



Chinese Medicine Council of New Zealand

ANNUAL REPORT

2024

For the Year Ending 31 March

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



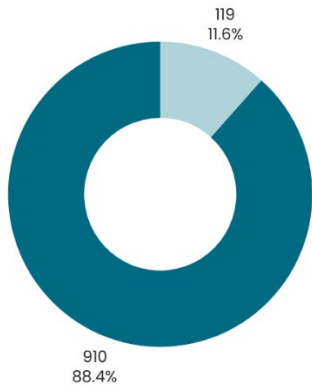
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Key Data at 31 March 2024

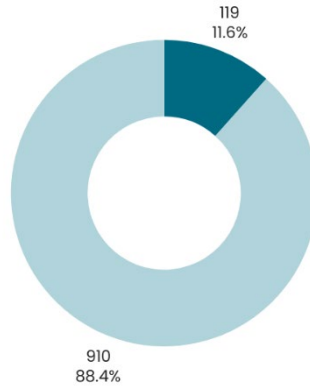
1029 Registered Chinese medicine practitioners



910

PRACTISING

Chinese Medicine Practitioners



119

NON-PRACTISING

Chinese Medicine Practitioners



Duties and functions

The Council's work is guided by the Health Practitioners Competence Assurance Act 2003 (the HPCA Act), our scopes of practice, and our standards of clinical competence, cultural competence and safety, and professional conduct.

Duties and functions as set out in the section 118 of the HPCA Act:

- To prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes:
- To authorise the registration of health practitioners under this Act, and to maintain registers:
- To consider applications for annual practising certificates:
- To review and promote the competence of health practitioners:
- To recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners:
- To receive information from any person about the practice, conduct, or competence of health practitioners, and, if it is appropriate to do so, act on that information:
- To notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public:
- To consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession:
- To set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession:
- To liaise with other authorities appointed under this Act on matters of common interest:
- To promote and facilitate inter-disciplinary collaboration and cooperation in the delivery of health services:
- To promote education and training in the profession
- To promote public awareness of the responsibilities of the authority:
- To exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.



Chair's Foreword



Tēnā koutou katoa,

One more year into the process of registration of Chinese Medicine in New Zealand. In the first year of the Council our focus was on producing all the documentation and consulting with the profession and other interested parties regarding the setting of standards for practitioners of Chinese medicine. The past year, however, the aim was to ensure that we were able to register practitioners from throughout the country in the various scopes of practice.

In April 2023, after extensive consultation, the Council decided on three scopes of practice covering acupuncture, herbal medicine or tuina or any combination of these aspects of Chinese medicine. In addition, we have added a fourth scope for those who have specialized in specific aspects of our profession. In order to achieve specialist recognition, practitioners must first be registered in at least one of the three main scopes. The specialist scope recognises practitioners with Council approved post-graduate qualifications, or clinical expertise, in a specific practice area. The practitioner must be able to demonstrate competence in a relevant area of academic achievement and/or clinical practice above the level of an undergraduate qualification. Before introducing the specialist scope, it was impossible to determine the depth of experience and skill that many of our practitioners had achieved. Thus far, the Council has registered practitioners with specialist skills in fields including research, education, mental health, women's health, sports medicine, ophthalmology, paediatrics, pain.

When registration opened in August 2023, the demand on our office staff was enormous. Despite a substantial proportion of applications being received in the first few weeks, they coped magnificently. After that initial rush, the number of applications for registration eased to a steady and more manageable flow. Many thanks to all those practitioners who sent through all their registration material so promptly. A big thankyou to Lindsey, Kate and Beeling for all their hard work in processing all the applications.

It has been a pleasure to continue working with my fellow Council members. For many of us it was quite a learning curve, but I am confident that we have now all settled well into our roles and have a far greater understanding of all that is involved with being a registered profession. We have an impressive range and depth of knowledge and skills around the Council table which helps us find our way through the more complex discussions at our regular Council meetings. Our committees too are well established and playing an important part in the growth and development of the work we are doing with and for the profession.

Over the course of the year, we have greatly appreciated the input from the professional bodies and the educational institutes. Our roles are quite different, but it is essential for the future of the profession that we all work in harmony and balance in taking care of our students and practitioners. Regular meetings have enabled us all to keep abreast of issues as they have arisen, and we look

forward to continuing our exchanges and growing these relationships in the year ahead. Work is underway to attain accreditation of the courses being provided at both our local teaching facilities.

As a Responsible Authority, the Chinese Medicine Council is committed to recognising diversity equity and inclusion in all areas of our work. We are committed to the principles of Te Tiriti o Waitangi and over the months ahead will endeavour to strengthen our relationships with Tangata Whenua as well as Tangata Tiriti and to deepen our knowledge of how best we can work in providing our services to everyone in Aotearoa New Zealand without prejudice or bias.

