Lisa Liu

8 October 2011

Ms Debra Gillick
Executive Officer,
Chinese Medicine Board of Australia
AHPRA
GPO Box 9958, Melbourne, 3001

Email: Subject: Mandatory registration standards chinesemedicineconsultation@ahpra.gov.au

Dear Ms Gillick

Re: <u>Submission on the Mandatory Registration Standards and the Grandparenting Arrangements</u>

I am writing in regard to the above matter. I would like to thank the Chinese Medicine Board of Australia (the Board) for the opportunity to express my opinion on the mandatory registration standards and grandparenting arrangements.

I a gree with and support the proposed mandatory registration standards and grandparenting arrangements in particular on "The exemption arrangement for grandparented applicants". I appreciate the consideration given by the Board on specific needs in making flexible arrangement on English requirements due to historical and uniqueness of the development of Chinese Medicine in Australia. I support the overall language requirements for post-grandparenting requirements but believe IELTS 6.5 or equivalent level should be adequate.

As a Chinese Australian, I understand that practitioners need basic English level to communicate with patients and to communicate with CMRB including reading the news letter. However I do not believe that English language should becomes a hurdle for most Chinese practitioners. This is because:

- The Chinese medicine is different from other health modalities, e.g., nursing, where Chinese people occupies a big component of practitioners.
- In addition, Chinese medicine originated from China, much valuable clinical experience has not fully passed onto western society yet. So the practical component will be much weakened without this group of practitioner (not like Western Medicine, the Chinese medicine's treatment results largely relies on our clinical experience), which eventually may damage the TCM profession in near future.
- To rule out of this group of Chinese Practitioner is unnecessary in term of safety practice, as the most practitioners from the group practicing very safely.
- It is unnecessary restriction of competition between verity of practitioners, including practitioners who use western culture approach and who use eastern culture approach.
- It is unnecessary restriction to consumer choice and will eventually weaken patient's clinical results.

So I suggest that you please do not rise up the English language hurdle to Chinese practitioners in this profession!

I also agree with and support the proposed Proof of Practice and Competence Applicants f or a cupuncturist, C hinese he rbal pr actitioner and C hinese h erbal dispenser unde r t he h eading o f "Grandparenting registration's tandard". T hose evidence requirements l isted on Schedule 1 and Schedule 2 are reasonable and acceptable.

I acknowledge that r egistration s hould not be considered a s an a ward or honour to anyone on the basis of their contribution to the development of Chinese medicine in Australia. Indeed, the ultimate aim of statutory regulation for the Chinese medicine profession is to protect the public by setting up c riteria so that only those practitioners who could demonstrate their knowledge, competence and s kills of Chinese medicine are eligible for registration. Therefore, I believe that the proposed mandatory r egistration s tandards and grandparenting a rrangements have met the requirements.

I further s uggest t hat t he B oard s hould c learly de fine t he s cope of Acupuncture and C hinese he rbal medicine on i ts r egistration s tandards. I s trongly believe those who practise Japanese acupuncture, Myofascial dry needling, Ayurvedic (Indian) acupuncture, Korean oriental medicine, Japanese (Kampo) medicine, Natural medicine or herbal medicine should not be eligible to apply for registration of Chinese medicine as only **Chinese medicine profession** is i ncluded i n the N ational Registration and Accreditation Scheme (NRAS).

In conclusion, the proposed registration standards are well-designed, thorough and balance the need for the protection of the public and legitimacy of the Chinese

medicine practitioners who hold appropriate Australian and/or overseas qualifications or demonstrated themselves with competence of practice.
I hope the Board will consider my suggestions.
Yours sincerely
Lisa Liu