



G5.1/18

BAPRAS

British Association of Plastic
Reconstructive and Aesthetic Surgeons



Code of Practice

2019



Code of Practice

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All Members should seek the highest standards of clinical care in an atmosphere of honesty, integrity, respect and compassion.

The purpose of this code is to define acceptable behaviour in plastic surgery, to encourage the maintenance of the highest surgical standards, to support the professional regulation of the specialty and to provide a model for reflective practice in line with ongoing appraisal and revalidation.

Members of BAPRAS must comply with the GMC's 'Good Medical Practice' and follow the guidelines for 'Good Surgical Practice' as laid down by the surgical royal colleges.

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Compliance with the Code of Practice

Failure to abide by these guidelines may constitute unprofessional conduct or professional misconduct, and a breach of this code. Non-compliance with this code may result in suspension or termination of your membership. Further, where deemed appropriate, BAPRAS have the duty of mandatory notification to the GMC's Fitness to Practise Committee, or other appropriate body:

- members of BAPRAS will sign a written acknowledgement that they have read, understood and will abide by this Code of Practice
- members will agree to submit to a BAPRAS disciplinary procedure where a complaint has been made
- complaints must be made in writing but anonymous complaints may be considered in exceptional circumstances
- complaints will be investigated by the Professional Standards Committee who will make appropriate recommendations to Council
- any appeal will be heard by a formally constituted Hearing Panel as set out in article 25(2) of the Articles of Association. Please refer to Appendix 1 for further details.

Surgical Practice

You must:

- maintain high standards of surgical practice
- comply with revalidation requirements
- respect patients and colleagues
- acquire and maintain surgical skills/experience and competence
- strictly safeguard confidentiality
- not engage in any activity which brings the practice of plastic surgery or BAPRAS into disrepute

- maintain adequate and up to date records
- maintain a logbook
- comply with Data Protection legislation
- require the member to sign a statutory declaration that he or she will in future comply with the Code and other relevant codes of conduct

Members must not make public statements or opinions via print, broadcast, or social media on someone they have not personally evaluated.¹

Advertising

You must familiarise yourself with the guidelines for advertising set out by the GMC and the Advertising Standards Authority and in particular those requirements that relate to:

- what is acceptable and unacceptable advertising
- claims being honest and truthful
- personal responsibility for the nature and content of all advertising or publications related to your services
- comparative advertising which implies that other suppliers are incompetent
- offering gifts, discounts or other financial inducements

You must be aware that this includes statements made on websites and other electronic media.

You are also responsible for any third party advertising issued on your behalf.

You must specify your GMC registered specialisation and the year you were registered on all advertising.

You must specify your category of BAPRAS membership on all advertising.

Should a complaint against you be upheld by the Advertising Standards Authority (ASA) for a breach of advertising standards, your membership of BAPRAS may be suspended or you may be expelled from membership.

¹ Amendment of Goldwater Rule.



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Advertising, you will:

- 1) Ensure that all advertising of your services complies with Advertising Standards Authority and GMC guidelines.
- 2) Ensure that unrealistic claims about surgical outcomes are avoided.
- 3) Not make false claims regarding your qualifications and membership of professional bodies
- 4) Ensure consent is given by patients to be involved in advertising

Financial arrangements.

The GMC require all financial interests and conflicts of interest to be declared to patients, this requires you to:

- 1) Inform patients in writing of the full costs of treatment before consenting them to treatment
- 2) Inform patients of any potential additional costs should revision surgery be required
- 3) Declare any personal interest such as financial involvement/shares in private hospitals

Inducements:

You will not offer financial or other incentives to patients to commit to treatments including return of consultation fees. These include but are not limited to offers known as Buy One Get One Free (BOGOFs).

Use of the BAPRAS name and logo

- membership of BAPRAS must not be used as a qualification
- your category of membership should be clearly and fully stated
- your membership category on website advertising must be hyperlinked to the BAPRAS website membership page
- the use of the term “Member of BAPRAS” alone on letterheads, websites and in advertising is not permitted
- only Full Members may reproduce the BAPRAS logo on their stationery or website for the sole purpose of communicating their membership of BAPRAS
- membership categories other than Full Members cannot use the BAPRAS logo in advertising
- BAPRAS logos are registered trademarks and their use is protected by law
- you must not make yourself out to be representing BAPRAS unless prior authorisation has been given by Council

Trademark Notice

BAPRAS’ primary and secondary logo with its components, including the salamander emblem, are registered trademarks of the Association and their use is protected by law. They are registered with the Intellectual Property Office as trademarks 2456278, 2456281, 2456283, 2456285 and 2456286 at the Royal College of Surgeons, 35–43 Lincoln’s Inn Fields London WC2A 3PE
T: +44 (0)20 7831 5161
E: secretariat@bapras.org.uk
www.bapras.org.uk



