

# Patrolling for Skin Cancer in the Outback

By Kevin Jones

Sometime ago SKIN PATROL was brought to my attention. Skin Patrol provides a service for checking for skin cancers. The difference with this service is that it is mobile and covers thousands of kilometres in the Australian cities and outback. I spoke with Sam Holt, the Director of the company about the OHS benefits of the service and the difficulties of provide such a service over such a distance and such difficult work environments.

**Ultraviolet radiation is an established factor in skin cancer and a major hazard in workplaces in Australia, in particular. What made it necessary for Skinpatrol to establish a mobile service?**

We started Skin Patrol in 2003 because our research indicated that UV was a growing issue in the workplace and that many companies were having trouble finding a provider capable of providing high quality, onsite skin checks. Our research also indicated that clients felt that checks offsite would be costly in terms of downtime and would result in lower participation, especially for voluntary programs.

**Has there been an increase in cancer assessments in each workplace, as a result of mobility?**

The interest in workplace skin checks has increased enormously over the last 12 months as more companies look for ways to get the SunSafe

message across to employees. Many companies who were not interested two years ago, have recently contacted us saying that they are keen to implement the program.

I imagine that a mobile service is expensive for clients given the isolation of some of the worksites. How does the return on investment for Skin Patrol compare with other fixed location services, or GP assessments?

In many outback or rural worksites, there is often only minimal or no access to medical staff. In such cases sending our team in is far cheaper than sending the workers to the nearest medical centre. The benefit of our program is twofold. Early detection of skin cancer is something that can be given a dollar value, but our ability to change the SunSafe culture of an organisation through one-on-one targeted education is more difficult to value in terms of return on investment.

**I understand that you don't have a dermatologist on site in Skinpatrol. How can the clients ensure that they are getting the best quality of diagnosis?**

The gold standard for skin checks is to visit a dermatologist, they are the specialists in skin cancer detection and diagnosis. Unfortunately, it is not economically viable for a dermatologist to visit worksites. Skin Patrol uses GP's experienced in skin cancer to assess individuals onsite and to identify suspicious lesions. These are

imaged, using the world's best tele-dermatology software and sent to our dermatologists for remote diagnosis. Short of having a dermatologist visit the company, we firmly believe our service is the best available anywhere in the world.

Digital imaging also allows individuals and their GP to better track changes in lesions that our dermatologists recommends reviewing regularly. It allows us to recommend a "wait and watch" approach as opposed to excising high numbers of benign lesions.

**Is there an industry sector that has been particularly interested in your mobile services?**

While we have found that the energy, infrastructure, and mining industries are the most proactive in terms of preventing UV exposure and early detection, most of our clients are industry leaders in their approach to OH&S and training. I would define our major clients as proactive rather than representative of any one industry.

**Given that Australian OHS regulators have accepted the existence of UV hazards, what support have you received from the regulators and authorities?**

From our inception, we have gathered statistics on the incidence of skin cancer among outdoor

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workers in the companies we have visited. Before this, no research work had been done and many regulators and authorities subscribed to the theory that population-based screening for skin cancer was not economically viable. The statistics we have compiled from workers around Australia show that there is a great need for more attention to be given to occupationally exposed workers. We aim to use our research to prompt regulators into action. Our dermatologists agree that Australian outdoor workers should be considered inherently high risk due to the amount of UV exposure they are subjected to and the general level of actinic damage they present with. The costs of treating late stage skin cancer, particularly melanoma, are very high financially for the employer and physically for the individuals concerned.

The role of many regulators is to provide impartial feedback and advice. We don't expect to receive endorsement, but we would like to see OH&S laws reviewed and skin checks at least being recommended, if not made compulsory, for all outdoor workers.

[Due to the mobility of your service there must be requests for Skin Patrol to provide other, non-UV, health services. Has this occurred and are there any health services that would be particularly suited to your mobile model?](#)

The Skin Patrol service was so well received by employers and workers that many clients have asked us to design a service that focused on other health and well being initiatives. Health Patrol has subsequently been established and we offer a superior health and well being program, modelled on the Skin Patrol system, and designed specifically for the blue collar & non executive workforce.

[Is there anywhere in Australia that Skin Patrol can't or won't go?](#)

Skin Patrol will travel anywhere in Australia. We specialise in working with big companies that have multiple worksites. We aim to become an extension of our clients' business and that means working in with their existing operations to minimise downtime and maximise participation rates.

[Given that it must take some time for your service to cover isolated sites, is it necessary for Skin Patrol to establish follow-up services with local health providers? The need for excisions? Cancer control treatments such as chemotherapy or radiation? Or is the medical treatment part of the Skin Patrol service?](#)

We do not perform any excisions. We believe it is crucial to remain a detection service and that treatment is referred to a patient's primary health carer, usually a GP. Many people we check do not have a GP and we assist them to make an appointment with a local practice. Similarly, for those patients that require urgent or dermatologist attention, we organise referrals and appointments.

[Skin Patrol hopefully prevents the development of skin cancers, what initiatives do you have to protect people from UV exposure, to minimise the risks?](#)

Education is an integral part of our service. Workers are informed about the types of skin cancer, the early warning signs and the importance of self checks. We also teach workers about sunscreen application and the importance of wearing issued Personal Protective Equipment. Ultimately, individuals must accept that the responsibility for reducing UV exposure is their own. Alarmingly, most Australians have little idea about the types of skin cancer

and how to detect them early. We aim to empower our clients and their families to better protect themselves and to regularly and effectively monitor their own skin for changes.

[What OHS issues do Skin Patrol staff face? Working alone? Travelling in isolated locations? Separation from family? Work/Life balance?](#)

We have a large team of doctors and technicians which allows us to rotate staff on the road. Travelling can be gruelling and no one wants to be away from family and friends all the time. Our staff always travel in teams which gives us and our staff security and peace of mind no matter where a job may be.

[How long is a "tour of duty"?](#)

A Skin Patrol job can range from a morning at some smaller companies to many months for the largest clients, especially those that have sites scattered across the state or country. Even on our bigger jobs staff are able to fly home for the weekend.

