

Consultation on draft Supervision Guidelines for Chinese medicine practitioners

25 July 2014

Responses to consultation questions

Please provide your feedback as a Word document (not PDF) by email to <u>chinesemedicineconsultation@ahpra.gov.au</u> by close of business on Thursday, 31 July 2014.

Stakeholder Details

If you wish to include background information about your organisation please provide this as a separate word document (not PDF).

Organisation name

Federation of Chinese Medicine & Acupuncture Societies of Australia Ltd (FCMA)

Contact information (please include contact person's name and email address)

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Your responses to consultation questions

	Supervision Guidelines for Chinese medicine practitioners
	Please provide your responses to any or all questions in the blank boxes below
1.	Are the guidelines clear and easy to follow?
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2.	Do the principles provide sufficient capacity to supervise and assess practitioners in a range of situations and/or clinical settings?
Yes.	
3.	Are the levels of supervision appropriate to provide for public safety?

4. Do the guidelines adequately cover the expected responsibilities of supervisees?

Yes.

5. Do the guidelines adequately cover the expected requirements and responsibilities of supervisors?

Yes.

6. Are the supervisor and supervisee responsibilities reasonable and achievable?

The FCMA suggests that the CMBA could recruit registered Chinese medicine practitioners who meet the requirements of supervisors and provide necessary training for supervisors to fulfil their responsibilities.

The FCMA further suggests CMBA to holds a list of approved supervisors from which a supervisee could choose from. (8. Selecting a supervisor)

7. Are the four level of supervision for practice plans appropriate?

The FCMA believes that Level 4 of supervision is unnecessary as the supervisee should be able to practise independently once he/she has passed the assessment in Level 3.

8. Do the guidelines set out adequate reporting requirements?

Yes.

9. Are the sample templates useful?

Yes, they are helpful.

There is inconsistency in the levels of supervision listed in Table 1 (page 9) and the table in Section 1 – Supervision Arrangements (p.27) where Level 4 of supervision is missing.

10. Are there specific impacts for practitioners, or governments or other stakeholders that the National Board should be aware of, if these guidelines are adopted?

No further comment.

11. Are there implementation issues the National Board should be aware of?

The FCMA suggests that the CMBA issue guidelines in relation to any additional professional indemnity insurance (PII) requirements that may be relevant to supervision activities, as most of the existing PII only covers practitioners involved in clinical practice or teaching, not supervising another practitioner (who is required to undertake supervision).

12. Should the review period be two, three or five years?

A three years period is appropriate.

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