Now that we have most if not all practitioners registered, we are able to look toward raising the awareness of the public, other professions and organisations that Chinese Medicine is now registered under the HPCA Act. After working for so many years to get us to this point, it is exciting to see everything unfold and for Council members, office personnel and practitioners to settle into the new reality of being one of the regulated health professions. Chinese medicine has such an important part to play in the provision of health care in Aotearoa New Zealand. We are ready to get on with working with our colleagues from other professions and helping to provide a safe and effective addition or alternative to those seeking assistance with their health.

Nāku noa, nā



Paddy McBride
Chair

Registrar's Foreword

Tēnā koutou katoa,

It has been a whirlwind year with lots of challenges and hard work, but what an achievement, registering some 1029 practitioners! This second Annual Report represents the shift from preparing to open registration of practitioners to actively regulating and moving to business as usual as an established responsible authority.

The Council could only estimate what registrant numbers might be for the opening of registrations not knowing ultimately how many practitioners there might be practising in New Zealand, particularly those without membership of a professional body or association with the Accident Compensation Corporation (ACC). At year end, applications are still flowing in steadily, so the Council expects as application numbers reduce over the coming months that it will have a better indication of the total number of practising Chinese medicine practitioners in New Zealand.

The Council's key focusses this year have been on communication and registration. Getting word out that the profession is now regulated, that the Council exists and what its responsibilities are, and engaging with practitioners to establish the Register of Chinese medicine practitioners. The professional bodies and ACC proved instrumental in helping the Council get word out to much of the Chinese medicine profession that registration had opened, and we thank them for their help with this important messaging.

Engagement between the profession and the Council has been positive so far, with lots of enquiries responded to and statements issued on what regulation means and how practitioners can modify their current practices to ensure compliance with the Council's standards, statements, and guidelines going forward.

Now that a good majority 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 the Council looks forward to working with public, practitioners, and stakeholders to build greater public trust and confidence in Chinese medicine as a safe, valid, and integral part of the Aotearoa healthcare system.

Ngā mihi nui,



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 2024.

Name:	Appointment as:	Date of original appointment:	Term:	Term ends:
Paddy McBride	Health practitioner member	20 May 2022	2024	2027 (3 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	2024	2026 (2 years)
Margaret Steel	Lay person member	20 May 2022	2024	2027 (3 years)
Adrienne Wing	Lay person member	20 May 2022	2022	2025 (3 years)
Brenda (Mana) Fleming	Health practitioner member	20 May 2022	2024	2027 (3 years)
Lizhou Liu	Health practitioner member	20 May 2022	2022	2025 (3 years)
Trudi Collins	Health practitioner member	20 May 2022	2024	2026 (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.

Joan Campbell (Deputy Chair)



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.

Xudong (Susan) Zhu



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.

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.

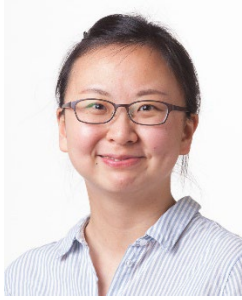
Mana Fleming



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.

Meeting schedule

Agendas and supporting papers are prepared for each meeting the Council holds, and formal minutes record the proceedings of each meeting.

A quorum of five members, which includes at least one layperson, is required for all decisions passed.

All members are required during meetings to declare any conflict of interest with agenda items.

Eight meetings were held between 1 April 2023 and 31 March 2024:

- 4 April 2023 (virtual)
- 5 May 2023 (virtual)
- 9 & 10 May 2023 (in-person)
- 20 June 2023 (in-person)
- 1 August 2023 (in-person)
- 10 October 2023 (in-person)
- 5 December 2023 (in-person)
- 7 February 2024 (in-person)

Attendance of in-person meetings by members

Member	May 2023	Jun 2023	Aug 2023	Oct 2023	Dec 2023	Feb 2024
Paddy McBride	Y	Y	Y	Y	Y	Y
Joan Campbell	Y	Y	Y	Y	Y	Y
Trudi Collins	Y	Y	Y	Y	Y	Y
Ming-chun Wu	N	Y	Y	Y	Y	Y
Margaret Steel	Y	Y	Y	Y	Y	Y
Lizhou Liu	Y	N	Y	Y	Y	Y
Mana Fleming	Y	Y	Y	Y	N	Y
Susan Zhu	N	Y	Y	Y	Y	N
Adrienne Wing	N	N	Y	N	Y	Y

Y = Yes, Attended, N = No, Did not attend

Member Professional fees

Fees are paid to Council members for work undertaken on behalf of the Council.

Council members are remunerated for their work at the following rates:



Chair \$107.25 per hour / \$858 per day

Deputy Chair \$97.25 per hour / \$778 per day

Member \$86.00 per hour / \$688 per day

Name:	Fees paid 2023/24	Fees paid 2022/23*
Paddy McBride	\$15,248	\$6,848
Xudong (Susan) Zhu	\$2,199	\$4,862
Joan Campbell	12,679	\$4,386
Ming-chun Wu	\$9,340	\$6,923
Margaret Steel	\$12,621	\$5,676
Mana Fleming	\$5,048	\$3,526
Lizhou Liu	\$11,163	\$5,332
Trudi Collins	\$10,901	\$3,182
Adrienne Wing	\$2,580	\$4,343

Fees paid to Council members for attending Council, committee, and working party meetings, as well as participating in other forums and providing input on specific projects. These fees paid exclude expenses, are gross income before GST, and include resident withholding tax paid to Inland Revenue on the members' behalf.

