOA) to respond to the consultation letter dated 3 September 2012 regarding the preliminary issues identified by the ACC in preparing a report to the Australian Senate on private health insurance. Specifically, you seek to identify circumstances where the distinction by private health insurers between providers of health care offering similar services is not justified.

AOA would like to particularly respond to the example used on page 2 '*Similarly, foot and ankle surgery performed by a podiatric surgeon is not usually covered by health funds, yet the same type of procedure carried out by an orthopaedic surgeon is fully covered.*' As an aside, can I note that your usage of this example seems to indicate an already formed view, instead of a willingness to investigate the facts behind the matter – something that is concern to us.

For background, AOA is the peak professional body for orthopaedic surgeons in Australia. AOA provides high quality specialist education, training and continuing professional development. AOA is committed to ensuring the highest possible standard of orthopaedic care and is the leading authority in the provision of orthopaedic information to the community and government. AOA has been providing specialist orthopaedic education and training for over 75 years, including in the sub-speciality of foot and ankle surgery. Therefore AOA believes it can provide well-considered and authoritative advice in reference to the standards required for training and education to undertake foot and ankle surgery.

First of all, as an overarching statement, I wish to express the AOA's view that the distinction between orthopaedic surgeons and podiatrists who perform foot and ankle surgery is justified, by virtue of the vastly different training and accreditation regimes that apply to these different professional groups.

We support the actions of the Health Funds purely because we believe individuals using the title 'podiatric surgeon' in Australia are not adequately trained and qualified to a standard that would place them on equal standing to that of our members or podiatrists trained and accredited in foot and ankle surgery to US standards.

Can I stress this is not a 'turf war'. Podiatrists provide important health services to their clients, and if trained to comparable and independently accredited standards, they should be permitted to perform some types of invasive surgery.

In reference though to the current distinction between different providers of the same or similar services, the AOA would provide the following information.

One of the fundamental tenets of national registration scheme was that all suppliers of surgical services would be to the same standards.

Clearly, under the actions of the Podiatry Board of Australia, there are now no less than four standards of surgeons available for foot and ankle surgery.

These are:

- Tier 1 – Royal Australasian College of Surgeons/AOA Foot and Ankle trained surgeons,
- Tier 2 - individuals who are trained under the American Council of Podiatric Medical Education (CPME) process,
- Tier 3 and Tier 4 - the Australian College of Podiatric Surgeons and University of Western Australia, although the order can't be ascertained as the process by which people attain their fellowships is not transparent and, in the UWA case, no individual has completed this training as yet.

A basic comparison of educational, training and accreditation standards is attached for your information and confirms the significant variations in the standards of education of these individuals.

The argument for podiatric surgery to be accepted is based on evidence that good outcomes are available in the US. It is generally known that no podiatrist in Australia is capable of practicing in the United States if they do not have CPME accreditation and, indeed their entire education is not sufficient to see them gain entry into a Podiatric School in the USA.

They completely lack recognised biochemistry, physiology, pharmacology and pathology fundamentals which are required to enter into podiatry school in the United States.

The decision by the Australian Podiatry Board to choose ANZPAC to be the accrediting agency is fundamentally flawed given it has no qualified medically trained and surgically trained members.

As stated, this is completely contrary to the goals of the National Registration which promised that all providers of the same services would do so to the same standard.

Our strongly held view is that until the training of podiatric surgeons is independently supervised and monitored by the AMC (as all other surgical groups are ) or the CPME, that the exclusion provided to Health Funds to decline to pay for Podiatric Surgery be permitted to continue indefinitely.

Finally, we contend that the use of the title 'surgeon' by individuals who are not medical practitioners is deeply misleading to the average consumer and should be

an area of concern to the ACCC given its responsibilities for consumer protection and awareness.

We believe there is widespread community support for government to take definitive action to protect the title surgeon within a healthcare context. The title should only be available to those individuals who have undertaken independently accredited surgical training. Within Australia independent accreditation for surgical and medical training is undertaken by the Australian Medical Council.