Financial arrangements

You must be honest and transparent in all financial arrangements:

- disclosure of costs to patients is required and best practice is for a written disclosure of costs including the possibility of additional costs should any revision procedure be necessary
- patients should not be financially disadvantaged following withdrawal from a proposed course of treatment
- any deposit taken must be refundable save administrative expenses
- you must declare any conflicting financial interest (e.g. financial interest in a private hospital)
- you must ensure that any such interest does not influence patient care
- you must ensure that financial arrangements do not include any inducements by way of gifts or discounts
- any invoices/bills submitted should be at a rate commensurate with the service provided

Relationship with the Pharmaceutical and Medical Device industries

- if you have financial or commercial interests in organisations providing healthcare, or in pharmaceutical or other biomedical companies, these interests must not affect the way you prescribe, treat or refer patients
- patients must be informed of any conflicts of interest
- conflicts of interest should be declared on all advertising including journal publications and meeting presentations; and given prominence at the beginning of the piece or presentation.

Product Liability Suppliers of implants or other medical device are at risk of involvement in product liability

issues. If you are part of a supply chain, you require to hold adequate product liability insurance

Pre and Post-operative surgical Care

- you must ensure that patients are adequately informed about any proposed treatment, including any serious or frequently occurring risks and complications
- you are also responsible when information is provided by junior medical staff or nurses
- no recommendation for surgery should be made without a face-to-face consultation with the patient, unless the situation is urgent
- you must not rely on email, social media or telephone consultation alone
- in cosmetic surgery cases, an offer of a second consultation should be made prior to surgery and an adequate 'cooling-off' period of at least 2 weeks between consultations and surgery must normally be allowed
- you are responsible for post-operative care in person
- when you are not personally able to provide postoperative care you must arrange to delegate to a named and appropriately qualified colleague
- delegation arrangements must be clearly made known both to the patient and your colleague
- adequate documented hand-over is essential when delegation arrangements are made

Pre-operative assessment as a responsible surgeon, you will:

- Assume responsibility for a patient's care
- Ensure the patient's suitability for the planned surgical procedure.
- Outline the anaesthetic options available to the patient for the procedure and if required facilitate involvement of an anaesthetist.

- Consider referral to a clinical psychologist when a patient requesting cosmetic surgery appears to have unrealistic outcome expectations or an apparent disproportionate view of their appearance.
- Write to the patient and their General Practitioner unless consent has been withheld, summarising the clinical position, the pros and cons of the proposed surgery, the realistic outcome from surgery, potential complications and required aftercare.
- Copy GP correspondence to the patient.
- If the patient refuses to allow their GP to be informed of the proposed treatments despite being counselled about the benefits of doing so, a letter summarising the treatment options, realistic outcomes, potential side effects and complications and necessary aftercare should be sent direct to the patient. This letter should also set out the fact that consent to inform the GP had been withheld by the patient.
- Recognise that you are under no obligation to undertake surgery or treatments, which the surgeon believes will militate against a patient's best interests.

Consent should comprise the following:

Patients should:

- 1) be provided with a full explanation of the proposed treatment, the risks and benefits, available alternatives and post-operative care - this should also be given in writing (Montgomery ruling¹).
- 2) be allowed the opportunity to address any concerns
- 3) be given time to reflect on their treatment options before committing to surgery, the GMC 'cooling off' period of at least two weeks as a minimum with a longer period if more appropriate and recommended by medical indemnity providers for cosmetic surgery.

¹ Montgomery v Lanarkshire Health Board [2015] 2 WLR 768).



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- 4) sign and date the appropriate consent documentation, including for the collection and storage of patient photographs.

However, the BAPRAS recognises that for some patients (e.g. emergencies and those requiring reconstructive surgery) treatment may have to be arranged more quickly. Only under exceptional circumstances should the surgeon meet the patient for the first time on the day of surgery.

WHO checklist or a locally agreed equivalent is integral to current best practice. You should:

- Complete the WHO checklist or a locally agreed equivalent prior to surgery
- Where any form of medical device or prosthesis is to be used during surgery, confirm that the product type and size is appropriate and that it is in date.

Aftercare and access to emergency advice and assistance

Informed consent includes understanding of any procedure and its sequelae including wound care, any restriction upon activities and likely time off work. You should :

- Ensure that the patient is made aware of the sequelae of a procedure and confirm this in writing
- Ensure that patients have immediate access, in the event of concerns or complications, to the operating surgeon or a suitably qualified deputy such that all potential problems can be addressed satisfactorily.

Clinical records

Adequate records of all patient contacts are of paramount importance in current clinical practice. You should :

- 1) note any patient contacts in the patients' clinical records with date, time and signature.

- 2) obtain good quality pre-operative photographs for patients undergoing any surgery related to their appearance
- 3) record details of all implants and other products used during a procedure in the clinical notes
- 4) include a record of all care provided by nursing and other staff, under the direction of and on behalf of the responsible surgeon.