*In 2022/23 the Council had a restricted cashflow due to a delay in receiving start-up funding, and therefore, a lot of work completed was unpaid.

Council committees and advisors

The Council has the following sub-committees to support the work of the Council:

- Finance and Audit Committee:
This committee advises the Council on matters relating to the financial operation and annual audit of the Council, within agreed limits as specified in the attached schedule.
- Registration Committee:
This committee advises the Council on matters relating to the registration of Chinese medicine practitioners in accordance with Part 2 of the HPCA Act.
- Notifications Committee*:
This committee advises the Council on notifications received by the Council relating to the conduct, competence and/or health of Chinese medicine practitioners.
- Branding Committee*:
This committee advises the Council on matters relating to the Council's engagement with *Re:Brand* for the development of the Council's 'brand'.

Committee work is undertaken via email and using Microsoft Teams. Some committees have delegated decision-making powers, and all provide regular update reports to the Registrar for periodic dissemination to the Council.

The Council continues to receive advice from its contracted professional advisors, Kate Roberts and Rebecca O’Cleirigh, in carrying out its core functions and duties.

The Council formally recruited and trained external professional conduct committee (PCC), competence review committee (CRC), and accreditation committee members to support the Council with these aspects of its work.

*These two committees have since been disbanded.

Managing the Register of Chinese medicine practitioners

The Council registers Chinese medicine practitioners who meet the required standards, maintains the New Zealand Register of Chinese medicine practitioners, and issues annual practising certificates (APCs).

Every Chinese medicine practitioner working in New Zealand must be registered and hold a current APC. This informs the public that the Chinese medicine practitioner is competent and fit to practise.

The Council opened registration of Chinese medicine practitioners on the 21st of July 2023. Applications came in steadily over the year and by 31 March, the Council had registered 1029 Chinese medicine practitioners.

The Council maintains a searchable public register that includes a Chinese medicine practitioner’s legal name, preferred name, registration number, Health Practitioner Index (HPI) number, registration date, practising status and APC expiry date, scope/s of practice held, practice address (optional), languages other than English spoken, registered qualification/s, and any applicable conditions.

The public register is available for viewing on the Council’s website located at www.chinesemedicinecouncil.org.nz.

Chinese Medicine Council Achievements

Continuing the establishment work from the previous year, a significant amount of time and effort went into finalising the systems, policies, and processes needed to begin registering practitioners.

The professions new regulated status has already contributed to improved patient safety for consumers/the New Zealand public. The profession is now working to one set of clinical, cultural and ethical standards, the public Register provides consumers with up-to-date information on the status and qualifications of their practitioners, all are participating in recertification to maintain those standards, and there is now greater accountability, in the form of the Council, for consumers when care is provided that falls short of the expected, safe standard.



In addition, there is soon to be greater recognition of Chinese medicine with agencies such as the Accident Compensation Corporation (ACC) when amendments to regulations come into force, as well as with other insurers who are now checking and utilising the Council's public Register for the provision of care to clients, and upcoming proposed amendments to Veteran Support Regulations that will improve access to treatment options for eligible veterans.

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

Registration

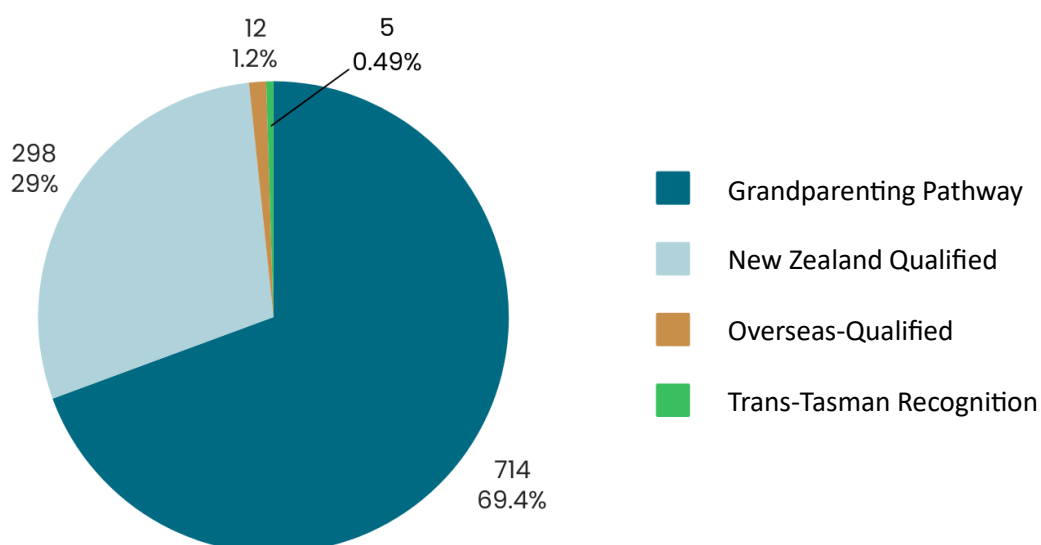
The Council has four different and distinct pathways for registration which were designed to acknowledge both experience and qualifications in Chinese medicine.

