

26th April 2012

Executive Officer
Medical Board of Australia
AHPRA
GPO Box 9958
Melbourne
Victoria 3001



Dear Sir,

Registration Standard for Acupuncture Endorsement

The Osteopathic Council of New Zealand (OCNZ) appreciates the opportunity to comment on the proposed Registration Standard for an Endorsement for the practice of Acupuncture.

We understand from the Chairperson of the Osteopathy Board of Australia that the Australian Health Practitioner Regulation Agency (AHPRA) had established an interdisciplinary working party to develop a common standard across the chiropractic, dental, medical, osteopathic, physiotherapy and podiatric professions.

The OCNZ would like to express its support for the overall approach the Medical Board of Australia (MBA) is taking in the development of a registration standard to endorse a registrant's practice of acupuncture. It is broadly comparable with the scheme the OCNZ implemented to regulate the practice of acupuncture and related needling techniques for the New Zealand osteopathic profession in 2009.

It would be a positive development for the Australasian osteopathic profession if the MBA registration standard for the acupuncture endorsement were to be the exemplar for the Australian osteopathic profession. It would allow those osteopaths granted the acupuncture endorsement in Australia being eligible for registration in the Scope of Practice for Osteopaths using Western Medical Acupuncture (WMA) and Related Needling Techniques in New Zealand (OCNZ, 2009b). As the osteopathy profession is in 'equivalency' as per the Trans Tasman Mutual Recognition Arrangement it is appropriate for standards and regulatory processes be substantively in alignment in the two jurisdictions.

Definition of Acupuncture and Clinical Guidelines

We note that no definition of acupuncture is included in the registration standard for the endorsement of acupuncture. We feel that the proposal would be strengthened if a definition of acupuncture were developed. From the perspective of patient health and safety we think it helpful for acupuncture to be defined.

The OCNZ adopted the following definition:

'Acupuncture means the insertion of a solid needle into any part of the human body for disease prevention or therapy. Techniques in which any substance is injected through a hollow needle are not considered to be acupuncture, nor are treatments that do not include piercing the skin.'

The OCNZ definition of acupuncture (White, 2009) and code of practice are based on the British Medical Acupuncture Society guidelines (OCNZ, 2009a). Developing similar guidelines for practice in the Australian context would strengthen your proposal.

There is significant diversity of conceptual frameworks informing point selection in practice and whilst it may be problematic to favour a single approach we feel that acupuncture can usefully be defined from the perspective of technique (skin penetration with an acupuncture needle). This is sensible from a risk management perspective and from the patient's perspective well understood. We understand that the primary purpose of the Australian healthcare regulatory framework is, as it is in New Zealand, the protection of the health and safety of the public.

Acupuncture related techniques where there is no skin penetration such as acupressure or 'laser' acupuncture carry less risk of harm than skin penetration. Failing to define acupuncture may lead to other aspects of Chinese Medicine, the traditional remedies prepared from extracts of animal body parts or plant derived material, being by default associated with the endorsement.

Developing clinical guidelines would reinforce that the registration standard for the endorsement is for acupuncture as a modality practised within the contexts of one's profession, an adjunct rather than a parallel profession (Chinese Medicine).

Acupuncture Qualification / Grandfathering Processes

The prescribed qualifications for the OCNZ scope are at master's level (NZQA level 9). In prescribing qualifications the OCNZ chose interdisciplinary qualifications that adopt an evidence based approach to practice within the paradigm of the Western biomedicine (Kohut, Larmer, & Johnson, 2011). Other than the academic level being appropriate, we are unable to comment on the qualification endorsed in the proposal or the basis of the grandfathering mechanism as there is insufficient detail.

Yours faithfully,



Andrew Charnock

Registrar of the Osteopathic Council

CC Executive Officer OBA

References

Kohut, S., Larmer, P., & Johnson, G. (2011). Western acupuncture education for New Zealand physiotherapists. *Physical Therapy Reviews*, 16(2). doi:DOI 10.1179/1743288X11Y.0000000009

OCNZ. (2009a). *Code of Practice for Osteopaths using Western Medical Acupuncture and Related Needling Techniques*. Wellington. Retrieved from http://www.osteopathiccouncil.org.nz/images/stories/pdf/wma_code_of_practice_1.pdf

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White, A. R. (2009). Western Medical Acupuncture: A definition. *Acupuncture in Medicine*, 27, 33–35.