Continuity of care

Responsible surgeons oversee the pre-operative assessment, consent process, surgery and post-operative care. You should :

- delegate responsibilities to other surgeons or health care professionals only when satisfied that the individual concerned possesses the appropriate level of experience and expertise. Consider how you would demonstrate this if you were asked to do so in court?
- Provide the patient's General Practitioner with relevant details of the treatment provided and appropriate advice on postoperative care
- Document any refusal by the patient, despite your advice, to the GP being informed.

Expertise and facilities members will:

- 1) have the necessary expertise to complete a procedure to a reasonable standard and to manage foreseeable complications that may occur, or arrange referral to a suitably qualified colleague where necessary.
- 2) ensure that the facilities, equipment and assistance are adequate to manage any complications that may occur during or after surgery.



Surgery undertaken at a distance

- surgery must only be carried out where local facilities are adequate for the surgery and local medical personnel have the necessary expertise and skills to provide post-operative care
- adequate post-operative provision must be made, including the arrangement of competent post-operative medical cover by a named and appropriately qualified colleague who is able to manage any urgent or unforeseen situations
- adequate documented hand-over is essential

Overseas Patients

For patients travelling from a long distance, your responsibilities do not end when the patient leaves the UK.

You will:

- ensure appropriate length of post-operative stay in the UK
- ensure continuity of care on repatriation

Remote Patients

For patients being treated at a distance from your home base you must:

- ensure appropriate post-operative arrangements and cover by a suitably qualified colleague (see below)
- confirm any such arrangements in writing to all relevant parties
- delegation: clinical care may only be delegated to other doctors and health professionals who possess the requisite knowledge, skill and expertise to provide that care to a competent standard.



Cosmetic surgery for patients under 18 years of age

Particular care should be taken when treating such patients to ensure that the treatment is in the best interest of the patient. The maturity of the patient and their understanding of issues relating to treatment are particularly important. You must ensure that all legal requirements in relation to consent are satisfied.

Patients under 18 years of age

Assessment of patients under the age of 18 years demands particular care to ensure that the proposed treatment is in their best interests. You should understand that:

- There is no legal obligation to operate on any patient unless failing to do so would be negligent.
- Final decisions about cosmetic procedures in young patients can be deferred.
- If you consider that any proposed procedure is not prudent, do not proceed even in the face of compelling emotional pressure that might be brought to bear.
- Consider that parents could bring an action on behalf of the child and therefore you are exposed to not only the young persons' interpretation at any stage of the process but also that of the parent.
- If in doubt – do not be alone - seek advice from a colleague or from your medico legal helpline.
- People aged 16 or over are entitled to consent to their own treatment, and this can only be overruled in exceptional circumstances.
- Like adults, young people (aged 16 or 17) are presumed to have sufficient capacity to decide on their own medical treatment, unless there's significant evidence to suggest otherwise.

Complications

The GMC requires all registered medical practitioner to provide patients with a prompt, full and honest explanation where complications have occurred.

- provide a full and honest explanation at the earliest opportunity in keeping with your duty of candour
- ensure the patient receives expedient management
- seek a second opinion if necessary
- bear in mind the financial and personal cost to the patient when revision surgery is required
- avoid making inappropriate or deprecating comments about another doctor or healthcare professional

Complaints

The GMC requires all registered medical practitioners to provide patients with a prompt, full and honest explanation where complications have occurred.

- respond to complaints in this way and apologise when appropriate.
- understand that providing an explanation and apology, where appropriate, does not amount to an admission of liability if done correctly.
- have a very low threshold for seeking advice from medico-legal advisory services before responding directly to patients as an explanation with apology could be taken to constitute an admission of negligence if not worded correctly (especially if accompanied by a refund of fees)
- understand that liability is a legal matter and not an issue to be discussed by patients and clinicians.



Involvement with non-medically Qualified Personnel

- you assume full responsibility when non-medically qualified personnel provide treatment in your practice
- non-medically qualified personnel must have appropriate qualifications and training to complete the task assigned to them and should have appropriate indemnity

Data Collection

- you must maintain an annual log of your surgical activities and outcomes
- you will submit your log to the Association upon request to facilitate enquiries and workforce planning
- you must participate in any national collection database as mandated by the Association.
- be registered under the Data Protection Act (1998) and comply with its principles.

Expert Witness

In all dealings with medico-legal matters:

- you should declare date of entry to the Specialist Register in all dealings with medico-legal matters
- you must declare your scope of current practice and any expertise specific to the case
- you should not accept instruction on a case which lies outside your regular scope of medical practice
- you should only accept cases which occurred when you were in active clinical practice.