Pathway 1 'Grandparenting'	Pathway 2 'NZ-qualified'	Pathway 3 'Australian registered'	Pathway 4 'Overseas-qualified'
<p>The Council's Grandparenting 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>

As at 31 March 2024, the Council had registered 1,029 Chinese medicine practitioners.

Applicants for registration had applied via the following pathways:





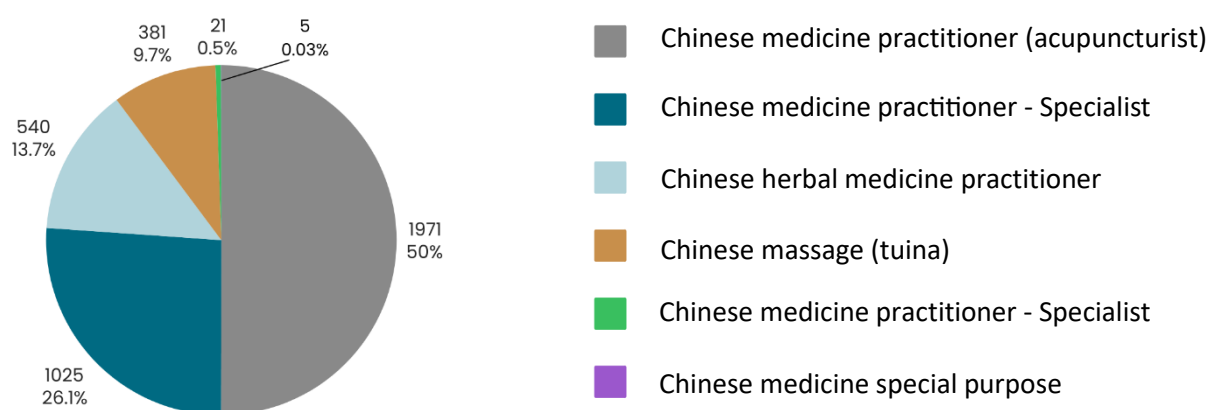
Under section 11 of the HPCA Act, the Council has specified the following scopes of practice for Chinese medicine services:

- 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 available on the ‘Scopes of practice’ page of the Council’s website.

There were no amendments to these scopes of practice during the year.

As at 31 March 2024, registrants held the following scopes of practice:



Practising certificates

Practising certificates provide assurance to the public that a practitioner has maintained their professional competence and is fit to practise.

On an annual basis, Chinese medicine practitioners are required to declare their practising intentions for the year, and if intending to practise, must declare that they have maintained their competence and fitness and are complying with the Council's *Policy on Recer ifica ion* (CPD programme).

Of the 1029 practitioners registered at 31 March 2024, 910 held practising certificates and 119 declared that they were not practising and opted to hold a 'non-practising' status on the register. Those holding a non-practising status typically opt for this status for personal reasons such as overseas travel, sabbatical, illness, or family commitments.

Cancellation from the register

No practitioners were cancelled from the register during the year.

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 in April 2023.

The Council has also developed various guidance documents, templates, and tools that will be used during the accreditation process. These are available on the 'Accreditation' page of the Council's website.

The Council is currently awaiting formal applications for accreditation of the two providers of New Zealand Chinese medicine qualifications. Preliminary accreditation for the purpose of opening registrations was granted until May 2025.

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.

In the previous year, the Council consulted publicly on, received feedback, and implemented its cores standards of clinical, cultural competence and safety, and ethical (professional) conduct for practitioners. This year, the Council consulted publicly, received feedback on, and implemented the following new standards, statements, and guidelines for the profession:

- Statement on Cervical Neck Manipulation
- Safe Practice Standard and Guidance
- Professional Boundaries Standard and Guidance
- Informed Consent Standard and Guidance
- Guidelines for safe prescribing of Chinese herbal medicines
- Clinical Record Standards and Guidance
- Advertising Standard and Guidance

As with any new standards, statements, and guidance, and particularly for a newly-regulated profession, the Council recognises the need to ‘socialise’ these with the profession and help practitioners understand how to ensure they are in compliance with them. The Council plans to hold some webinars and information sessions to introduce them to the profession.

It is intended that these will be ‘living documents’ that are regularly reviewed and enhanced as the practice of Chinese medicine evolves.

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

Recertification / Continuing professional development

The Council is charged under the HPCA Act with protecting the health and safety of the public by ensuring that Chinese Medicine practitioners are fit and competent to practise their profession.

Among other responsibilities set out in section 118 of the Act, the Council must recognise, accredit, and approve prescribed programmes to ensure the ongoing competence of practitioners. To meet this obligation, the Council has set a Continuing Professional Development (CPD) Policy under section 41(3)(f) of the HPCA Act. Completing CPD is one part of recertification. Recertification is the annual process of ensuring each practitioner meets the required standard of competence as a prerequisite to the granting of an Annual Practising Certificate (APC).

