Tue 4/10/2011

Dear CMBA,

I am writing to you to express my deep concerns and outright shock at the proposed draft standards.

There are a few points that I would like to raise with you based upon your draft and would like to have a reply or at the very least an explanation as to there validity please.

Firstly, why is it that "Australian trained" practitioners applying for registration under a national scheme are being subjected to a higher grandparenting standard than was applied under the Victorian scheme? If it is to be truly a "national scheme" then the standard should at the very least be the same for consistency otherwise this is a two tier standard and system. Not at all allowing for a smooth transition and protecting the general public as well as peoples rights. Quite simply this disadvantages anyone outside of Victoria for whom a standard has been set and met.

Secondly, why is it that unaccredited programs that were recognised by AACMA as meeting the requirements for practice "at that time" have not been also included on the list of courses deemed adequate for grandparenting, and that this should also include past practitioner diplomas and unaccredited bachelor programs of which I completed?

This is particularly disturbing as I taught for 6 years at one of the colleges which is on the current list. I have also observed that employment to these institutions is still being requested for "Senior Practitioners" to teach in these programs. Senior clinical experience seems to be of value and valid in this case. Though strangely the very graduating students from these programs would be deemed by your proposed draft to be more suited to practice than myself. Chinese medicine (and in fact Any field of medicine) has long held clinical experience as extremely important and valid. In fact people prefer to seek out practitioners who have been in practice for longer as this experience is deemed valuable and with good reason.

Thirdly, why is it that the list submitted by the AACMA of Australian Chinese Medicine programs deemed adequate for grandparenting purposes not included on the CMBA list of courses deemed adequate for the grand parenting purposes? The AACMA have always set a very high standard of practice and competency and have been involved with yourselves during the whole process of registration. So as to why their professional experience and understanding has not been followed is perplexing. Again why is it that these standards are not universal? Why is it that different modalities or states be subject to different rules? This is simply not fair and extremely biased.

Fourthly, I am strongly opposed to the arbitrary and retrospective application of requirements. For if it it not universally applied to both Victorian and other trained or modalities then it can be of no relevance. There simply cannot be double standards for a national scheme!

Fifthly, the draft application in its current form, does not provide any scope for providing competence where the diagnosis and treatment is based on other traditions of acupuncture. All of which have a long history of use and relevance.

Sixthly, although the draft standard states that processed or unprocessed forms of herbs can be employed, if the treatment is primarily formula based then there will be difficulty in proving my competence to practice Chinese Herbal Medicine. Prepared formulas have been designed to treat patterns/conditions based on a clear diagnosis for thousands of years. It is for their very safety and relevance that the formulas have been made into a prepared form. Not in the least if I prescribe Chinese herbs in premanufactured pill or powder form so as to make it easy for patients to take or for the cost to the patient. Sometimes patients prefer to take long term these prepared forms. This has a very long traditional history of use and legitimacy. So if I am unable to individualise a prepared formula on this basis it would be deemed that I am unable to demonstrate competence? This is simply ridiculous!

Seventhly, it was my understanding that grandparenting was a process to enable legitimate practitioners to continue practice in their profession. Unfortunately, the draft standard, if applied in its current form, will mean that myself and I believe hundreds of legitimate Chinese Medicine practitioners and businesses will become illegal on 1 July 2012. What is then to be done for the care and well being of my existing patients, their families and the larger community that I treat and support and have done so competently for almost 20 years? If registration is truly to protect the public what is to be done for these people whom have trusted me with their care?

Do all of a sudden I become incompetent and then am unable to continue their health care that I have been doing for nearly 20 years?

I find this whole process deeply concerning. My whole working life has been the practice of Chinese Medicine I believe that I have studied and continue to study diligently for my patients best care.

Based on the current draft proposal it would appear that my career is to come to an end or I will have to restart learning from people whom I may well have taught. Please apply what the AACMA have suggested in your registration standards as I believe them to be fair and consistent.

I look forward to your reply and feedback.

Yours Sincerely,

Jean-Paul Staats