GMC imposed restrictions/ exclusion or restriction of practice NHS and private sector

In the event that you are under investigation or facing disciplinary action of any kind from the GMC or any other relevant regulatory body, your employing Trust, or a private hospital at which you have practising privileges, you must notify the President or the Chairman of PSC promptly and in writing.

On receipt of a notification, the President or the Chairman of PSC will inform the other Officers. The Officers (or alternatively the Chairman of PSC) shall have delegated authority to resolve on behalf of the Council that you should either:

- a) continue as a Member pending the outcome of the regulatory investigation or disciplinary proceedings; or
- b) be suspended as a Member pending the outcome of the regulatory investigation or disciplinary proceedings, on the grounds that in their reasonable opinion this would be in the best interests of the Association; provided always that in reaching any decision under Article 15(4) of the Constitution.

A Member shall inform the President or the Chairman of PSC of the outcome of any investigation or disciplinary procedure and shall provide full details of any sanction imposed within 14 days of a decision being made. The President or the Chairman of PSC will notify the other Officers (or Chairman of the PSC) of the outcome, who shall have delegated authority to resolve on behalf of the Council that you should be reinstated as a Member (subject to such sanctions as the Officers (or Council) may see fit to impose) or that the suspension should continue pending further investigation.

Reputational damage to BAPRAS

Reputational damage to BAPRAS as a result of complaint in these areas:-

- Breach of advertising standards Advertising Standards Authority
- Research fraud
- Publication fraud
- Plagiarism
- Social media

Guidance of the use of Social media is available on the BAPRAS website at www.bapras.org.uk/professionals/About/member-resources/social-media-guidance



Appendix: Compliance

- you must comply with the regulations covering your appropriate category of membership (see articles 2-13 of the Articles of Association of BAPRAS)
- the annual subscription appropriate to your category of membership must be paid
- you must be aware of and comply with your obligations as laid down by the General Medical Council to report notifiable conduct on the part of another medical practitioner
- you will give written assurance of your compliance with this Code when joining BAPRAS
- by annually continuing your membership you confirm that you will continue to abide by the Code
- comments of a defamatory or offensive nature must not be made, including comments on the actions of other members, and you must not purport that your opinion in some way has the authority of BAPRAS

On becoming a Member of BAPRAS you are required, as a condition of membership, to sign a written acknowledgement that you:

- have read and understood and agreed to comply with the codes of conduct and standards of the surgical royal colleges of the United Kingdom and Ireland
- that you have complied with BAPRAS codes, guidelines and standards in your professional practice over the previous 12 months
- agree to submit to a BAPRAS disciplinary procedure if a complaint is made against you and to be bound by the outcome of the procedure

The Professional Standards Committee will review any complaint at its next meeting, or sooner if deemed necessary, and will:

- inform the Member in writing of the details of the complaint and provide a copy of the complaint and give the member 28 days within which to provide a written response to the complaint
- undertake such further investigation of the complaint as it feels appropriate

- thereafter deal with the complaint, taking into account matters contained in the complaint and response received from the member and the results of further investigations, if any, undertaken by the PSC or other parties
- make a recommendation to the Council of BAPRAS as to what action, if any, BAPRAS should take in response to the complaint.

If the complaint raises issues that may involve unprofessional conduct on the part of the member, a risk to patient safety or a breach of any GMC codes or guidelines, then the PSC will recommend to Council that the complaint be referred to the GMC for further investigation.

If the complaint raises issues that warrant further substantial investigation (e.g. contravention of Advertising Standards Authority regulations) the PSC will recommend to Council that the complaint should be referred to the appropriate body.

If the complaint in the opinion of the PSC is trivial and/or does not raise issues of such significance as to warrant further investigation the complaint may be dismissed and the complainant and the member to whom the complaint relates will be informed accordingly.

Recommendations by the PSC suggesting action, if any, to BAPRAS Council sanctions may include any or all of the following:

- dismiss the complaint
- require the member to participate in counselling or other similar remedial programme
- reprimand the member
- impose conditions upon the member's continuing membership of BAPRAS
- suspend membership of BAPRAS for a specified period of time
- terminate membership of BAPRAS

When making its recommendation, the PSC must review any complaints previously made against the member and where appropriate take this complaints history into account. This information should be supplied to



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BAPRAS Council as part of their recommendation for further action.

The Council of BAPRAS will consider the recommendation of the Professional Standards Committee at its next meeting, or sooner, and will decide what action, if any, will be taken in response to the complaint. The Council will write to the member and the complainant informing them of their decision.

Any decision by the Council of BAPRAS to reprimand, impose conditions, suspend, or to terminate the membership of a member will be published on the public domain of the BAPRAS website.

Appeals Process

Any appeal will be heard by a formally constituted Hearing Panel as set out in article 25(2) of the Articles of Association of BAPRAS.

Complaints must be made in writing but anonymous complaints may be considered in exceptional circumstances



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