In May 2023, the Council consulted with practitioners and stakeholders on a draft *Policy on Recertification* and draft *Recertification (CPD) Guidance*. Participation in CPD is mandatory for all registered practitioners who hold an APC, regardless of their practice setting, employment status, or number of hours worked. All registrants are encouraged to undertake more comprehensive CPD than the mandatory requirements set out in this Policy.

The policy requires that all practitioners engage in a minimum of 22 hours/points of CPD each year which includes a minimum of 2 hours of cultural safety/cultural competence (1-point equates to 1 hour of learning). The CPD should align with a practitioner's self-assessment as measured against the Council's competencies, standards, and policies. The CPD undertaken by practitioners with more than one scope of practice must include some content relevant to each scope in which they are registered. Practitioners must also adhere to the clinical competency 'Maintain currency in first aid certification relevant to safety in clinical practice', and as such, hours spent completing mandatory first aid certification may be included as CPD.

The policy came into effect in August 2023 and the requirements were pro-rated for practitioners as they were registered with the Council for their first year. For most new registrants, participating in continuing education was not new as they had already been doing so through their voluntary professional associations/bodies, which helped with the transition to a formal recertification programme/policy. Those who have not participated in a formal continuing education programme before are finding the transition slightly more challenging and the Council is doing what it can to assist these practitioners with more step-by-step guidance.

The first cycle ended on 31 March 2024 and the Council is due to audit compliance with the requirements in September/October 2024 once the online CPD-recording and audit portal has been implemented. The focus of this first audit will be educative. The Council will be evaluating how the profession is doing transitioning to formal CPD requirements and providing feedback for everyone on key areas where more focus or attention may need to be paid in the next practising year/cycle.

Competence, fitness to practise, and discipline

Complaints and notifications often have multiple aspects but generally fall into either a competence, health, or conduct category.

As a newly established regulator, some notifications received during the year occurred prior to the Council's establishment and/or prior to a practitioner registering with the Council and, therefore, the Council's jurisdiction to consider the notification was limited to whether the matter raised concern that the practitioner may not currently be practising, or be fit to practise, at the required standard of competence.

Competence

Under the HPCA Act, the Council may review a practitioner's competence at any time or in response to concerns raised about their practice. Competence concerns can be raised by a colleague,



employer, consumer, the Ministry of Health, the Health and Disability Commissioner (HDC), or another agency/organisation. The Council will make initial enquiries into a practitioner's competence following receipt of a notification or expression of concern regarding their competence.

The Council did not receive any formal competence notifications during the year. The Council expects the number of notifications received to increase as knowledge of the regulation of the profession is more widely known.

Possible outcomes of a competence referral can include no further action, an educational letter to the practitioner, a formal review of their competence, or an individual recertification programme for the practitioner.

The purpose of a competence review is to assess a practitioner's competence and, if necessary, to put in place appropriate training, education, and safeguards to support them in meeting the required standard of competence. Competence reviews are not punitive and are designed to review, remediate, and educate. The Council will order a competence review if we believe a practitioner may be practising below the required standard of competence. A competence review committee comprises a layperson and at least two Chinese medicine practitioners. The practitioner's competence is assessed against the Council's standards. A competence review committee will provide a formal report to the Council on the outcome of the review once it has taken place.

Fitness to practise

A practitioner may develop a physical or mental health problem that may impair their ability to practise safely and therefore endanger patients and the public. The majority of practitioners with health conditions manage the conditions themselves with the support of their employer and/or healthcare provider. However, Chinese medicine practitioner, other health practitioners, and employers have a legal obligation to notify the Council if there is any reason to be concerned about a practitioner's health or fitness to practise. This can include impairments caused by alcohol or substance-use disorders.

The Council considered a few health-related declarations made by practitioners as part of their applications for registration to the Council but did not receive any formal health/fitness related notifications during the year.

The Council is a new responsible authority. As awareness of requirements around reporting obligations to the Council increases, along with an understanding of the Council's processes by employers and practitioners, we expect to see an increase in the number of health-related notifications that are received.

Where possible, the Council will manage the process directly with the practitioner. This could involve asking them to sign an agreement to follow their health team's advice with managing their ongoing health or following an approved return to practice plan. In some scenarios, this may involve ongoing monitoring or reporting to the Council for the duration of their practising career. If it is unclear how a practitioner's health may impact on their ability to practise, or if there are indications of addiction or substance-use disorders, the Council can require the practitioner to undertake an independent health assessment under section 49 of the HPCA Act.



Discipline (complaints)

The Council's primary responsibility when receiving a complaint is the protection of the health and safety of members of the public. Complaints can be received from many different sources, including members of the public, Chinese medicine practitioners, other health practitioners, employers or government health sector organisations. In some instances, the Council may receive complaints or notifications from several sources that relate to one event – for example, a practitioner may make a self-notification and we may also receive a notification from their employer, and a further notification from a member of the public. The Council records these as separate complaints. Complaints generally fall into two broad categories:

- Those that allege the practice or conduct of a practitioner has affected a health consumer/patient
- Those that do not directly involve a health consumer/patient. Each notification or complaint is considered, and the Council decides whether it should be managed as a competence, conduct, or health issue.

