



Chinese Medicine Council of New Zealand

ANNUAL REPORT

2023

For the Year Ending 31 March

*Building public trust and confidence in Chinese medicine as
a safe, valid, and integral part of the Aotearoa New Zealand
healthcare system*

Contents

Chair’s Forward	3
Registrar’s Forward	5
Council Members	6
Paddy McBride (Chair)	7
Xudong (Susan) Zhu (Deputy Chair)	7
Joan Campbell	7
Ming-chun Wu	8
Margaret Steel	9
Adrienne Wing	9
Mana Fleming	9
Lizhou Liu	10
Trudi Collins	10
Timeline.....	11
Chinese Medicine Council Achievements	12
Formation of the Council	12
Education (Accreditation).....	12
Registration Pathways	12
Scopes of Practice	13
Prescribed qualifications.....	15
Setting Standards for Chinese medicine practitioners	17
Collaboration.....	21
Looking to the future	22
Financial statements.....	23



Chair's Forward

"A journey of a thousand miles begins with the first step" Lao Zi – Dao de Jing.

It has been quite the journey that has brought our profession to this point – for more than 20 years many practitioners have worked toward having Chinese Medicine recognised as a health profession. Far from being the destination, however, the announcement that Chinese Medicine was to join the other health professions and become regulated under the Health Practitioners Competence Assurance Act (2003) was only the beginning of the next stage of the journey.

Since the announcement in late 2021 and the appointment of the members of the inaugural Council in May 2022, the amount of work that has been required has been immense. I would like to take this opportunity to thank all those who worked so hard over the years, often feeling that no progress was being made, but whose efforts laid the foundations for our profession to reach where we are today.

Our inaugural Council has been somewhat unique in that all nine are women. Our backgrounds, however, are extremely diverse. Five of us are practitioners of Chinese Medicine and four are lay members. Between us we cover not only Chinese medical practice but also Western medicine, research, legal knowledge, former and current experience on other responsible authorities (RAs), financial knowledge, experience from the rainbow community, tangata whenua, Chinese, Pakeha – the list goes on. We all share the passion to see Chinese Medicine flourish in Aotearoa New Zealand and have worked together very harmoniously. A huge thank-you to my fellow Council members for all their hard work and dedication.

Once the Council had been appointed, the support and guidance of the Nursing Council, especially in the very initial stages of our set-up, was greatly appreciated. Thank-you too, to the IT and Finance teams who have been with us along every step of the way.

An enormous vote of thanks must go to our initial contractors, Lindsey Pine and Kate Roberts. Lindsey is now our Registrar/General Manager. Her previous experience, depth of knowledge and understanding of her role has without doubt made everyone else's jobs so much easier. Our Professional Advisor, Kate Roberts, has done an exceptional job in drafting so many of our standards and policies. Those of us on the Council are often in awe of the amount and quality of work these two wonderful women have consistently produced.

I would also like to acknowledge the four main professional associations for their support and assistance in helping the Council arrive at this point. Whilst our roles are quite different it is essential that we work together in continuing to take our profession forward. The initial stages of any new undertaking can often be confusing and difficult but the road ahead is looking considerably clearer and easier to navigate.

We have also received great support from many of the other RAs and from our colleagues on the Chinese Medicine Board of Australia. Thank-you to you all. We know that our progress is being observed by many from our profession overseas – we may be relatively small in numbers here in Aotearoa New Zealand but we are a part of an enormous global family. We would be happy to share our experience with other countries on the same journey as us.

Finally, but perhaps most importantly, thank-you to the practitioners of Chinese Medicine from all over the motu who have been on the journey with us – some from the start, some only more recently. Registration of the profession has impacted on us all and the Council greatly appreciates that there has been a lot to learn and understand about the process. The years ahead will be considerably less rocky than this first year has been.

As we move forward through the registration of practitioners, we as a Council are mindful of the responsibility, we have in guiding the profession and ensuring the safety of those who come to us seeking treatment. It has been a great honour to be part of the very first Chinese Medicine Council of New Zealand and we are all keen to see the profession flourish. There is more work still to be done but we are travelling well so far.

Nāku noa, nā



Paddy McBride

Chair



Registrar's Forward

Tēnā koutou katoa,

It has been an honour to assist the Chinese Medicine Council and to serve as Acting Registrar and Project Manager during the Council's first year of existence. With the profession working towards regulation for so long, it's a privilege to be part of the start of this new journey.

There are a lot of challenges and hurdles to navigate in setting up a new regulatory authority and the Council was lucky to have the support of the Nursing Council of New Zealand's secretariat and Chief Executive/Registrar during its official establishment phase and first few meetings. Without the support of its fellow regulators, the Council would not have achieved what it has in such a short time.

This first Annual Report represents a period of minimal income and substantive expenditure on the regulatory work associated with establishing scopes of practice, prescribed qualifications, developing clinical, cultural, and ethical/professional standards and consulting with the profession and stakeholders on these. It also includes developing and implementing pathways to registration and key operational policies to support these, such as the Council's *Policy on Grandparenting* and *Policy on English language requirements for registration*.

The Council is working hard towards a target of opening registrations in July 2023, and is preparing all the necessary application documentation to support practitioners as they prepare their applications.

Communication with stakeholders and the profession has been a key Council focus and it will continue to be as the Council moves forward. Once the bulk of practitioners have registered, the Council will turn its attention to engaging more directly with the public and some other key agencies to educate them on the fact that the profession is now regulated and what they can expect from the profession and from the Council.

There is still much work to do, but with the support, skills, and expertise available to us, the Council is well placed to shepherd the profession through into this new phase of regulation.

Ngā mihi nui,

A handwritten signature in black ink, appearing to read 'L. Pine', written in a cursive style.

Lindsey Pine
Registrar/General Manager

Council Members

Members are appointed to Council by the Minister of Health for an initial term and can be reappointed for subsequent three-year terms. After three, three-year terms a member must step down.

The following were Council members as at 31 March 2023.

Name:	Appointment as:	Date of original appointment:	Term:	Term ends:
Paddy McBride	Health practitioner member	20 May 2022	2022	2024 (2 years)
Xudong (Susan) Zhu	Lay person member	20 May 2022	2022	2025 (3 years)
Joan Campbell	Health practitioner member	20 May 2022	2022	2025 (3 years)
Ming-chun Wu	Lay person member	20 May 2022	2022	2024 (2 years)
Margaret Steel	Lay person member	20 May 2022	2022	2024 (2 years)
Adrienne Wing	Lay person member	20 May 2022	2022	2025 (3 years)
Brenda (Mana) Fleming	Health practitioner member	20 May 2022	2022	2024 (2 years)
Lizhou Liu	Health practitioner member	20 May 2022	2022	2025 (3 years)
Trudi Collins	Health practitioner member	20 May 2022	2022	2024 (2 years)



Paddy McBride (Chair)

MHSci (TCM), Grad Dip Clinical Acupuncture, Dip Ap Sci (Acupuncture)

Post Grad Cert Professional Supervision.

