



Federation of Chinese Medicine & Acupuncture Societies of Australia Ltd.
澳洲全國中醫藥針灸學會聯合會 (National Body)

FCMA

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8 January 2012

Ms Debra Gillick

Executive Officer,

Chinese Medicine Board of Australia

AHPRA

GPO Box 9958, Melbourne, 3001

Email: Subject: Codes and Guidelines

chinesemedicineconsultation@ahpra.gov.au

Dear Ms Gillick

Re: Submission on the Codes and Guidelines

The Federation of Chinese Medicine and Acupuncture Societies of Australia (the FCMA) is pleased to provide this submission to the above enquiry. The FCMA thanks the Chinese Medicine Board of Australia (the Board) for the opportunity to comment on the proposed Codes and Guidelines.

The FCMA represents the Chinese medicine¹ profession in Australia, with local branches in Victoria, New South Wales, Queensland, the Australian Capital Territory, South Australia and Western Australia. The FCMA has more than 600 members practising Chinese herbal medicine and/or acupuncture. Over the past decade, the FCMA has fostered the Chinese medicine profession in Australia, including through statutory regulation of the profession. The FCMA played a leading role in introducing and implementing the statutory regulation of Chinese medicine practitioners in Victoria.

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Chinese medicine consists of acupuncture, Chinese herbal medicine, and herbal dispensing

The FCMA has reviewed the public consultation paper published by the Board on 21 November 2011. Our comments are provided below.

1. Advertising of Qualifications and Titles

Honorary title

The FCMA recommends that the title 'Doctor' be used by those Chinese medicine practitioners who will be registered under the National Registration and Accreditation Scheme (NRAS). As the title 'Doctor' is an honorary title, the FCMA notes that Chinese medicine practitioners are no different from other medical practitioners, chiropractors and dentists entitled to use the title. Chinese medicine is recognised by the WHO as a legitimate medicine system in its own right. Since registered medical practitioners in Australia are entitled to use the title 'Doctor', the FCMA is of the view that it is only logical for Chinese medicine practitioners to use the honorary title also.

However, the FCMA recommends that the use of the honorary title 'Doctor' should be limited to Chinese medicine practitioners registered in both divisions of Chinese Medicine, that is herbal medicine as well as acupuncture. The FCMA suggests that distinctions be made in the titles and qualifications of Chinese medicine practitioners as follows:

Dr. John Citizen (Chinese Medicine) (Zhong Yi Shi)

(To be used only by a practitioner qualified and registered in both divisions of Chinese medicine, that is Chinese herbal medicine AND Acupuncture)

John Citizen (Chinese Herbal Medicine Practitioner)

(To be used by a practitioner qualified and registered in Chinese herbal medicine only)

John Citizen (Practitioner of Acupuncture) or simply (Acupuncturist)

(To be used by a practitioner qualified and registered acupuncture only)

Academic titles: Professional doctorate and Doctor of Philosophy

The FCMA recognises that there are practitioners with higher academic qualifications and recommends that this be explicitly acknowledged. Given that there are two types of doctoral degrees – Professional doctorate and a Doctor of Philosophy – the FCMA recommends that the distinction between them should be identified as follows:

Dr. John Citizen (Doctor of Chinese Medicine) (Zhong Yi Xue Bo Shi)

This signals that the practitioner completed a professional doctorate in Chinese herbal medicine and/or acupuncture.

Dr. John Citizen (Chinese Medicine Practitioner, Ph.D.) (Bo Shi)

This clarifies that the practitioner was awarded a 'Doctor of Philosophy' and not a 'Professional doctorate'.

Professorial titles

The FCMA fully supports the changes proposed by Board concerning the use of the titles 'Visiting Professor', 'Adjunct Professor', 'Distinguished Professor' and 'Honorary Professor'.

It is a general academic convention, whether in Australia or in China, that the title 'Professor' is used only at the time when its holder is affiliated with an academic institution. When the person leaves the institution, the title no longer applies to him/her. Therefore those who leave academic institutions are no longer entitled to use the title 'Professor'. If the person has a doctoral degree, then (s)he can revert to the title 'Doctor' instead.

The FCMA further notes that an 'Emeritus Professor' is entitled to use the title even when no longer employed by an academic institution. Therefore, the FCMA recommends that the title 'Emeritus Professor' be added to the advertising guidelines and be used by those awarded this title during or after their academic tenure as follows:

Emeritus Professor John Citizen (Chinese Medicine Practitioner, PhD).

Other qualifications

The FCMA generally accepts that other qualifications such as Graduate Certificates, Diplomas, in medicine, physiotherapy, nursing and other areas of health science and practice be allowed to be advertised as these qualifications signal complementary skills, typically enhancing the practitioner's major skills. Generally, qualifications and degrees conferred by recognised higher educational institutions should be accepted.

2. Code of Conduct for registered practitioners

The FCMA supports the Code of conduct for registered Chinese medicine practitioners and the changes proposed by the Board.

3. Guidelines for mandatory notifications

The FCMA supports the proposed guidelines of mandatory notifications.

4. Guidelines for patient records

The FCMA opposes the proposed guidelines for patient records for Chinese medicine practitioners. The FCMA is of the view that such guidelines are unnecessary for the Chinese medicine profession at this time.

This recommendation is consistent with the practice of other established Boards regulating health professionals of the primary health care providers such as chiropractors, dentists, medical practitioners, nurses and midwives, optometrists, osteopaths, physiotherapists and psychologists. Neither of the Boards regulating these professions has had in place guidelines for patient records since the operation of the NRAS in 2000. The FCMA therefore questions whether the guidelines for patient records kept by Chinese medicine practitioners would substantially contribute to the safety and continuity of health care in Australia, as stated in the consultation paper.

The FCMA is of the view that the proposed guidelines would place an unnecessary burden on the Chinese medicine profession at a critical time when it is preparing for the introduction of its first national regulation scheme. The FCMA commends the work of the Board in developing the registration requirements and all mandatory codes and guidelines which are prerequisites for the registration process. The FCMA notes, however, that these mandatory codes and guidelines represent a vast body of literature and introduce new rules for the profession. The FCMA is of the view that the regulation process can only be successful if the profession embraces the new rules and guidelines and then implements them in practice.

The FCMA trusts the comments above will be considered by the Board.

If you require any further information or clarifications in the meantime, please do not hesitate to contact me.

Yours sincerely

Prof. Tzi Chiang Lin PhD, J. P.

National President of FCMA