

Thu 6/10/2011

Dear Chinese Medicine Registration Board,

No doubt by now you have received several e-mails regarding the proposed grandparenting rules.

Without going through the same points I would strongly suggest that you follow the recommendations of the AACMA regarding existing practitioners.

Many of us have years of experience, hundreds of contact hours in advanced training and thousands of hours in clinic. It is really the experienced practitioners that you want out there in the complementary health care system.

I would encourage you to take a leaf out of China's book when it went through similar circumstances.

For new practitioners ; the new system, for older practitioners a different system. The rules you have suggested do not accommodate older practitioners .

I would like to draw your attention to the fact that in China , there exists many older practitioners who would not satisfy your competency test , who are also very experienced clinicians AND whose knowledge and experience we actually use as a part of our Degree courses in this country!

I myself have been practicing for 14 years.

I have a Bachelor Degree of Health Science (Acupuncture) which included Chinese herbal medicine clinic and training .

Plus over four months internship in a TCM hospital in China with both Acupuncture and Herbal Medicine clinic and lectures including dosage and formula modification, and extensive acupuncture training.

In the busy hospitals in China 5-6 days a week for four months is almost the same number of contact hours as a 2 -3 year course in Australia.

I am also doing ongoing training in " classical Acupuncture" according to Huang Di Nei Jing and Nanjing theory.

I have over 300 contact hours in advanced herbal medicine training on top of that. Including several intensive clinical training and lecture seminars in China as well as lectures in Australia with several prominent Herbalists from both China and Australia.

The Herbal Medicine Professors in China go to great lengths to insure safety , especially when using herbs such as Ma Huang and Fu Zi , and pass this knowledge on to us.

So even with the banned substances in Australia (currently) I have had training on their safe use.

I am also an Honorary External Supervisor in Herbal Medicine for RMIT students.

But under your proposed rules I would not be eligible to practice Herbal Medicine.

The AACMA has a good understanding of it's practitioners at a " grass roots " level.

I would again strongly advise you to take on board the suggestions of the AACMA in regard to Grandparenting practitioners who graduated before 2008.

I would suggest that you look at years of experience and contact hours of Continuing Professional Development Training .

You risk alienating hundreds of my colleagues , some of whom have have been helping the public for 20-30 years!

I trust that you will see the benefit of accepting the AACMA recommendations as the best way to proceed for the Chinese Medicine profession as a whole. We are after all practicing holistic Medicine ...

Sincerely,

Mark Gearing

Sun 9/10/2011

To the Executive Officer for Chinese Medicine Debra Gillick

Dear Debra,

Just a "little" note to follow up my last e-mail suggesting the board acknowledges Continuing Professional Education and number of Contact hours in regard to Grand-parenting.

Particularly for Queensland practitioners in the area of Chinese Herbal Medicine, as no such adequate course has EVER been offered in Queensland. And most committed Herbal Medicine practitioners from QLD are forced to fly down to sydney or melbourne to attend good quality industry training seminars (with some exceptions) .

I would congratulate the Registration Board in protecting the public from people who are not trained in Chinese medicine at all practicing either Acupuncture or Chinese herbal Medicine (such as a massage therapist performing acupuncture or prescribing herbs) .

And I would encourage the Board to recognize and assist those practitioners whose main practice and source of income is Acupuncture and or Chinese herbal Medicine.

In a report into traditional Chinese Medicine given to the New South Wales parliament November 2005. Two points were raised that may illustrate my point (page 33 and 35 of Report No. 10/53 Committee on the Health Care Complaints Commission)

Firstly observing the registration models of Hong Kong and Singapore .

Both Hong Kong and Singapore granted full approval of registration after 15 years of practice.

In Singapore Full approval was granted on the basis of :

1. 15 years experience or greater, or
2. Approved Traditional Chinese Medicine qualifications from an approved University or the equivalent ; or
3. 10-15 years experience plus other approved Traditional Chinese Medicine qualifications ; or
4. 5-10 years experience plus approved local (other) 5 year Traditional Chinese Medicine qualifications .

Although the Committee (in NSW) considered full approval " based solely on years of practice to be problematic ". (page 34) including the number of contact hours of additional training may solve this.

The Victorian Model for registration provided grand-parenting guidelines in section 94 of their legislation for a person who has

either:

(a) "obtained a qualification or undergone training in Chinese Herbal Medicine , acupuncture or herbal dispensing that is considered by the board to be adequate" ; or

(b) " obtained a qualification or undergone training that is not, by itself , considered adequate , but has also successfully undergone any further study , training or supervised clinical practice required by the board"

This section (b) applies to many Chinese Herbal medicine practitioners in QLD and I would again urge you to take into account number of additional contact hours of training in Herbal medicine, as this may differentiate competent practitioners from those who have not pursued further studies in Chinese Herbal Medicine.

I read something in your guidelines that suggested at least 180 (post-graduate) contact hours of further training to a practitioner with an existing qualification in Chinese Medicine would be deemed adequate .

; or

(c) "carried on the practice of Chinese Herbal Medicine , acupuncture or herbal dispensing for a total of five out of the last ten years prior to 1 January 2002..." In the case of National registration prior to July 2012.

I would also like to point out that proving the competence of a practitioner through patient cards of hundreds of practitioners is both an incredibly arduous undertaking and also potentially problematic due to the very diversity of practice within Chinese Herbal Medicine itself.

For example when treating a case of stomach prolapse , some practitioners may use a modified version of Bu Zhong Yi Qi Tang, while other Herbalists disagree entirely to use Bu zhong yi qi tang for prolapse of the stomach and say this is only the theory of Li Dong Yuan, or that Li Dong yuan was using Bu zhong yi qi tang as a base for most problems due to his emphasis on tonifying the spleen and stomach, and regulating the ascent / descent of the Qi dynamic via the spleen and stomach Qi (and he also modified his chief formula),
(although personally I find it useful in the treatment of hemorrhoids and Hernias with flaccid muscle tissue due to it's Emperor (chief) Herb Huang Qi (Astragalus) .

So you may find other prescriptions for prolapse. Some Herbalists use up to 30 grams of Zhi Shi for stomach prolapse (as in the case of the famous Beijing Herbalist Fu Yan Ling , student of Liu du Zhou) stating that if you free up the stomach qi that the prolapse can then correct itself .

Other Herbalists when faced with the use of Zhi shi in stomach prolapse say " no way" Zhi shi is a descending herb and the stomach has already prolapsed , you need a tonic or ascending herb. Others yet say you must harmonize with both ascending and descending herbs .. etc etc...

So analyzing Patient records could potentially become an ongoing argument over correct treatment especially with the older practitioners who may demonstrate a variety of opinions .

I offer the above suggestions in the hope of being helpful towards a smooth transition into National Registration and for the benefit of the profession and the public.

Thank you very much for your consideration and I wish you the best in your undertaking.

Sincerely,

Mark Gearing