

Communiqué

Fifth meeting of the Chinese Medicine Board of Australia

15 November 2011

At its fifth meeting, held in Melbourne, the Board focused on its priorities in preparing for the profession to join the national registration and accreditation scheme and on preparatory work to enable it to fulfil its statutory functions from 1 July 2012.

Proposed registration standards

It is anticipated that the Board's proposed registration standards will soon be considered by Health Ministers at the Australian Health Workforce Ministerial Council. The standards specify the Board's requirements for:

- English language skills
- Criminal history
- Professional indemnity insurance
- Continuing professional development (CPD)
- Recency of practice
- Grandparenting

When they have been approved by Ministers, the final standards will be published on the Board's website at www.chinesemedicineboard.gov.au/

Update on codes and guidelines – new consultations

On 21 November 2011 the Board will release a draft consultation paper on one code and two guidelines that are common to the other national boards. The consultation paper seeks feedback on:

- *A code of conduct for the profession*—addressing issues like providing good care, effective communication, confidentiality and privacy, informed consent, adverse events and open disclosure, maintaining professional boundaries, health records, conflicts of interest, and financial and commercial dealings.
- *Guidelines on mandatory reporting*—explaining the situations when a health practitioner or their employer must notify the Board through the Australian Health Practitioner Regulation Agency (AHPRA) about a registered health practitioner's misconduct. There are four types of misconduct: intoxication, sexual misconduct, impairment, and significantly departing from accepted professional standards. These guidelines are common across all National Boards
- *Guidelines on Advertising*—including what is acceptable advertising, such as factual statements about the services a profession provides. The Guidelines also define what is unacceptable, such as not disclosing risks associated with a treatment. The Guidelines clarify the acceptable use in advertising of titles, warning statements, advertising of price and how to complain about a breach of the Guidelines. These guidelines are common across all National Boards

In addition the Board will be consulting on:

Guidelines on Patient Record Keeping – including responsibilities, principles, information to be held with the patient record, electronic records, requests for reports, language of recording and confidentiality.

Comments are due by 9 January 2012.

Update on Course Accreditation Arrangements

The Board has now released a draft consultation paper on the proposed composition of its accreditation committee. Specific questions are included in the consultation paper to elicit views from stakeholders.

The Board encourages all interested stakeholders to provide feedback on the proposed codes and guidelines. Comments are due by 9 January 2012. The consultation paper is available at: www.chinesemedicineboard.gov.au/

Registration Fees

The Board is in the process of setting registration fees. The profession will be notified of fee levels in January 2012, after the fees have been advised to the Ministers.

Registration Transition Arrangements

The Board considered what its communication requirements would be in the lead up to commencement of national registration for the profession. It will be working very closely with State and Territory Boards during this period.

Registration application forms will be available from February 2012. Those Chinese medicine practitioners who are not currently required to be registered are encouraged to apply for National Registration by **31 March 2012** to allow enough time for the large volume of applications to be processed. It is of great concern to the Board that all Chinese medicine practitioners who are entitled and required to be registered to practise are registered by 1 July 2012.

All currently registered Chinese medicine practitioners will receive a letter from AHPRA (the Agency supporting the Board) towards the end of April, detailing the transition process, advising them of their personal registration status, and outlining what is required of them to ensure a safe transition to the National Scheme. Individual registrants are also encouraged to make sure that their contact details are correct and up to date with their existing registration board, as this information will be transferred to the national scheme.

General matters

The Board considered a number of other administrative and financial matters, including proposed budgets and delegation of functions to working groups of the Board and AHPRA staff.

Charlie Xue

Chair

17 November 2011