The source and number of complaints received during the year are shown below.

Source of notification/concern	Total number received
HDC	5
Consumer	0
Employer	0
Health practitioner	0
Other	2
Total:	7

As the Council is still a relatively new responsible authority, it is expected that the number of complaints we receive will increase over time to reflect the awareness of both the Council's processes and Chinese medicine practitioners as registered health practitioners. The actions the Council takes depends on the nature of the complaint and who has made it.

Under section 64(1) of the HPCA Act, the Council must promptly forward to the HDC any complaint alleging that the practice or conduct of a health practitioner has affected a health consumer. The HDC may or may not investigate the complaint. The Council is unable to act on a conduct issue while the HDC is investigating. However, the Council can look into competence or health concurrently. Notifications or complaints that do not allege that a health consumer has been affected are reviewed on a case-by-case basis.

The outcomes of conduct-related notifications received or considered during the year are shown below.

Outcome of conduct-related notifications	Total number received
Educational approach taken by the Council	4
Referred to the HDC	0
Referred to a Professional Conduct Committee for investigation	2
No further action taken	1
Other action	0
Outcome not yet finalised	0
Total:	7

Professional Conduct Committees

A professional conduct committee (PCC) is an independent statutory committee appointed to investigate issues that relate to a Chinese medicine practitioner's conduct. A practitioner will be referred to a PCC where the Council:

- is notified that a practitioner has been convicted of a specified offence in court
- considers that information in the Council's possession raises questions about a practitioner's conduct or the safety of their practice. In some instances when a practitioner is under investigation by a PCC, if the Council receives additional notifications or information that is relevant to the investigation, it may refer this to the PCC to be included in its investigation.

A PCC is comprised of two practitioners and one layperson. A PCC may make determinations or recommendations to the Council or lay charges against the practitioner before the Health Practitioners Disciplinary Tribunal (the HPDT). During the 2023/24 reporting period, the Council referred two practitioners to PCCs for an investigation into their conduct. These were the first two PCCs for the Council. These investigations had just commenced at year end, so the outcomes are not yet known.

Health Practitioners Disciplinary Tribunal

The Health Practitioners Disciplinary Tribunal (HPDT) is a statutory disciplinary organisation separate from the Council. It hears and determines charges brought by PCCs or the Director of Proceedings against health practitioners registered under the HPCA Act. Members of the HPDT are appointed by the Minister of Health for each profession and include practitioners, laypeople, a chair, and two deputy chairs. For each hearing, the HPDT consists of a chair or deputy chair, three Chinese medicine practitioners, and a layperson. To date, the Council has had no Chinese medicine practitioners appear before the HPDT.

Appeals and judicial reviews

Decisions of the Council may be appealed in the District Court, and decisions of the HPDT may be appealed in the High Court. To date, there have been no judicial reviews or appeals of decisions made by the Council or the HPDT by Chinese medicine practitioners.

Review of delegates decision

Under the HPCA Act, the Council may appoint a committee and delegate its functions, duties or powers to that committee. In clause 18 of Schedule 3 of the HPCA Act, a person who is adversely affected by a decision made under delegation may request that the Council review the decision and revoke or confirm the decision. During the reporting period, there were no requests to review a delegate's decision received.



Collaboration

The Council values collaboration with the profession and the organisations that make up the health sector. The Council takes seriously the need to regularly communicate with and collaborate with others in achieving the Council's purpose of protecting the public.

The Council remains grateful for all the help and support it continues to receive from its fellow health regulators in the development of key policies and guidance for the profession.

As a newly established regulator, we prioritise educational initiatives to ensure clarity about our role and the functions of the HPCA Act among Chinese medicine practitioners and stakeholders alike.

The Council and the Registrar actively support and promote collaboration with other responsible authorities, including Te Kaunihera Tapuhi o Aotearoa | The Nursing Council, with whom we have a shared service-level agreement. We believe in investing in and fostering positive relationships to meet our purpose and functions.

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 the Council has registered the majority of the profession, 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 focus for the coming year include:

- Concluding the registration of practitioners under the transitional 'Policy on Grandparenting' provisions – Grandparenting will close in June 2024.
- Socialising the Council's recently implemented *Policy on recertification* (Continuing Professional Development for Chinese medicine practitioners) with the profession and auditing compliance later in 2024.
- Implementing an online portal through which practitioners can log their continuing professional development activities and be audited.
- Accreditation of the two New Zealand Chinese medicine education providers.
- Development of further statements and guideline documents, and educational webinars, as necessary to ensure Chinese medicine practitioners are providing care in compliance with the Council's standards.
- Increasing public awareness of the role of the Council, the existence of the public register, and the fact of the profession now being regulated and what patients can expect from their practitioner/s.
- Strengthening the Council's relationships with key stakeholder agencies and groups, including the New Zealand public, to better inform the work of the Council.



