

## **Amendment to GIPA2019/10 released set of information**

The following documents include documents where decisions were varied under internal review of GIPA2019/10.

Only documents where new decisions were applied, are included in this set.

**From:** Dianne Jolley  
**To:** Andrew Parfitt  
**Subject:** Re: Update: UTS-WSU TCM Course Mapping  
**Date:** Tuesday, June 25, 2019 7:40:15 PM

---

Ok, yes, that's clearer. I was looking at it from a different angle.  
Thanks

Dianne

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology Sydney NSW Australia

\* Sent from my phone

---

**From:** Andrew Parfitt  
**Sent:** Tuesday, June 25, 2019 7:16:06 PM  
**To:** Dianne Jolley  
**Subject:** Re: Update: UTS-WSU TCM Course Mapping

Dianne,

No I think you are confusing my points perhaps.

The CSP transfer only applies to new students from 2020, ramping up over several years to the full load. This is the commitment to thto TCM Community not to reduce the scale of TCM education over time due to UTS closing our course.

For all our current cohort, transferring or not, we determine a financial arrangement or set of models with WSU. This is the teach out group. If these students transfer at any time we can deal with that as a financial transaction as well. All of this is time bounded and limited only to those students currently enrolled with us.

Does that make more sense?

Andrew.

Sent from my iPad

On 25 Jun 2019, at 6:55 pm, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Hi Andrew,

Yep, I will keep the conversation as better good for all involved and long term good for professional practice and wider community.

Just so I'm clear on the other aspect, if we are talking about a potential transfer of CPS, there are two categories of students:

- (1) those willing to transfer to WSU at a defined time point, where we offer the CPS to WSU
- (2) those that are unwilling to transfer, and we instruct them to leave by terminating the programs, perhaps either mid or end of 2020 (bad for reputation), and transfer the CPS.

Or

- (1) above plus
- (3) for those students that are unwilling to transfer, we have a legal (?) obligation to teach them out in a revised program because we don't have multiple locations as a delivery option in the current approved teaching program. My recommendation here would be a line in the sand at the end of 2021 (getting current 2019 intake to end of year 3). Then go to WSU for yr 4 as an end on honours year.

What we choose to do here will be the decision that will define our next move. We won't be making this decision tomorrow, but it will need to be decided in coming weeks.

Are you back next week?



Dianne

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology Sydney NSW Australia

\* Sent from my phone

---

**From:** Andrew Parfitt  
**Sent:** Tuesday, June 25, 2019 6:13:45 PM  
**To:** Dianne Jolley  
**Subject:** Re: Update: UTS-WSU TCM Course Mapping

And to the nay sayers in UTS about transferring CSP - just remind the that for every \$1.5m of revenue we make, we lose an additional \$1.5m above our direct and indirect costs. That makes very bad business sense to me!

Sent from my iPad

On 25 Jun 2019, at 5:56 pm, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Hello Andrew,

I just left you a brief phone message. Based on your comments, I will approach tomorrow's WSU meeting with a delay around the discussion of transfer of places, but will flag the idea of a transitional subsidy to see how it is received.

UTS will need to model the options of teaching out with:

- (i) a completion date of Dec 2020, where most students will have completed 2<sup>nd</sup> year (with exceptions for underload, PT and failing students);
- (ii) a completion date of Dec 2021, where the majority of students will have completed 3<sup>rd</sup> year, and can graduate from UTS with a 3 year degree. We could seek a commitment from WSU to accept/consider UTS students for their fourth year program should they apply, as our students have a higher ATAR to enter, they will probably be attractive to WSU.

Gregory's comment was quite direct, but I will need to determine tomorrow if this is a deal breaker for WSU.

"Given that you would not be taking a commencing intake in 2020, WSU would want to agree with UTS (and then with relevant Commonwealth approval) that for 2020 WSU would have your usual (or average) commencing EFTSL transferred. Then in 2021, we would look to have the remainder of your EFTSL (i.e., your usual or average EFTSL from Years 2, 3, and 4 of the program) transferred. In a capped funding environment that we have now, without this EFTSL transfer, WSU would not be able to take on and complete the training of these students. I am happy to talk with you about this ..."

I just had a long conversation with Tony Dooley, so am going home, perhaps for a Cognac.

