

Submission to ARONAH – May 30, 2018

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1. Consider using the term client instead of patient in document. Patient implies a health issue and is associated with submissiveness (power differential) as opposed to empowerment which is what we do.
2. Consider use of wellness and care as opposed to care which implies disease management. Naturopathy addresses prevention and care through a wellness plan.
3. Consider cultural competency and social determinants of health in relation to naturopathic wellness and care interventions (e.g. socio-economic considerations) in early part of document
4. Consider recognition and management of risk in naturopathic wellness and care plans in early part of document
5. Consider use of term intervention as opposed to treatment

Competency Standards for Naturopathic Practitioners

Competence 1: Functions in accordance with legislation and common law affecting naturopathic practice

Element 1.1

Cue requiring change:

- Identifies and interprets laws in relation to naturopathic practice, including the administration of medicines, negligence, consent, report writing, confidentiality and vicarious liability
- Recognises and acts upon breaches of law relating to naturopathic practice

Justification for change:

- Consent should be informed consent with suitable explanation of possible options
- Advertising breaches by naturopaths/CAM have been seen in Australia and NZ
- Recognises and acts upon breaches requires clarity to ensure reporting occurs

Modification example:

- **Identifies and interprets laws in relation to naturopathic practice, including administration of medicines, negligence, informed consent, report writing, confidentiality, advertising and vicarious liability**
- **Recognises and reports breaches of law relating to naturopathic practice to ARONAH.**

Element 1.2 Complies with policies and guidelines that have legal and professional implications for practice

Cue requiring change:

6. Complies with legal policies and guidelines, for example, occupational health and safety, child protection

Justification for change:

7. Omits National Code of Conduct requirements

Modification example:

8. **Complies with policies and guidelines, for example occupational health and safety, child protection, ARONAH Code of Conduct and Guidelines for Advertising (should take into account**

the National Code of Conduct for health care worker and APRA Guidelines for Advertising Regulated Health Services)

Element 1.4 Fulfils the duty of care in the course of naturopathic practice

Change required to: Fulfils the duty of care in the course of naturopathic practice

Justification for change: Omits Code of Conduct

Modification example: **Fulfils the duty of care in the course of naturopathic practice and in accordance with ARONAH Code of Conduct**

New Cue to be added:

- 9. Delivers services in a safe (including culturally safe) and ethical manner and in accordance with the ARONAH Code of Conduct**

Justification for change: In early part of document there was no reference to culturally safe practices.

New cue to be added: **Obtains informed consent appropriate to treatment or service, prior to commencement of treatment or service**

Justification for change: Informed consent should be based on appropriate naturopathic rationale, or scientific evidence and options for treatment provided

New cue to be added:

- 10. Is mentally and physically able to safely conduct professional clinical practice**

Justification for change: Clients should have the expectation that the practitioner is unimpaired by certain mental and physical disorders. Limitations on practice may be required.

Competence 2: Accepts accountability and responsibility for own actions within naturopathic practice

Element 2.1 Recognises and acts within own knowledge base and scope of practice

Cue requiring change:

- 11. Analyses strengths and limitations in own skill, knowledge and experience and addresses limitations**

Justification for change: Continuing Professional Education is not sufficiently explicit

Modification example:

- 12. Analyses strengths and limitations in own skill, knowledge and experience and addresses limitations through ongoing evidence of Continuing Professional Education**

Add new cue:

- 13. Displays ARONAH Code of Conduct clearly within clinic and waiting room (and information for making a formal complaint)**

Element 2.2 Identifies unsafe practice and takes appropriate action

Change to: **Identifies unsafe or unethical practice and takes appropriate action**

Justification of change: excludes unethical behavior e.g. exploitation

Cue requiring change:

- 14. Identifies practices that compromise safe and effective care, or contravenes legislation, and takes appropriate action**

Justification for change: The need to report to appropriate agencies is not made explicit. Exploitation and sexual misconduct have occurred in cases against naturopaths in Australia.