CHINESE MEDICINE COUNCIL**PERFORMANCE REPORT
FOR THE YEAR ENDED 31 MARCH 2024****CONTENTS**

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CHINESE MEDICINE COUNCIL Entity Information

FOR THE YEAR ENDED 31 MARCH 2024

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 greater 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 main income from Registration and Annual Practising fees paid by registered Chinese Medicine

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 2024**

	NOTE	2024	2023
Revenue		\$	\$
Annual Practising Certificate		285,476	
Disciplinary Levy Income		59,134	
Registration fees		220,065	
Non-Practising fees		3,304	
Establishment Grant		169,341	225,402
Interest		5,523	169
Total Revenue		<u>742,844</u>	<u>225,571</u>
Expenditure			
Council & Committees	1	118,663	70,466
Secretariat	2	458,419	199,302
Total Expenditure		<u>577,082</u>	<u>269,768</u>
Net Surplus/(Deficit)		<u>165,762</u>	<u>(44,196)</u>

**CHINESE MEDICINE COUNCIL
STATEMENT OF MOVEMENT IN EQUITY
FOR THE YEAR ENDED 31 MARCH 2024**

	2024	2023
	\$	\$
Accumulated funds at the beginning of period	(44,196)	-
Net surplus/(deficit) for the period	165,762	(44,196)
Accumulated funds at the end of period	<u>121,566</u>	<u>(44,196)</u>

**CHINESE MEDICINE COUNCIL
STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2024**

	NOTE	2024 \$	2023 \$
Equity	4	<u>121,566</u>	<u>(44,196)</u>
Current Assets			
Cash and cash equivalents		1,113,426	11,502
Accounts receivable		7,080	
Prepayments		<u>12,154</u>	<u>3,124</u>
Total Current Assets		<u>1,132,660</u>	<u>14,626</u>
Non-Current Assets			
Property, Plant and equipment	3	<u>4,258</u>	<u>9,440</u>
Total Assets		<u>1,136,918</u>	<u>24,066</u>
Current Liabilities			
Creditors and accrued expenses	5	59,093	63,185
Employee costs payable	11	12,552	-
Income in advance	6	709,143	-
Goods and services tax payable		112,527	4,708
Loan from Acupuncture NZ	13	40,000	-
Withholding tax payable		<u>3,306</u>	<u>369</u>
Total Current Liabilities		<u>936,621</u>	<u>68,262</u>
Non-Current Liabilities			
Loan from Acupuncture NZ	13	<u>78,731</u>	<u>-</u>
Total Liabilities		<u>1,015,352</u>	<u>68,262</u>
Net Assets		<u>121,566</u>	<u>(44,196)</u>

For and on behalf of the Council.



Paddy McBride, Chair

Dated: 24 October 2024



Ming-chun Wu, Council member

Dated: 24 October 2024

**CHINESE MEDICINE COUNCIL
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2024**

	2024	2023
	\$	\$
Cash flows from Operating Activities		
<i>Cash was received from:</i>		
Statutory fees	1,046,673	-
Registration income	220,065	-
Establishment Funding	167,641	225,402
Other income	5,004	-
Interest revenue	5,523	169
<i>Cash was applied to:</i>		
Payments to suppliers	(571,968)	(213,951)
GST	107,821	11,550
Net cash flows from operating activities	<u>980,759</u>	<u>23,170</u>
Cash flows from Investing and Financing Activities		
<i>Cash was received from:</i>		
Proceeds from disposal of Fixed Assets	4,579	-
Loan from Acupuncture NZ	218,000	-
<i>Cash was applied to:</i>		
Purchase of property, plant & equipment	(2,145)	(11,669)
Repayment of loan	(99,269)	-
Net Cash Flows from Investing and Financing Activities	<u>121,165</u>	<u>(11,669)</u>
Net Increase in Cash	<u>1,101,924</u>	<u>11,502</u>
Opening Cash Brought Forward	11,502	-
Closing Cash Carried Forward	<u><u>1,113,426</u></u>	<u><u>11,502</u></u>
<i>Represented by:</i>		
Cash in bank	<u>1,113,426</u>	<u>11,502</u>
Cash and Cash equivalents	<u><u>1,113,426</u></u>	<u><u>11,502</u></u>

CHINESE MEDICINE COUNCIL STATEMENT OF ACCOUNTING POLICIES FOR THE YEAR ENDED 31 MARCH 2024

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 \$5,000,000. 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.

Employment entitlements

Provision is made in respect of the Council's liability for annual leave at balance date. Annual leave has been calculated on an actual entitlement basis at current rates of pay. No provision is made for sick leave.

Cash and cash equivalents

Cash and cash equivalents includes current and saving accounts with banks.

**CHINESE MEDICINE COUNCIL
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

	NOTE	2024 \$	2023 \$
1. COUNCIL & COMMITTEES			
Fees	10	81,777	45,078
Meeting expenses, training, travel, etc		36,886	25,388
		<u>118,663</u>	<u>70,466</u>
Paddy McBride (Chair)		15,248	6,848
Xudong (Susan) Zhu (Deputy Chair)		2,199	4,862
Ming-chun Wu		9,340	6,923
Joan Campbell		12,679	4,386
Lizhou Liu		11,163	5,332
Margaret Steel		12,621	5,676
Mana Fleming		5,048	3,526
Trudi Collins		10,901	3,182
Adrienne Wing		2,580	4,343
		<u>81,777</u>	<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.