Paddy has been a practitioner of Chinese Medicine for more than 30 years. After completing her Masters at the University of Technology, Sydney (UTS) in 2002, Paddy returned to her hometown of Nelson to set up in clinical practice. After many years of working in multi-disciplinary clinics in both Australia and New Zealand, Paddy now works solo in her own practice, Acupuncture Richmond.

Paddy was the President of Acupuncture NZ for eight years from 2007-2015 and Vice President of the World Federation of Acupuncture Societies from 2009 - 2016. She returned to the Acupuncture NZ Council from 2019-21 in the role of Member Representative. Paddy has been long involved with the process of bringing Chinese Medicine through to registration under the HPCA Act and has been a member of various working groups over the last two decades. Her broad understanding of the profession both locally and internationally has been of considerable value in the setting up of the new Chinese Medicine Council of New Zealand.



Xudong (Susan) Zhu (Deputy Chair)

Susan Zhu is a legal professional with a background in community and business relations. She has nearly twenty years of governance experience in the corporate and community environment.

Susan is an elected member of the Whau Local Board, Auckland Council since 2013, and she also served on several advisory boards.

Susan practices in commercial law, family law and dispute resolution. She has also developed expertise in organizational strategic development in the public and private sectors.

Susan is committed to bring the diverse perspectives to the public and private boards to ensure that the best governance practice that reflects the diverse population of New Zealand.



Joan Campbell

RGON; MB; ChB; Dip Obst; MSc (Hons Psych); BHB; Clin Acup Cert (Nanjing, China); PG Dip (Traditional Chinese Acupuncture); PhD in Medicine

Dr Joan Campbell, New Zealand Pakeha, has 38 years' experience as a Chinese medicine practitioner, graduating first as a registered nurse/obstetric nurse, then medical doctor/GP obstetrician, and psychologist who has progressively integrated Chinese Medicine (CM) into her western medical practice from 1985. She has used her expertise to contribute to the profession's development in New Zealand, particularly through work with the New Zealand Qualifications Authority (NZQA) to create acupuncture unit standards and the development of the National Diploma in Acupuncture (1990-1996), its revision (2003-2005), and subsequent development of university degree courses in CM acupuncture. She is an NZQA qualified assessor and moderator, trained teacher of adult students, and author of published books and Chinese medicine manuals.

Joan was previously a university teacher of post-graduate Chinese medicine programmes at Auckland University of Technology for 14 years, as well as teaching for eight years at the Auckland-based New Zealand College of Chinese Medicine, and two semesters at the South Pacific College of Natural Medicine. She has extensive academic and research qualifications, and in 2020 graduated with a PhD in Medicine (University of Auckland), entitled “Barriers to health system change in New Zealand”; which analysed governance structures across the institutional components of the health system. She is currently undertaking a further PhD at the Nanjing University of Chinese Medicine, China.

Joan has broad experience in governance and regulation - as former Chair of the Medical Acupuncture Society of New Zealand Inc. and NZ representative at WHO and international Chinese medicine meetings; and founder and Chair (until 2014) of a voluntary regulator, registering competent acupuncturists - the New Zealand Acupuncture Standards Authority Inc, incorporated in 2000. Until 2021, she was a member of the Health Practitioners Competence Assurance Act (2003) Working Group that represented the profession in its regulatory process with government.

She was appointed as a practitioner member to the Chinese Medicine Council New Zealand, by the associate Minister of Health in June 2022.

Joan now works part time as a western medical doctor and Chinese medicine practitioner, and lives on a 10-acre block at Muriwai, north-west of Auckland, with her husband Graeme and cat Mindy.



Ming-chun Wu

Ming-chun Wu (MBA, BSc, BBus, BEd, BA) is a Chartered Director with the Institute of Directors with over 15 years’ experience in developing strategies and leading transformational changes to improve effectiveness and efficiency of organisations. Ms Wu brings governance experience, regulatory governance experience, and comprehensive knowledge of the public-sector having held senior roles at Te Puni Kōkiri / Ministry for Māori Development, the Ministry of Business, Innovation and Employment, Department of Conservation, Department of Internal Affairs, the Ministry of Social Development, and the Ministry of Education and other Government departments.

Ms Wu whakapapa to Taiwan works as a public sector consultant, specialising in strategy development and stakeholder management. She is a lay member and the Chair of the Finance and Risk Committee on the Chinese Medicine Council. Ms Wu is also a Board Member of the Pharmacy Council of New Zealand; Board Member of the Plumbers, Gasfitters and Drainlayers Board; Board Chair of Altrusa International Incorporated; Board Trustee of the Wellington Community Fund, and Director of the Network for Learning Limited.



Margaret Steel

Margaret Steel BSc, Dip Tchg

Margaret worked in professional regulation from the early 2000s until she retired in April 2021. She held senior leadership positions in several regulatory authorities including the Real Estate Authority, the Law Society, and the Dental Council. Most recently she was the Registrar for both the Medical Sciences Council and the Medical Radiation Technologist Board.

Having worked with the Health Practitioner Competence Assurance Act 2003 (the Act) for many years she has an excellent understanding of the principles and purpose of the Act.

Margaret is based in North Canterbury, is a volunteer at the local Citizens Advice Bureau, and spends much of her time planting and looking after native trees on her lifestyle block.



Adrienne Wing

Adrienne is one of four lay members of the Chinese Medicine Council of New Zealand, appointed by the Minister of Health.

She is a Barrister in Auckland who has been practising law for almost 30 years. As a lawyer, she has wide experience in both the public and private sectors in Auckland and Sydney. Her practice areas are in civil litigation, criminal law, and mental health law, and she has a strong interest and experience in regulatory, health and consumer law. She also writes for one of

the leading legal publishing houses.

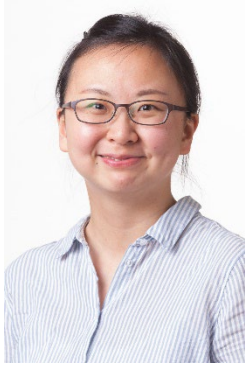
Adrienne recognises that consumer protection is paramount in any service sector, and especially so in the provision of health services where there is an ever-increasing interest and demand for non-Western health practices, such as Chinese medicine. She feels honoured to be part of the inaugural Chinese Medicine Council of New Zealand to promote and protect the health and safety of everyone in New Zealand.



Mana Fleming

After many years of working with people both individually and in groups, Mana has discovered the joy of witnessing empowerment when we claim our own body, mind, spirit and our own vital lives. Over the years, she has worked in the areas of community development, youth at risk, addictions counselling, sport and recreation, group fitness and Chinese Medicine.

With the things she has learned in theory and in practice, her aim is to help create a simple and straightforward passage into the regulation of Chinese Medicine in Aotearoa/New Zealand.



Lizhou Liu

Dr Lizhou Liu is a health practitioner member of the Chinese Medicine Council of New Zealand. Lizhou completed her Chinese medicine training in China and received a PhD in Health Sciences from the University of Otago. After her PhD, she has been working as an academic in the New Zealand education and research sector. Currently, she is working as a Research Advisor in Te Whatu Ora – Health New Zealand Waitaha Canterbury, as well as a Research Manager at the University of Canterbury.

