

# Provider accreditation requirements

## for the ARHG Alternative Therapy Database



### Professional association membership

The provider must be a current member of an ARHG accredited professional association.



### Minimum education requirements

The provider must meet ARHG's minimum education requirements for the relevant therapy(ies).

See [Appendix 1](#) for the minimum education requirements.



### Mode of delivery requirements

The provider must have graduated from a Registered Training Organisation (RTO) that has delivered their training in line with ARHG's mode of delivery requirements.

See [Appendix 2](#) for the mode of delivery requirements.



### Insurance requirements

Providers of acupuncture and Chinese herbal medicine must have professional indemnity insurance of at least \$5 million, and public/products liability insurance of at least \$10 million.

All other modalities must have professional indemnity insurance of at least \$2 million, and public/products liability insurance of at least \$10 million.



### Continuing professional education

The provider must undertake continuing professional education (CPE) directly related to the therapy concerned as directed by their association (a minimum of 20 hours per year).



### First Aid

The provider must hold a current First Aid certificate and renew their certificate prior to expiry.



### Chinese medicine practitioners

Chinese medicine practitioners (acupuncture and Chinese herbal medicine) must have Ahpra registration with the *Chinese Medicine Board of Australia*.



### Working with children and vulnerable people

The provider must meet the Working with Children and Working with Vulnerable People requirements specified by the state in which they work.



## Quality standards

The provider's practice must meet minimum quality standards.

These include:

- a. infection control, and hygiene procedures and protocols in place where invasive techniques are used
- b. premises (patient reception, waiting treatment rooms, toilet facilities, workrooms, etc.) that meet minimum physical standards and expectations and all state, territory and local council laws
- c. clinical notes taken at each consultation, that are written in English, and maintained and stored in a confidential and secure environment in accordance with the *Privacy Act* and any other relevant legislation
- d. informed clinical consent (either written or verbal) obtained from patients for any procedural treatment offered
- e. informed financial consent (either written or verbal) obtained from patients before commencing treatment.



## Code of Conduct

The provider must adhere to the *National Code of Conduct for health care workers*, and any other Code of Conduct, Code of Ethics, and/or By-laws required by their association.

These documents must be displayed in a prominent position within their practice premises, together with information about how to make a complaint.



## Claims to cure

The provider must not claim to cure any condition.

Providers can claim to assist, relieve, and/or improve certain ailments, illnesses or conditions, and generally promote good health and wellbeing.



## Unsubstantiated claims

The provider must not make claims that cannot be substantiated.



## Outcome study reports

The provider must be able to produce outcome study reports of the success of the claims made about their treatments.



## Audits

The provider must comply with audits of provider compliance conducted by their association.

## Appendix 1: Minimum education requirements

- Providers who are new members to an association (and have never been registered with an association before) are required to have an **HLT level qualification** for their therapy.
- Providers who obtained qualifications prior to the implementation of HLT qualifications must prove **continuous membership with an ARHG accredited association for an ARHG accredited therapy**. If the provider does not meet this requirement, they must upgrade their qualification in order to be recognised for an ARHG accredited therapy.
- Providers who completed their study prior to the implementation of Registered Training Organisations (March 2002) must be able to demonstrate that:
  - they received (or upgraded) their qualification in Australia
  - they have been in practice since graduating (with the exception of maternity/paternity for a continuous period of no more than 12 months)
  - they have undertaken continuing professional education, as per the membership requirements of their association (including during leave of absence), and
  - they have held continuous association membership since graduating.
- Providers who completed their study after the implementation of Registered Training Organisations (March 2002) must have:

<b>Acupuncture</b>	<b>Bachelor level degree</b> from an Australian higher education provider, with at least 200 hours of supervised clinical practice included in this program before graduation
<b>Chinese herbal medicine</b>	<b>Bachelor level degree</b> from an Australian higher education provider, with at least 200 hours of supervised clinical practice included in this program before graduation
<b>Massage therapy</b>	<b>Certificate IV level degree</b> from an Australian higher education provider, with at least 80 hours of supervised clinical practice included in this program before graduation
<b>Myotherapy</b>	<b>Advanced Diploma level degree</b> from an Australian higher education provider, with at least 200 hours of supervised clinical practice included in this program before graduation
<b>Nutrition</b>	<b>Bachelor level degree</b> from an Australian higher education provider, with at least 200 hours of supervised clinical practice included in this program before graduation Must be a standalone qualification, not in conjunction with another modality
<b>Remedial therapy</b>	<b>Diploma level degree</b> from an Australian higher education provider, with at least 200 hours of supervised clinical practice included in this program before graduation

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## Appendix 2: Mode of delivery requirements

If the course utilises distance, online, virtual or other off-campus modes of education in course delivery, the following components must be delivered face-to-face on campus:

- practical components of course health science subjects, including components which require skills-based knowledge e.g. surface anatomy and palpation.
- practical components of course modality specific subjects, including components which require skills-based knowledge e.g. case taking and clinical examination, assessment of conditions, treatment plans, preparation and dispensing of nutritional remedies, ingestive therapeutics and other associated therapeutics and techniques.
- *VET sector programs of study (e.g. Diploma and Advanced Diploma)* - no student clinical practicum hours and student clinical training may be outsourced to private clinics, and must be conducted at the educational provider's on-campus clinic facilities. All student clinical practicum hours and training must be supervised by experienced qualified staff, who have attained as a minimum, a qualification at the same level they are teaching in the same modality/discipline as the students are studying. The staff members of the educational provider who are supervising the students' clinical training must also hold a current Certificate IV in Training and Assessment (TAE40110).
- *Other higher education programs of study (e.g. Bachelor Degree)* - no student clinical practicum hours and student clinical training may be outsourced to private clinics, and must be conducted at the educational provider's on-campus clinic facilities. All student clinical practicum hours and training must be supervised by experienced qualified staff who have attained a degree in the same modality/discipline as the students are studying, plus a master's degree in a related field. The staff members of the educational provider who are teaching in the undergraduate program and supervising the students' clinical training must also hold a current postgraduate qualification in a related field.
- all examinations, tests and assessment of competency are to be undertaken and marked by the educational provider's qualified and trained staff on-campus. Marking of student tests and assessment of student's competency offshore is not acceptable.
- *Note* - excluding clinical training course units which are to be completed on-campus in accordance with the above requirements, at least 50% of the remaining total course units must be delivered to students face-to-face, physically on-campus by trained and qualified staff.

Graduates who have completed courses that do not comply with the above requirements are not eligible for provider recognition, and must not be included on lists of association members sent to health funds by associations.

Click [here](#) to return to provider requirements.