	2024 \$	2023 \$
The total Fulltime Equivalent of Council Members	0.44	0.24

2. SECRETARIAT

Audit fees	8,542	9,566
Bank Fees	24,571	11
Depreciation & amortisation	2,747	2,229
IT expenses	121,265	10,355
Legal costs	23,054	15,087
Occupancy costs	10,670	8,332
Other costs	20,670	16,385
Personnel costs	143,899	-
Professional fees	102,252	137,337
Telephone, Postage & Printing and Stationery	749	-
	<u>458,419</u>	<u>199,302</u>

**CHINESE MEDICINE COUNCIL
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

3. PROPERTY, PLANT & EQUIPMENT

	Opening value	Current year additions	Current year disposal	Depreciation & Amortisation	Closing Value
At 31 March 2024					
Computer equipment	9,440	2,145	(4,579)	(2,747)	4,258
	<u>9,440</u>	<u>2,145</u>	<u>(4,579)</u>	<u>(2,747)</u>	<u>4,258</u>
At 31 March 2023					
Computer equipment	-	11,669		(2,229)	9,440
	<u>-</u>	<u>11,669</u>	<u>-</u>	<u>(2,229)</u>	<u>9,440</u>

**CHINESE MEDICINE COUNCIL
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

	2024	2023
	\$	\$
4. EQUITY		
Accumulated surpluses with unrestricted use		
Balance at 1 April	(44,196)	-
Surplus/(deficit) for year	106,628	(44,196)
Balance at 31 March	<u>62,432</u>	<u>(44,196)</u>
Accumulated surpluses restricted use		
Disciplinary Levy income	59,134	-
Surplus/(deficit) for year	59,134	-
Balance at 31 March	<u>59,134</u>	<u>-</u>
Total Accumulated Funds		
Opening Balance	(44,196)	-
Surplus/(deficit)	165,762	(44,196)
Balance at 31 March	<u><u>121,566</u></u>	<u><u>(44,196)</u></u>

	2024	2023
	\$	\$
5. CREDITORS AND ACCRUED EXPENSES		
Accounts payable	42,652	53,619
Accrued expenses	16,441	9,566
	<u>59,093</u>	<u>63,185</u>

	2024	2023
	\$	\$
6. INCOME IN ADVANCE		
Annual Practising Certificate	600,368	-
Disciplinary levy	104,340	-
Non-Practising fee	4,435	-
	<u>709,143</u>	<u>-</u>

7. CONTINGENT LIABILITIES

No Contingent Liabilities as at 31 March 2024.

8. CAPITAL COMMITMENTS

There are no capital commitments at balance date.

9. 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 2024**

10. RELATED PARTY TRANSACTIONS

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

	2024	2023
	\$	\$
11. EMPLOYEE COSTS PAYABLE		
PAYE owing	3,041	-
Holiday pay accrual	5,437	-
Kiwisaver contributions owing	770	-
Salary accrued	3,304	-
	<u>12,552</u>	<u>-</u>

12. COMMITMENTS

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.

	2024	2023
	\$	\$
Due in 1 year	15,550	15,550
Due between 1-2 years	15,550	15,550
Due between 2-5 years	31,100	46,650
	<u>62,200</u>	<u>77,750</u>

13. 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 during 2023/2024 financial year:

	Establishment Grant	Loan
	2024	2024
AcNZ	128,169	218,000
NZASA	36,588	-
Total Establishment Funding (Including GST)	<u>164,756</u>	<u>218,000</u>
Less Repayments to date:		
4 September 2023		(50,000)
20 October 2023		(49,269)
Establishment Funding Balance payable as at 31 Mar 2024		<u><u>118,731</u></u>

The Council agreed to repay any excess funds proportionately to each funding entity.
The loan is repayable to AcNZ as per below:

	Repayment
20 April 2024	\$ 40,000
20 April 2025	\$ 40,000
20 April 2026	\$ 38,731
Total	<u><u>\$ 118,731</u></u>

Interest is payable at 2.3% per annum paid monthly on the last day of each month.

14. SUBSEQUENT EVENTS

No significant events occurred after the year end.

15. RECLASSIFICATION OF EXPENDITURE

Certain items have been reclassified so as to provide more useful information about the performance of the Council.

INDEPENDENT AUDITOR'S REPORT

TO THE READERS OF THE CHINESE MEDICINE COUNCIL'S PERFORMANCE REPORT FOR THE YEAR ENDED 31 MARCH 2024

The Auditor-General is the auditor of the Chinese Medical 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 statement of financial position as at 31 March 2024, 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:

- present fairly, in all material respects:
 - its entity information and financial position as at 31 March 2024; 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 31 October 2024. This is the date at which our opinion is expressed..

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 performance report that are fairly presented and that comply 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, are 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