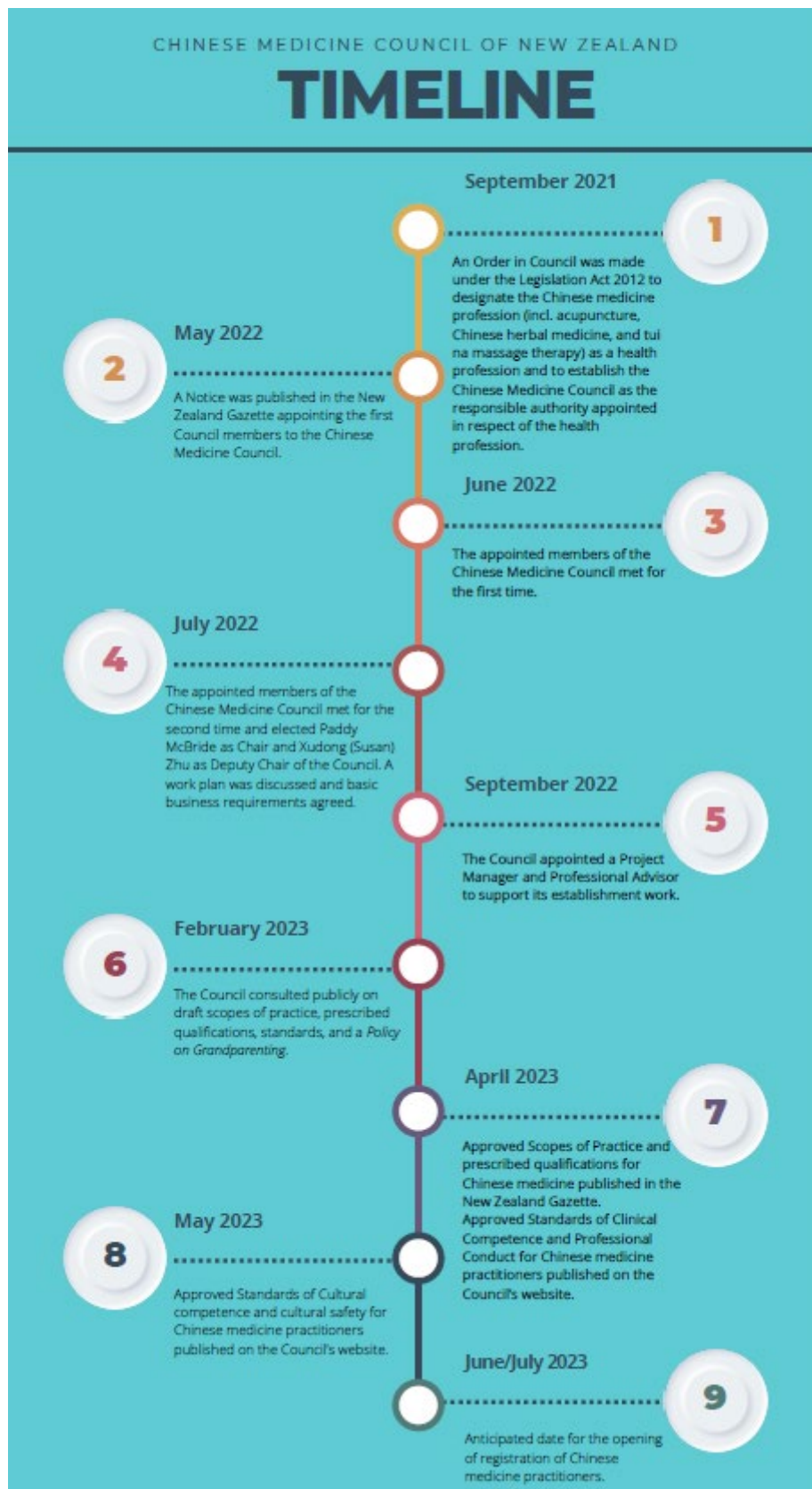


Trudi Collins

Introducing Trudi Collins, a practising acupuncturist and herbalist. After spending some years working in corporate Auckland, Trudi chose to pursue her life-long love of health and well-being by undertaking study at the New Zealand School of Acupuncture and Traditional Chinese Medicine. Completing four years of full-time study encompassing Acupuncture, Chinese Herbal Medicine and Tuina, Trudi graduated in 2002 and moved to Hawkes Bay where she continues to work in a thriving practise. In the intervening years, alongside maintaining a busy clinic, Trudi has been involved at the national level with a board position at Acupuncture New Zealand, assisting in the transition from New Zealand Register of Acupuncturists, long term strategic planning and conference organisation.

With her husband, she is an owner and Director of Somo Gardens, operating garden centres within Hawke's Bay, particularly involved in the marketing and communications functions. A mother of three, Trudi also volunteers with Giant's Boxing as a boxing coach and mentor to teenage girls.

Timeline



Chinese Medicine Council Achievements

From September 2021, Chinese medicine services were designated as a health profession and the Chinese Medicine Council of New Zealand was established under the Health Practitioners Competence Assurance Act 2003 (the HPCA Act).

The Nursing Council of New Zealand proved instrumental in liaising between the working party appointed to work towards establishing the Council, the professional bodies who lobbied the Government for regulation, and the Ministry of Health, to facilitate and ultimately establish the Council. The Council would like to thank the Nursing Council for its support and guidance during this time.

The Nursing Council also generously agreed to provide back-office functions to the Council and to share its premises. This includes the provision of finance and payroll support services, property, and facilities management. This has since been formalised in a Service Level Agreement.

A significant amount of work has been undertaken to establish the Council and to set up the framework for regulation of the profession and the processes and policies supporting the registration of practitioners. The Council formally met on six occasions.

Since the formation of the Council, we are able to report that we have achieved the following key milestones which are outlined below.

Formation of the Council

The Council was appointed by the Minister of Health on 20 May 2021. It consists of five health practitioners and four lay people (Paddy McBride, Joan Campbell, Trudi Collins, Brenda (Mana) Fleming, Lizhou Liu, Margaret Steel, Ming-chun Wu, Adrienne Wing, and Xudong (Susan) Zhu). They have brought a wealth of knowledge and a passion for establishing professional standards and regulatory processes in order to keep the public safe.

Education (Accreditation)

Standards for the accreditation of providers of prescribed Chinese medicine qualifications were developed and consulted on publicly. Following consultation, these standards were finalised and approved shortly after year end, in April 2023. The Council is yet to formally accredit the two providers of New Zealand Chinese medicine qualifications. It is anticipated that the accreditation process may take up to two years.

Registration Pathways

The Council has laid out four different and distinct pathways for New Zealand registration which were designed to acknowledge both experience and qualifications in Chinese medicine.

