

# Submission to Chinese Medicine Panel Australia relating to the proposed registration standard

## Grand-parenting.

The proposed registration standard for Grand-parenting will cause a significant number of existing practitioners to suffer serious hardship and loss of income through no fault of their own.

Amongst those who will be seriously affected are practitioners who have graduated from an Advanced Diploma course between 2008 and 2011, also future practitioners who have begun an Advanced Diploma course from 2008 and 2011 will also suffer a significant loss through no fault of their own. It should be noted that neither of these groups of people have the opportunity to show 5 years of practice since qualifying, nor has any forewarning been provided to these people, that their Advanced Diplomas may not be recognized from 2012.

Many of the practitioners who graduated between 2008 and 2011 have been registered and are practising under the protection of health insurance and are registered to practise for patients of health funds.

Existing health funds who have accepted the Sydney Institute of Traditional Chinese Medicine, Advanced Diploma from include;

For Remedial:

AHM, ARHG, Aust Unity, CBHS Doctors Health fund, HCF, MBF, NIB BUPA/  
HBA, Medibank P.

For Acupuncture:

ARHG, Aust Unity, CBHS, NIB, Medibank P.

For Chinese Herbal Medicine:

ARHG, Aust Unity, CBHS, BUPA/HBA, MBF, NIB, Medibank P.

It is also considered that the proposed grand-parenting scheme does not meet section 8. section (f) of the Chinese Medicine Panel Australia own procedures for the development of the registration standard.

(f) The Board considered whether the draft grandparenting registration standard results in an **unnecessary restriction of consumer choice**. Rather than restricting consumer choice, the draft standard supports consumer choice by ensuring that practitioners who currently practise the profession, and who are suitably trained and qualified to practise in a competent and ethical way, are eligible to apply for national registration. A nationally registered practitioner will be able to practise the profession in any Australian state or territory.

In the authors opinion the proposed draft grand-parenting standard will unnecessarily deny many existing patients the option to seek Chinese Medicine from the practitioner with whom they have already built a patient practitioner relationship.

### **English Language Skills**

While it is acknowledged that the mandatory requirement for English language skills is necessary to meet the objectives of the registration standard, the period that existing practitioners have to develop english language skills would appear to be inadequate.

In order to avoid loss of income existing practitioners should be allowed a period longer than 9 months to meet the competent english language skill. Many existing Chinese Medicinal practitioners are native chinese speakers and even when study has occurred in Australia the education was often conducted in Chinese.

### **Recommendations**

It is recommended that practitioners with an Advanced Diploma in Traditional Chinese Medicine who qualify up to the end of 2012 be treated the same as Bachelor of degree of TCM.

It is also recommended that existing Students of an Advanced Diploma in Traditional Chinese Medicine, either have their qualifications recognized when complete, or alternatively provision should be made to allow these students to transfer to a Bachelor Degree in TCM. If future Advanced Diplomas in Traditional Chinese Medicine are not to be recognized then the Chinese Medicine Board of Australia should be proactive in approaching the Universities to ensure that partially completed courses can be transferred.

Greater consideration should be given to the transition period for practitioners to develop their english language skills. Many practitioners and possibly as many as 90% of the patients seeking a traditional chinese medicine are native chinese speaking people. Many of the courses for TCM practitioners in australia are conducted in chinese. The description of competent English in the draft standard is not sufficient, while reference is made to IELTS the proposed draft does not specify whether the standard is for academic reading or common language. IELTS has separate grades in english language skills for both academic and general usage.

### **Conclusion**

The proposed mandatory registration standards in traditional chinese medicine will have a very serious and negative affect on recent graduates and students of an Advanced Diploma in Traditional Chinese Medicine. To be successful Registration standards need to be equitable and to protect both patient and practitioner.

A longer transition period and more precise guidelines are required for the demonstration of English language skills for practitioners of Traditional Chinese Medicine.