Proof of this community attitude can be evidenced by the results of a recently commissioned survey undertaken by Galaxy, using the same sample size and methodology they use for their other highly regarded survey work. The results, in summary, demonstrate overwhelming community support (93%) for legislative protection of the title 'surgeon'.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Graham Mercer', written in a cursive style.

**Dr Graham Mercer**  
**President**

**Comparison of qualifications and training – Australian Orthopaedic Surgeons / Australian Podiatric Surgeons/ US trained Podiatric Surgeons**

Standard of Training / Experience	Orthopaedic Surgery (Australia)	Podiatric Surgery (Australia)	Internationally – USA CPME
<b>Undergraduate Qualification</b>	Most Australian universities require students to obtain a separate undergraduate degree prior to commencing medical studies – <b>3-4 years.</b>	Undergraduate podiatry degree <b>3-4 years.</b>	Requires completion of MCAT basic sciences course – <b>4 years.</b> Common to all Medical pre-graduates i.e. medical doctors, podiatrists, osteopaths, emergency response paramedics.
<b>Graduate Qualification</b>	Qualification as a medical practitioner – <b>5 years MBBS.</b>	<b>Completion of a Master’s Degree</b> – although NOT required to be in Podiatric Surgery - it can be on any subject (examples include a degree conferred by the Department of Physiotherapy at Curtin University). Furthermore, a large percentage of ACPS members do not have this Masters Degree which is nominally required by their training program	<b>Completion of Doctorate</b> in Podiatry requiring <b>4 years full time study.</b> Assessment by the National Board Of Podiatric Medical Examiners, which require attendance at a CPME accredited educational facility
<b>Post Graduate Training / Experience</b>	<ul style="list-style-type: none"> <li>• <b>Residency of 2 years minimum</b> During which time General surgical, Medical , Psychiatric Paediatric and ICU terms mandatory, acting as Doctor in the Department not as supernumerary observer.</li> <li>• <b>Minimum of five years</b> post graduate surgical training and clinical hands on experience with daily contact with mentors, No other job other than training position, with structured exams throughout course, Milestones assessed and reviewed, Weekly presentations to</li> </ul>	Receive little or no clinical hands on surgical training as there are no hospital based accredited training posts (positions). Their attendance in ‘Hospital Rotations’ in medical terms do not see them taking clinical responsibility or decisions. If undertaken at all, it is in the role of observers.	<ul style="list-style-type: none"> <li>• <b>Residency of 2 years</b> allowing specialisation in podiatry surgery involving emergency and elective surgical practice in a residency (American term for registrarship in Australia). - Requirement to undertake a proscribed volume and diversity of cases and procedures to be performed by the resident under appropriate supervision.</li> <li>• Residency inspected and certified as high quality by the CPME, with final</li> </ul>

	<p>Consultants, on call duties and Emergency work. Trauma work done daily and Bone School lectures and trauma workshops each week.</p> <ul style="list-style-type: none"> <li>At completion of training a week long intensive examination is run with strict protocols on standards and overseas registered Orthopaedic Surgeons are expected to sit and pass these exams.</li> </ul>		<p>exit exams independently applied and certified.</p>
<b>Post Qualification Training</b>	<p>Even though registrar's/Consultants are now able to carry out complex foot and ankle surgery Most then proceed to Overseas Fellowships, where they act as Fellows and perform surgery in these countries. They thus are required to be registered as Medical Practitioners and Surgeons in these countries, completing the GMC registration in the UK or the ECFMG in the USA.</p>	<p>None in USA where they act as surgeons, they may pay to do observerships.</p>	
<b>Independent Accreditation</b>	<p>via the Australian Medical Council (which also accredits Dental and FacioMaxillary Surgery )</p>	<p>None</p>	<p>via a Federally established body CPME (Council on Podiatric Medical Education</p>
<b>International Recognition</b>	<p>Recognised internationally</p>	<p>The qualifications of Australian podiatrists and podiatric surgeons are not recognised in key overseas countries. Australian podiatrists are not allowed to perform surgery in other countries. No credit is given in the US for any 'Podiatric courses' undertaken in Australia</p>	<p>Canada and US recognise only the CPME certified education, and by consensus it is regarded world wide as the 'Gold Standard'.</p>