Pathway 1 'Grandparenting'	Pathway 2 'NZ-qualified'	Pathway 3 'Australian registered'	Pathway 4 'Overseas-qualified'
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<p>The Council’s Grand-parenting pathway is a transitional pathway that allows certain practitioners to register with the Council and continue to practise their profession before implementation of new rules & regulations take full effect. This is informed by Section 13(b) of the HPCA Act which states that in the prescribing of qualifications “the qualifications may not unnecessarily restrict the registration of persons as health practitioners.”</p> <p>This pathway is temporary and will remain open until 30 June 2024 only.</p>	<p>Applicants who hold any of the Council’s prescribed qualifications from New Zealand education institutions are eligible to apply via this pathway.</p>	<p>The Trans-Tasman Mutual Recognition Act (TTMRA) 1997 recognises Australian and New Zealand registration standards as equivalent and enhances the freedom of registered professionals to work in either country.</p> <p>An applicant who is currently registered and in good standing in Australia, is eligible to register in New Zealand via this pathway.</p>	<p>Applicants with Chinese medicine qualifications obtained overseas can apply via the Overseas-qualified pathway.</p> <p>This pathway requires that an overseas qualification be submitted for assessment against the Council’s Accreditation Standards.</p> <p>Those who have completed qualifications overseas, at the discretion of the Council, may need to successfully pass a competency assessment as set by the Council.</p>
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Scopes of Practice

After public consultation, the following scopes of practice were published in the New Zealand Gazette shortly after year end, in April 2023.

Under section 11 of the HPCA Act, following the Council has specified the following scopes of practice for Chinese medicine services:

- Scope of practice – Chinese medicine practitioner (acupuncturist)
- Scope of practice – Chinese herbal medicine practitioner
- Scope of practice – Chinese massage (tuina) practitioner
- Scope of practice – Chinese medicine specialist
- Scope of practice – Chinese medicine special purpose

The content of each scope of practice is set out below.

Scope of practice – Chinese medicine practitioner (acupuncturist)

Chinese medicine practitioners have majored in acupuncture and associated techniques. They have the knowledge, skills and attributes a competent registered practitioner requires to practise acupuncture and associated techniques. They utilise the principles and theories of Chinese medicine to provide a variety of services to individuals and populations to develop, maintain, restore, and optimise health and function throughout their lifespan. This includes providing services to those who are compromised by ageing, injury (including mental injury), disease, or environmental factors. A Chinese medicine practitioner provides tangata whai ora with a range of preventive and intervention methods using the principles of evidence-informed practice and empirical research. Chinese medicine supports quality of life and health promotion through illness and disease prevention and treatment/intervention. This encompasses physical, psychological, emotional, and social well-being.

Chinese medicine practitioners work within the limits of their own professional expertise and competence and ensure that all health services they provide are consistent with their education and skill level.

Scope of practice – Chinese herbal medicine practitioner

Chinese herbal medicine practitioners have majored in herbal medicine and have the knowledge, skills and attributes a competent registered practitioner requires to practise Chinese herbal medicine. A practitioner trained in Chinese herbal medicine takes a history, diagnoses, and treats by prescribing, compounding or formulating, dispensing, and administering individualised Chinese herbal formulae or medicines in accordance with the theory and philosophy of Chinese medicine. A Chinese herbal medicine practitioner provides tangata whai ora with a range of preventive and intervention methods using the principles of evidence-informed practice and empirical research.

Chinese medicine practitioners work within the limits of their own professional expertise and competence and ensure that all health services they provide are consistent with their education and skill level.

Scope of practice – Chinese massage (tuina) practitioner

Chinese massage practitioners have majored in tuina and have the knowledge, skills and attributes a competent registered practitioner requires to practise tuina. Tuina practitioners use the theory and philosophy of Chinese medicine to diagnose conditions and treat tangata whai ora. Tuina is an external treatment method suitable for use on people of all ages and includes the practice of specific Chinese medical manipulations and bone setting techniques. Practitioners performing Chinese medical manipulation and bone setting techniques must work within the limits of their own professional expertise and competence and are accountable for ensuring that all health services they provide are consistent with their education and skill level.

Scope of practice – Chinese medicine practitioner – Specialist

Specialist registration is an additional registration held in conjunction with another CM scope. It recognises CM practitioners with Council approved post-graduate qualifications, or clinical expertise, in a specific practice area recognised as a specialty area by the Council. The practitioner will demonstrate competence in a relevant area of academic achievement and/or clinical practice above the level of an undergraduate qualification and is recognised as a specialist in their designated field of expertise. The Council has recognised the following specialist areas of Chinese medicine practice:

- women's health;
- mental health;

- paediatrics;
- dermatology;
- musculoskeletal;
- pain;
- neurology;
- oncology;
- education; and
- research.

The Council can use its discretion on a case-by-case basis if an applicant wants to apply to be a Chinese medicine specialist in a defined field of practice that is not on this list.

A practitioner registered in the specialist scope of practice will have their recognised specialty area(s) recorded in their scope of practice (e.g., “Chinese Medicine Practitioner – Specialist (women’s health)”).

Scope of practice – Chinese Medicine special purpose

Special purpose registration is a time-limited registration for a specific purpose approved by the Council. Temporary time-limited registration for a specific purpose may include short term teaching contracts; clinical supervision; post-graduate training; research; short term locum work; or working in an emergency or other short-term situation to provide essential Chinese medicine services e.g., pandemic, or national disaster.

The purpose of this scope is to create a mechanism to allow competent Chinese medicine practitioners and academics to carry out specific tasks without requiring full registration with the Council. This scope does not apply to visiting presenters whose training is aimed at registered practitioners. Special purpose registration will restrict the activities of the applicant solely to those activities defined and approved by the Council. The approved activities, and the time-limit on the special purpose registration, will be recorded in each special purpose practitioner’s scope of practice. Special purpose practitioners cannot practise outside of their approved activities and must inform the Council as soon as practicable if their special purpose activities cease or change in any way.

Special purpose registration is **not** a pathway to permanent general or specialist registration. Entry on the Register is cancelled after the fixed time-period determined by the Council on a case-by-case basis.

Prescribed qualifications

After public consultation, under Section 12 of the HPCA Act, the following prescribed qualifications for registration were published in the New Zealand Gazette shortly after year end, in April 2023.

Chinese medicine practitioner (acupuncturist)

All applicants must:

- Hold a Bachelor of Health Science majoring in Acupuncture (Level 7) from the New Zealand School of Acupuncture and TCM or the New Zealand College of Chinese Medicine.

OR

- Hold a 4-year Bachelor of Health Science in Acupuncture and Chinese Herbal Medicine (level 7) from the New Zealand College of Chinese Medicine.

OR

- c) Have their qualification assessed by the Council for persons holding a Chinese medicine qualification gained overseas and, at the Council's discretion, obtain a pass in a competency-based assessment set by the Council.

OR

- d) Qualify for registration via the grand-parenting pathway as outlined in the Council's Policy on Grand-parenting.

Chinese herbal medicine practitioner

All applicants must:

- a) Hold a 3-year Bachelor of Health Science majoring in Chinese herbal medicine (Level 7) from the New Zealand College of Chinese Medicine.

