University of Technology Sydney

Faculty of Science

School of Life Sciences

A Comparative Study of Cross Discipline Referral Patterns of Chinese Medicine Association Practitioners Over a Ten-Year Period (2006 - 2016): An Australian National Study

A Thesis submitted as partial requirement for the degree of

Master of Science (Research)

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Certificate of Original Authorship

I certify that the work in this thesis has not previously been submitted for a degree nor

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ABSTRACT

Background: The concept of patient-centred care has spurred the frequent involvement of multiple healthcare practitioners for a single patient. This raises professional considerations regarding clinical communication, which have health and safety impacts. Chinese Medicine (CM), which is classified as a Complementary and Alternative Medicine (CAM) practice, has recently undergone national registration and regulation within Australia reflecting its growing popularity. Currently, referral practices and behaviours of CM practitioners have not been researched. A survey was therefore undertaken to determine current referral practices and behaviours within a major Australian professional association.

Method: Data was collected from two sources. The first was retrospective, collected in 2006 (n = 386). The second dataset was generated by using a revised survey based on the 2006 version (n = 112). Both surveys were administered to members of the Australian Acupuncture and Chinese Medicine Association, the peak professional body representing CM practitioners in Australia. Survey 1 was administered in hardcopy while survey 2 was administered through an online platform (Survey Monkey).

Results: It was found that over the ten-year period, some aspects of the practitioners' referral practices had not statistically changed. There were however, statistically significant changes observed for some aspects. This included an increase in the provision of written referral contact; a decrease in the provision of verbal referral contact by CM practitioners to other allied health and CAM practitioner; as well as a statistically significant change in the provision of referral reason to other allied health and CAM practitioners.

Conclusion: Strategies to improve referral practices and behaviours of CM practitioners such as inter-disciplinary education and inter-professional communication needs to be further encouraged to achieve improved referral practices in a patient-centred environment.