



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery  
Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

Australian Health Practitioner Regulation Agency

## Response template for providing feedback to public consultation – draft revised professional capabilities for Chinese medicine

This response template is an optional way to provide your response to the public consultation paper for the **Draft revised professional capabilities for Chinese medicine**. Please provide your responses to any of the questions in the corresponding text boxes; you do not need to answer every question if you have no comment.

### Making a submission

Please complete this response template and send to [accreditationstandards.review@ahpra.gov.au](mailto:accreditationstandards.review@ahpra.gov.au), using the subject line *'Feedback on draft revised professional capabilities for Chinese medicine.'*

**Submissions are due by COB on Monday 9 September 2019.**

### Stakeholder details

Please provide your details in the following table:

<b>Name:</b>	Robin Marchment, for Tzi Chiang Lin, FCMA president
<b>Organisation Name:</b>	Federation of Chinese Medicine & Acupuncture Societies of Australia Ltd (FCMA)

## Your responses to the public consultation questions

<b>1. Does any content need to be added to the draft revised professional capabilities?</b>
<p>Optimal health care requires cultural competence. Absence of cultural competence can even affect willingness to access health services. The understanding and application of the principles of cultural safety therefore should be included so that Chinese medicine practitioners can offer socially effective care in addition to clinical care, thus enhancing patient comfort and patient outcomes. Cultural safety refers not only to ethnic diversity but also to gender, gender identification and sexual orientation. It also includes the understanding of factors influenced by socio-economic status, physical or mental impairment or "difference", religious and occupational differences.</p>
<b>2. Does any content need to be amended or removed from the draft revised professional capabilities?</b>
<p>In the Glossary, the definition of acupuncturist would be well-served by the addition of "acupressure" which is another valid method of stimulating definitions acupuncture points, and must be practised in accordance with Chinese medicine theory, just as other methods of stimulation are, such as moxibustion, cupping, laser, etc. It is sometimes under-estimated, so inclusion is useful.</p>
<b>3. Is the language clear and appropriate? Are there any potential unintended consequences of the current wording?</b>
<p>The language is clear.</p>
<b>4. Are there jurisdiction-specific impacts for practitioners, or governments or other stakeholders that the Accreditation Committee should be aware of, if these revised professional capabilities are adopted?</b>
<p>None that we are aware of.</p>
<b>5. Are there implementation issues the Accreditation Committee should be aware of?</b>
<p>None that we are aware of.</p>
<b>6. Do you have any other feedback or comments on the draft revised professional capabilities?</b>
<p>It is clear and logical.</p>