OR

- b) Hold a 4-year Bachelor of Health Science in Acupuncture and Chinese Herbal Medicine (level 7) from the New Zealand College of Chinese Medicine.

OR

- c) Hold a Graduate Diploma in Health Science (Chinese Herbal Medicine) (Level 7) from the New Zealand School of Acupuncture and TCM.

OR

- d) Hold a Master of Chinese Medicine from the New Zealand College of Chinese Medicine.

OR

- e) Have their qualification assessed by the Council for persons holding a Chinese medicine qualification gained overseas and, at the Council's discretion, obtain a pass in a competency-based assessment set by the Council.

OR

- f) Qualify for registration via the grand-parenting pathway as outlined in the Council's Policy on Grand-parenting.

Chinese massage (tuina) practitioner

All applicants must:

- a) Hold a 2-year Diploma in Tuina (Level 7) from the from the New Zealand School of Acupuncture and TCM or the New Zealand College of Chinese Medicine.

OR

- b) Hold a Graduate Certificate in Health Sciences (Tuina Massage Therapy) (Level 7) from the New Zealand School of Acupuncture and TCM.

OR

- c) Have their qualification assessed by the Council for persons holding a Chinese medicine qualification gained overseas and, at the Council's discretion, obtain a pass in a competency-based assessment set by the Council.

OR

- d) Qualify for registration via the grand-parenting pathway as outlined in the Council's Policy on Grand-parenting.

Chinese medicine practitioner: Specialist

All applicants must hold registration within one or more of the following scopes of practice:

- I. Scope of practice – Chinese medicine practitioner (acupuncturist)
- II. Scope of practice – Chinese herbal medicine practitioner
- III. Scope of practice – Chinese massage (tuina) practitioner

AND

- a) Have at least five years of post-qualification clinical and/or research experience with at least three years of experience relevant to the nominated area of specialist Chinese medicine practice;

AND

- b) Hold a Council approved postgraduate qualification in a specific practice area recognised as a specialty area by the Council that is relevant to clinical and/or non-clinical Chinese medicine practice;

OR

- c) Have demonstrated competence and education beyond the level of a general scope Chinese medicine practitioner in a specific practice area recognised as a specialty area by the Council that is relevant to clinical and/or non-clinical Chinese medicine practice.

Chinese medicine: special purpose

All applicants must:

Provide evidence of the special purpose activity (for example an invitation to teach or research proposal with sufficient information to detail the tasks or activities to be performed; where they are to be performed; and the time-frame); and details of any anticipated patient contact, and an appropriate risk assessment and management plan.

AND

- a) Be registered, and in good standing, with an overseas Chinese medicine regulatory authority (where such arrangements are in place);

OR

- b) Hold a Chinese medicine qualification which is assessed by Council to be applicable to the Chinese medicine scopes of practice, and relevant to the special purpose registration application;

OR

- c) Be able to provide evidence assessed by Council to be relevant to the Chinese medicine scopes of practice, of achievements in research/scholarship or teaching either by publication or educational experience.

Setting Standards for Chinese medicine practitioners

The Council has been appointed under the HPCA Act to protect the health and safety of the public by ensuring that Chinese medicine practitioners have an assured level of knowledge, experience and skill and are competent to practise Chinese medicine. The Council is required to set standards of clinical competence, cultural competence (including competencies that will enable inclusive and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession.

The competencies describe the threshold or minimum level of professional capability required for both initial and continuing practise. A practitioner practising below this level of competency may pose a risk to the public, therefore the Council recognises that many CM practitioners may seek to ensure they excel and maintain a higher level of competence. The competencies/standards set by the Council are closely aligned and should be read in conjunction with each other.

In setting its standards, the Council recognises and seeks to give effect to Te Tiriti o Waitangi as the foundational governance document in Aotearoa New Zealand, and affirms the rights of iwi, hapū, and Māori in the shaping and governance of our nation. Te Tiriti o Waitangi also influences our roles and responsibilities as citizens in our community and shapes personal and professional conduct. The Council recognises its obligations under Te Tiriti o Waitangi and confirms its commitment to them. The Council also recognises and respects the historical and philosophical origins of Chinese medicine.

During the year, the Council consulted publicly on its draft standards and received some valuable feedback from practitioners and stakeholders that further informed the final published documents. It is intended that these will be 'living documents' that are regularly reviewed and enhanced as the practice of Chinese medicine evolves.

Standards of clinical competence

In practice, Chinese medicine practitioners will demonstrate elements from several domains. Clinical competence requires an ability to draw on and integrate the breadth of these key elements. Further integration of the key elements across the four domains will be demonstrated professionally in both clinical and non-clinical settings.

Domain 1: Safe, professional, and ethical practice

Domain 2: Communication and collaboration

Domain 3: Evidence-informed practice

Domain 4: Chinese medicine clinical practice

Each domain comprises a list of statements that identify the scope of competencies a CM practitioner must demonstrate for that domain.

For the full Standards, please refer to the 'Practice Standards' page of the Council's website.

Standards of Cultural Safety and Cultural Competence

Cultural safety requires that Chinese medicine practitioners must consider, respect, and honour the history of Māori as tangata whenua by embedding a commitment to bicultural principles. Recognising our bicultural heritage, Te Tiriti o Waitangi (Te Tiriti), and Te Tiriti core principles and articles are integral to Chinese medicine practice in Aotearoa New Zealand. Cultural safety focuses on the experience of tangata whai ora¹ to define and improve the quality of care. It also involves practitioners reflecting on their own views and biases and how these could affect their decision-making, and their impact on health inequities and health outcomes.

The Council recognises that acquiring cultural safety and competence is a cumulative process occurring over many years and in many contexts. It relies on understanding one's own cultural values and the influence these have on relationships and interactions with tangata whenua and tangata whai ora. Formal education about cultural safety and competence are a requirement for registration to practise. However, Chinese medicine practitioners will continue to develop cultural safety and competence throughout their professional careers.

Culturally safe practice requires Chinese medicine practitioners to recognise that Te Tiriti is a founding document of government in New Zealand and established the country as a nation. Chinese medicine practitioners have a responsibility to honour and meaningfully enact the principles of Te Tiriti o Waitangi and deliver services in ways that enable equitable outcomes for Māori.

When considering the needs of tangata whai ora, cultural safety requires Chinese medicine practitioners to reflect on, take ownership of, and consider in their practice:

- a. The effect of their own culture, history, and attitudes.
- b. The ongoing development of their own cultural awareness and an understanding of how social-cultural influences inform biases that impact on interactions with tangata whai ora, whānau, and colleagues.
- c. Consciously not imposing their cultural values and practices on tangata whai ora.

Culturally competent practice requires a Chinese medicine practitioner to build a relationship and provide a healthcare environment that supports the cultural safety of all tangata whai ora. It requires Chinese medicine practitioners to demonstrate good interpersonal communication skills so tangata whai ora can identify what is important in relation to their care.

For the full Standards, please refer to the 'Practice Standards' page of the Council's website.