Modification example:

- 15. Identifies and reports concerns about treatment, service or care that is exploitive, or involves sexual misconduct, or that compromises safe and effective care, or contravenes legislation to ARONAH, and appropriate State or Territory agency**

Element 2.3 Consults with, and refers to, another naturopath or appropriate health care provider when the needs of the patient fall outside own scope of practice or competence

Change to: Consults with, and refers to, another naturopath or appropriate health care provider when the needs of the patient fall outside own scope of practice or competence and where the serious nature of the condition requires an integrative approach

Justification of change: naturopaths in NZ have been involved non-referral for serious health conditions either unrecognized by naturopath or because they believed it was not their place to refer (e.g. cancer).

Naturopathic Knowledge and Practice

Competency 3 Communicates information effectively to facilitate decision-making by the patient

Element 3.2 Plans and evaluates care in partnership with the patient

Change to: Formulates and evaluates wellness plan or care in partnership with the patient and their family

Justification: Takes into account the cultural component where families are included in patient care Naturopathy care implies disease management. Wellness plan includes prevention and disease management.

New Cue:

- 16. Utilise objective measures to evaluate intervention and objectively assess change**

Justification: Qualitative change through questioning should be combined with a quantitative outcome measure to more fully evaluate change. Means research modules would need to be included in each year of naturopathic programmes, where use and analysis of basic clinical outcome measures are taught and implemented in clinical practice (if not already).

Element 5.1 Utilises naturopathic knowledge and skills to facilitate optimal health for the patient

Add Cue: Recognises and manages risk to provide care that best meets the needs and interests of the client and family.

Justification: Regulation is about managing risk. Risk management should now be part of all clinical work.

Add cue: Adopts standard hygiene practices and precautions for infection control

Justification: naturopathic care needs to include infection control e.g. washing hands between clients and appropriate measures for collection of client blood and urine samples, hygiene practices when compounding

Add cue: Covered by appropriate insurance

Justification: Clients have the ability to take a case against naturopaths therefore indemnity insurance and/or other appropriate insurance required.

Element 5.2 Assesses the health and well-being of the patient(**consider client**)

Cue requiring change:

17. Carries out a comprehensive assessment of the patient

Change to:

- 18. Carries out comprehensive assessment (physical, laboratory and clinical examination) of client**

Rationale: assessment procedures undertaken by naturopaths should be explicit and a basis for CPE

Element 5.1 and 5.4 could be combined into one element

Element 5.5 Understands Naturopathic principles and their clinical application

Cue to change:

19. Actively integrates Naturopathic principles of holistic health with the desired health outcomes of the patient

Consider adding a new cue that provides for identification of naturopathic principles, use of term client and inclusion of family

- 20. Actively integrates Naturopathic principles of holistic health (Healing power of nature; identify and treat the cause; first do no harm; doctor as teacher; treat the whole person; prevention; wellness) with the desired health outcomes of the client and their family**

Element 5.6 Demonstrates the ability to initiate, supply and administer relevant naturopathic treatments in a safe and effective manner within the relevant state or territory legislation

Consider change: Demonstrates the ability to initiate, supply and administer relevant naturopathic intervention and measures to enhance well-being, in a safe and effective manner within the relevant state or territory legislation

Cue to change:

21. Maintains up to date knowledge about treatments commonly used in naturopathic practice

Proposed Cue change:

- 22. Maintains up to date knowledge about interventions commonly used in naturopathic practice**

Cue change:

23. Provides information to the patient

Proposed cue change:

- 24. Provides information to the client in a format that they understand**

Justification: Information needs to be accessible to client

Competency 10 Actively supports naturopathy as a public health strategy

Element 10.1

Add cue:

- 25. Knowledge of notifiable diseases and referral to medical practitioner**

Justification: Notifiable diseases are reported by medical practitioners to department of health

Add cue:

26. Knowledge of potential suicide, domestic violence, drug or alcohol addiction presentation and supporting agency contacts

Justification: Naturopaths need to recognize and screen for domestic violence, drug and alcohol addiction and refer to appropriate support

Element 10.2

Add cue:

27. Utilise Ministry of Health resources for client education (pamphlets, websites, programmes e.g. quit smoking)

Justification: MoH has a wide range of health education resources available for public (this is the case in NZ so I presume also in Australia).