Standards of Professional Conduct

The Standards of Professional Conduct is a set of standards defined by the Council that describe the behaviour or conduct that Chinese medicine practitioners are expected to uphold. The standards provide guidance on appropriate behaviour for all Chinese medicine practitioners and can be used by

¹ The term 'tangata whai ora' (which means 'a person seeking health') has been used instead of the terms patient/client/health consumer/service user. This is to encompass persons who may be engaging with Chinese medicine in both clinical and/or non-clinical settings.

Tangata Whai ora, Chinese medicine practitioners, employers, the Council and other bodies to evaluate the behaviour of Chinese medicine practitioners. The failure to uphold these standards of behaviour could lead to a disciplinary investigation.

Chinese medicine practitioners are expected to uphold exemplary standards of conduct while undertaking their professional role. Because Chinese medicine practitioners must have the trust of the public to undertake their professional role, they should also carry these high standards into their personal lives.

These standards may also be relied upon in other contexts such as employment disputes or court proceedings as a measure against which a Chinese medicine practitioner can be held accountable. It is therefore important for Chinese medicine practitioners to understand that, as a registrant with the Council, it is the practitioner's responsibility to always comply with these standards.

The values underpinning the standards are:

- Respect;
- Trust;
- Partnership; and
- Integrity.

There are eight key principles and associated standards provided within the document that are a set of technical definitions, specifications, and guidelines for practitioners, against which disciplinary action can be measured. These principles are based on the values underpinning professional conduct and are of equal importance.

Principle 1: Act with integrity and honesty

Principle 2: Respect the cultural needs and values of tangata whai ora, their whānau, and families

Principle 3: Work in partnership with tangata whai ora, whānau and families, and respect their dignity, individuality, and rights

Principle 4: Maintain the trust of the tangata whai ora by providing safe and competent care

Principle 5: Maintain excellence in CM practice including being competent and responsible for own professional development

Principle 6: Work collaboratively with colleagues, agencies, and communities to provide competent care of tangata whai ora

Principle 7: Take responsibility for maintaining own health and wellbeing

Principle 8: Support ethical research

For the full Standards, please refer to the 'Practice Standards' page of the Council's website.

Collaboration

The establishment of the Council was made possible through collaboration with a number of key stakeholders whose input was significant in helping develop the regulation framework for Chinese medicine practitioners.

As a new regulatory authority, we were grateful for the body of knowledge we were able to draw upon from existing regulatory authorities in addition to key stakeholders within the Chinese medicine profession.

We would like to specifically acknowledge contributions made from the following:

- The Nursing Council of New Zealand/Te Kaunihera Tapuhi
- The Paramedic Council of New Zealand/Te Kaunihera Manapou
- The Ministry of Health/Manatū Hauora
- The Chinese Medicine Working Group
- Acupuncture New Zealand
- The New Zealand Acupuncture Standards Authority
- The New Zealand Register of Traditional Chinese Medicine Practitioners
- The New Zealand Chinese Medicine and Acupuncture Society
- The New Zealand College of Chinese Medicine
- The New Zealand School of Acupuncture and Traditional Chinese Medicine
- The Chinese Medicine Board of Australia.

Looking to the future

The past year has focused on ensuring that the Council has a strong foundation that allows us to efficiently and effectively regulate the Chinese medicine profession.

Now that we are well on our way to being fully established, we have begun concentrating on the next set of key tasks and strategic priorities that will guide our work programme and the further development of our regulatory framework over the coming years.

Some of the main areas of future action we have identified include:

- Opening registration of practitioners – this is currently scheduled for June/July 2023.
- Continuing Professional Development/Recertification for Chinese medicine practitioners – developing and consulting on a compulsory recertification programme for the profession to ensure the public of a practitioner’s ongoing competence to practise.
- Development of supplementary standards and guideline documents for the profession – including an Informed Consent Standard, Advertising Standards, Guidelines for Safe Prescribing, Statement on Cervical Neck Manipulations, a Professional Boundaries Standard, amongst others.
- Accreditation of the two New Zealand Chinese medicine education providers
- Engaging with and developing relationships with key stakeholder agencies and groups, including the New Zealand public, to better inform the work of the Council.

We plan to increase communication to registered Chinese medicine practitioners, so they are aware of what the Council is working on, what its future plans are, and to enhance the professionalism of Chinese medicine practitioners by making it clear what the Council’s standards require of the profession.

INDEPENDENT AUDITOR'S REPORT

TO THE READERS OF CHINESE MEDICINE COUNCIL'S PERFORMANCE REPORT FOR THE YEAR ENDED 31 MARCH 2023

The Auditor-General is the auditor of the Chinese Medicine Council ('the Council'). The Auditor-General has appointed me, Chrissie Murray, using the staff and resources of Baker Tilly Staples Rodway Audit Limited to carry out the audit of the performance report of the Council, on his behalf.

Opinion

We have audited the performance report of the Council that comprises the entity information and statement of financial position as at 31 March 2023, the statement of financial performance, statement of movement in equity and statement of cash flows for the year ended on that date and the notes to the performance report that include the statement of accounting policies and other explanatory information.

In our opinion, the performance report of the of the Council:

- presents fairly, in all material respects:
 - its entity information and financial position as at 31 March 2023; and
 - its financial performance and cash flows for the year then ended; and
- complies with generally accepted accounting practice in New Zealand in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Public Sector).

Our audit was completed on 12 April 2024. This is the date at which our opinion is expressed. We acknowledge that our audit was completed later than required by section 41 of the Charities Act 2005. This was due to the auditor shortage in New Zealand.

The basis for our opinion is explained below. In addition, we outline the responsibilities of the Council and our responsibilities relating to the performance report and we explain our independence.

Basis for our opinion

We carried out our audit in accordance with the Auditor-General's Auditing Standards, which incorporate the Professional and Ethical Standards and the International Standards on Auditing (New Zealand) issued by the New Zealand Auditing and Assurance Standards Board. Our responsibilities under those standards are further described in the Responsibilities of the auditor section of our report.

We have fulfilled our responsibilities in accordance with the Auditor-General's Auditing Standards.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of the Council for the performance report

The Council members are responsible for preparing the performance report that is fairly presented and that complies with generally accepted accounting practice in New Zealand.

The Council members are responsible for such internal control as they determine is necessary to enable the preparation of performance report that is free from material misstatement, whether due to fraud or error.

In preparing the performance report, the Council members are responsible for assessing the Council's ability to continue as a going concern. The Council members are also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless the Council members intend to wind-up the Council or to cease operations, or have no realistic alternative but to do so.

The Council's responsibilities arise from the Health Practitioners Competence Assurance Act 2003 and the Charities Act 2005.

Responsibilities of the auditor for the audit of the performance report

Our objectives are to obtain reasonable assurance about whether the performance report, as a whole, is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit carried out in accordance with the Auditor-General's Auditing Standards will always detect a material misstatement when it exists. Misstatements are differences or omissions of amounts or disclosures, and can arise from fraud or error. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of readers taken on the basis of these performance report.

We did not evaluate the security and controls over the electronic publication of the performance report.

As part of an audit in accordance with the Auditor-General's Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. Also:

- We identify and assess the risks of material misstatement of the performance report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- We obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Council's internal control.
- We evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Council.

- We conclude on the appropriateness of the use of the going concern basis of accounting by the Council and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Council's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the performance report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Council to cease to continue as a going concern.
- We evaluate the overall presentation, structure and content of the performance report, including the disclosures, and whether the performance report represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Council regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Our responsibilities arise from the Public Audit Act 2001.

Independence

We are independent of the Council in accordance with the independence requirements of the Auditor-General's Auditing Standards, which incorporate the independence requirements of Professional and Ethical Standard 1: *International Code of Ethics for Assurance Practitioners* issued by the New Zealand Auditing and Assurance Standards Board.

Other than the audit, we have no relationship with, or interests in, the Council.



Chrissie Murray
Baker Tilly Staples Rodway Audit Limited

On behalf of the Auditor-General
Wellington, New Zealand

CHINESE MEDICINE COUNCIL

PERFORMANCE REPORT FOR THE YEAR ENDED 31 MARCH 2023

CONTENTS

Non-Financial information:	PAGE
Entity information	2
Financial information:	
Statement of Financial Performance	3
Statement of Movement in Equity	3
Statement of Financial Position	4
Statement of Cash Flows	5
Statement of Accounting Policies	6
Notes to the Performance Report	7
Audit Report	11

CHINESE MEDICINE COUNCIL

Entity Information

FOR THE YEAR ENDED 31 MARCH 2023

Legal Name of Entity: CHINESE MEDICINE COUNCIL

Type of entity and Legal Basis : The Chinese Medicine Council of New Zealand (the Council) was established as a Responsible Authority (RA) under the Health Practitioners Competence Assurance Act 2003 (HPCA Act) on the 1st of November 2021 to regulate Chinese medicine services in New Zealand. Members were appointed by the Minister of Health in May 2022 and first met in July 2022.

Entity is a registered Charity under the Charities Act 2005, registration number CC60389

Entity's Purpose:

The Council is responsible for:

- setting standards for entry to the Register
- registering Chinese Medicine practitioners
- setting standards of clinical and cultural competence, and ethical conduct to be met by all Chinese Medicine practitioners
- recertifying all practising Chinese Medicine practitioners each year
- reviewing and remediating the competence of Chinese Medicine practitioners
- investigating the conduct or health of Chinese Medicine practitioners where there are concerns about their performance and taking appropriate action.

As a part of those functions and responsibilities, the Council:

- sets accreditation standards and competencies for Chinese Medicine
- monitors and accredits the Chinese Medicine programmes to ensure the quality of education and training is appropriate
- sets scopes of practice within which Chinese Medicine practitioners may practise
- prescribes qualifications for each scope of practice
- maintains a public register of all registered Chinese Medicine practitioners, including those who are not currently practising
- issues annual practising certificates to Chinese Medicine practitioners who have maintained their competence and fitness to practise, to continue practising their profession
- develops and maintains minimum standards through practice standards that all Chinese Medicine practitioners must comply with
- requires registered Chinese Medicine practitioners to undertake continuing professional development education
- manages Chinese Medicine practitioners suffering from health issues affecting their practice
- places conditions on, or restricts a Chinese Medicine practitioner's scope of practice, or suspends their practising certificate, if that is appropriate to protect the health and safety of the public.

The Council's role is to protect the health and safety of patients and the public, not to protect the interests of Chinese Medicine practitioners. The Council has legal powers that permit it to enforce the standards the public have a right to expect of Chinese Medicine practitioners in New Zealand, and it is the Council's goal, to administer those powers, consistently, fairly, and effectively.

Strategic Direction

Building public trust and confidence in Chinese Medicine as a safe, valid, and integral part of the Aotearoa New Zealand Healthcare system.

Entity Structure:

Council members are appointed by the Minister of Health. The Chinese Medicine Council's current structure is five practitioners and four lay members.

Main Sources of the entity's cash and resources:

The Council has received its start up funds from The New Zealand Register of Acupuncturists and New Zealand Acupuncture Standards Authority Incorporated.

Contact details:

Physical Address: Level 5, 22 Willeston Street, Wellington 6011

Phone: +64 4 978 5040

Email: reception@chinesemedicinecouncil.org.nz

Website: <https://www.chinesemedicinecouncil.org.nz>



**CHINESE MEDICINE COUNCIL
STATEMENT OF FINANCIAL PERFORMANCE
FOR THE YEAR ENDED 31 MARCH 2023**

	NOTE	2023
Revenue		\$
Establishment Grant		225,402
Interest		169
Total Revenue		<u>225,571</u>
Expenditure		
Council & Committees	1	77,306
Secretariat	2	192,462
Total Expenditure		<u>269,768</u>
Net Surplus/(Deficit)		<u><u>(44,196)</u></u>

**CHINESE MEDICINE COUNCIL
STATEMENT OF MOVEMENT IN EQUITY
FOR THE YEAR ENDED 31 MARCH 2023**

	2023
	\$
Accumulated funds at the beginning of period	-
Net surplus/(deficit) for the period	(44,196)
Accumulated funds at the end of period	<u><u>(44,196)</u></u>

The accompanying notes form part of these financial statements



**CHINESE MEDICINE COUNCIL
STATEMENT OF FINANCIAL POSITION**

AS AT 31 MARCH 2023

	NOTE	2023 \$
Equity	4	<u>(44,196)</u>
Current Assets		
Cash and cash equivalents		11,502
Prepayments		3,124
Total Current Assets		<u>14,626</u>
Non-Current Assets		
Property, Plant and equipment	3	<u>9,440</u>
Total Assets		<u>24,066</u>
Current Liabilities		
Creditors and accrued expenses	5	63,185
Goods and services tax payable		4,708
Withholding tax payable		369
Total Current Liabilities		<u>68,262</u>
Total Liabilities		<u>68,262</u>
Net Assets		<u>(44,196)</u>

For and on behalf of the Council.



Paddy McBride
Chair

Dated: 12 April 2024



Ming-chun Wu
Council member

Dated: 12 April 2024

The accompanying notes form part of these financial statements



**CHINESE MEDICINE COUNCIL
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2023**

	2023
	\$
Cash flows from Operating Activities	
<i>Cash was received from:</i>	
Establishment Funding	225,402
Interest revenue	169
<i>Cash was applied to:</i>	
Payments to suppliers	(213,951)
GST	11,550
Net cash flows from operating activities	<u>23,170</u>
Cash flows from Investing and Financing Activities	
<i>Cash was received from:</i>	
<i>Cash was applied to:</i>	
Purchase of property, plant & equipment	(11,669)
Net Cash Flows from Investing and Financing Activities	<u>(11,669)</u>
Net Increase / (Decrease) in Cash	<u>11,502</u>
Opening Cash Brought Forward	-
Closing Cash Carried Forward	<u><u>11,502</u></u>
<i>Represented by:</i>	
Cash in bank	11,502
Cash and Cash equivalents	<u><u>11,502</u></u>



CHINESE MEDICINE COUNCIL STATEMENT OF ACCOUNTING POLICIES

FOR THE YEAR ENDED 31 MARCH 2023

BASIS OF PREPARATION

The Council is a body corporate established by the Health Practitioners Competence Assurance Act 2003 and is a Responsible Authority under that Act.

The financial statements have been prepared in accordance with generally accepted accounting practice in New Zealand (NZ GAAP) and have been prepared on the basis of historical cost.

The Council has elected to apply PBE SFR-A (PS) Public Benefit Entity Simple Format Reporting - Accrual (Public Sector) on the basis that it does not have public accountability and has total annual expenses of equal to or less than \$2,000,000. All transactions in the Performance Report are reported using the accrual basis of accounting. The Performance Report is prepared under the assumption that the entity will continue to operate in the foreseeable future.

SPECIFIC ACCOUNTING POLICIES

Income recognition

Fees received for the issue of Annual Practising Certificate and Non Practising Fees are recognised in the year to which the fees relate. All other fees are recognised on receipt.

Establishment Funding

Establishment funding with conditions are held as revenue in advance until the conditions are met. Once met, the amounts are recorded as revenue.

Receivables

Receivables are stated at estimated realisable values.

Property, plant & equipment

Initially stated at cost and depreciated as outlined below. Initial cost includes the purchase consideration plus any costs directly attributable to bringing the asset to the location and condition required for its intended use.

Assets are written down immediately if any impairment in the value of the asset causes its recoverable amount to fall below its carrying value.

Depreciation

Fixed Assets are shown at original cost less accumulated depreciation. Depreciation has been calculated over the expected useful life of the assets at the following rates:

Computer Equipment 3 years straight line

Taxation

The Council is registered as a charitable entity under the Charities Act 2005. It is exempt from Income Tax.

Investments

Investments are recognised at cost. Investment income is recognised on an accruals basis where appropriate.

Goods & Services Tax

The Council is registered for Goods & Services Tax (GST), and all amounts are stated exclusive of GST, except for receivables and payables that are stated inclusive of GST.

Leases

Payments made under operating leases are recognised in the statement of financial performance on a basis representative of the pattern of benefits expected to be derived from the leased asset.

Cash and cash equivalents

Cash and cash equivalents includes petty cash, cheque account, saving account with banks.



CHINESE MEDICINE COUNCIL

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

	NOTE	2023 \$
COUNCIL & COMMITTEES		
Fees		45,078
Meeting expenses, training, travel, etc		25,388
Projects		<u>6,840</u>
		<u>77,306</u>
Paddy McBride (Chair)		6,848
Xudong (Susan) Zhu (Deputy Chair)		4,862
Ming-chun Wu		6,923
Joan Campbell		4,386
Lizhou Liu		5,332
Margaret Steel		5,676
Mana Fleming		3,526
Trudi Collins		3,182
Adrienne Wing		4,343
		<u>45,078</u>

Fees paid to Council Members for attending Council, committee and working party meetings and participating in other forums and providing input on specific projects are disclosed.

	2023
The total Fulltime Equivalent of Council Members	0.24

2. SECRETARIAT

Audit fees	9,566
Depreciation & amortisation	2,229
Legal costs	15,087
Occupancy costs	8,332
Other costs	19,911
Professional fees	<u>137,337</u>
	<u>192,462</u>



CHINESE MEDICINE COUNCIL

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

3. PROPERTY, PLANT & EQUIPMENT

	Opening value	Current year additions	Current year disposal	Depreciation & Amortisation	Closing Value
At 31 March 2023					
Computer equipment	-	11,669		(2,229)	9,440
	-	11,669	-	(2,229)	9,440



CHINESE MEDICINE COUNCIL

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

	2023
4. EQUITY	\$
Accumulated surpluses with unrestricted use	
Balance at 1 April	-
Surplus/(deficit) for year	(44,196)
Balance at 31 March	<u>(44,196)</u>
Total Accumulated Funds	
Opening Balance	-
Surplus/(deficit)	(44,196)
Balance at 31 March	<u><u>(44,196)</u></u>

	2023
5. CREDITORS AND ACCRUED EXPENSES	\$
Accounts payable	53,619
Accrued expenses	9,566
	<u>63,185</u>

6. CONTINGENT LIABILITIES

No Contingent Liabilities as at 31 March 2023.

7. CAPITAL COMMITMENTS

There are no capital commitments at balance date.

8. SHARED SERVICES - LEASE AGREEMENT

A Partnership Group of Nursing Council of New Zealand, Occupational Therapy Board of New Zealand, Podiatrists Board of New Zealand, Dietitians Board, Midwifery Council of New Zealand, Psychotherapists Board of Aotearoa New Zealand, Osteopathic Council of New Zealand, New Zealand Chiropractic Board, Psychologist Board, Optometrists & Dispensing Opticians Board and Paramedic Council have entered into an agreement to co-locate to 22 Willeston Street, Wellington. The lease agreement for 22 Willeston Street (signed solely by Nursing Council of New Zealand) is for six years taking effect from February 2022 and expiring in February 2028.

To facilitate the management of shared resources, including a joint lease agreement for office rental purposes and corporate supports, the eleven RAs entered into an agreement for the provision of corporate services.

In October 2022 Nursing Council of New Zealand invited Chinese Medicine Council to join the Partnership Group and provided shared service assistance to the Council during this year.



**CHINESE MEDICINE COUNCIL
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

9. RELATED PARTY TRANSACTIONS

Payments to the Council disclosed in Note 1, other than that there is not any other transactions with related party noted during the year.

10. SUBSEQUENT EVENTS

Establishment Funds

On 19 May 2023, Chinese Medicine Council (CMC) signed an agreement with The New Zealand Register of Acupuncturists (Acupuncture NZ) Incorporated (AcNZ) and New Zealand Acupuncture Standards Authority (NZASA) incorporated for funding to establish the Council. In addition to the \$225,402 provided to the Council in 2022/2023, the following amounts have been received after the reporting date:

	Establishment Funding 2024	Loan 2024
AcNZ	128,169	218,000
NZASA	36,588	-
Total Establishment Funding (Including GST)	164,756	218,000

The Council agreed to repay any excess funds proportionatly to each funding entity.

The loan is repayable to AcNZ as per below:

	Repayment
20-Apr-24 \$	43,600
20-Oct-24 \$	43,600
20-Apr-25 \$	43,600
20-Oct-25 \$	43,600
20-Apr-26 \$	43,600
Total \$	218,000

Interest is payable at 2.3% per annum from the first repayment date

The Council repaid \$50,000 as excess funds to AcNZ on 4 September 2023.

Service Level Agreement

On the 15 August 2023 the Council signed a Service Level Agreement with Nursing Council of New Zealand. Under this agreement Nursing Council provides property, facilities and finance & payroll services to the Council. This agreement is effective from 1 April 2023 to 3 February 2028.