Dianne

---

**From:** Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>  
**Sent:** Monday, 24 June 2019 2:49 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** Re: Update: UTS-WSU TCM Course Mapping

Dianne,

As I indicated, fee for service works for teach out in the short term but not if there is to be a long term additional arrangement. We wont want a bilateral financial arrangement long term (or in perpetuity) unless it involves places being shifted. This is a strategic decision rather than an operational one and depends how much we want to signal to the profession that we have it's long term interest in mind even though we are discontinuing the course and related activities.

Another possible arrangement is a transitional one, where we subsidize WSU for a defined period.

Happy to discuss if we can find a convenient time or it can wait until next week.

Andrew.

Sent from Andrew's phone

On 24 Jun 2019, at 12:22 pm, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Hi Andrew,

When the UTS change team chatted this morning, there was significant discomfort that UTS may give away commonwealth funded university places to WSU. Once we have a better idea around what the teach out models, we can develop a longer-term financial plan around the scenarios. The idea that we use those calculations to establish a 'payment' to WSU to cover the cost of teaching those students, which is better than offering our places (which has longer term implications if the options 2 below doesn't succeed – especially based on FOS QILT employability data at the moment).

Attila mentioned the possibility of paying WSU to take the program, this could be a solution to UTS retaining the student places for the longer term.

Are you comfortable with me exploring this with WSU as a concept for a way forward?

Hope China is warmer than Sydney,  
Dianne

---

**From:** Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>

**Sent:** Monday, 24 June 2019 10:24 AM

**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>

**Subject:** Re: UTS-WSU TCM Course Mapping

Dianne,

I think there are to aspects:

1. The practicalities of teach out and the teach out model. This is best handled by direct financial arrangements I think, even though the EFTSL being taught might form a basis for the calculation and
2. Separately the negotiation with government to adjust caps or assign additional places to WSU as the compensation to the profession for us choosing not to continue with TCM. Barney and Attila will need to agree and negotiate that one I should think.

2 assumes that WSU are above the cap as they claim.

I look forward to hearing how the discussions go, but my advice would be to keep these two areas separate.

Andrew.

Sent from my iPad

On 24 Jun 2019, at 7:40 am, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Good morning Andrew,

Any thoughts on this? I have a zoom meeting with Gregory Kolt WSU on Wednesday. The agenda is covering curriculum mapping, communications, and he has requested EFTSL (see below).

My take on the current situation suggests:

- the majority of students are unlikely to want to transfer voluntarily and UTS doesn't want to make them (reputation and student care). We will offer several carrots, and declare when we will stop teaching all TCM subjects. So our plan is that we teach out and keep that EFTSL.
- We may have a bunch of voluntary transfers to WSU (we give them that EFTSL).

But logically, if we opt to teach out, wouldn't UTS want to retain all students and EFTSL, but design a different teaching model? There's a meeting this morning with myself and Jacqui Wise, Greg Walsh, Lesley Healy and Theo to collate thoughts before Wednesday's meeting with WSU. This will help with student course mapping aspects.

Di

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology Sydney NSW Australia

---

**From:** Gregory Kolt <[G.Kolt@westernsydney.edu.au](mailto:G.Kolt@westernsydney.edu.au)>  
**Sent:** Thursday, 20 June 2019 6:17 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** FW: UTS-WSU TCM Course Mapping

Dear Dianne

I thought I would seed with you, before our meeting next week, our ideas regarding EFTSL transfer so that you could look to discuss these at your end before we meet.

Given that you would not be taking a commencing intake in 2020, WSU would want to agree with UTS (and then with relevant Commonwealth approval) that for 2020 WSU would have your usual (or average) commencing EFTSL transferred. Then in 2021, we would look to have the remainder of your EFTSL (i.e., your usual or average EFTSL from Years 2, 3, and 4 of the program) transferred.

In a capped funding environment that we have now, without this EFTSL transfer, WSU would not be able to take on and complete the training of these students.

I am happy to talk with you about this, but thought it best to provide some thoughts on how we could make this work so that students can be effectively taught to the completion of their degrees.

Please feel free to call me on s.2.1.3. at any time to discuss.

Kind regards  
Gregory

Professor Gregory Kolt | Dean of Science and Health | Professor of Health Science  
School of Science and Health  
Locked Bag 1797, Penrith NSW 2751, Australia  
P: +61 2 4620 3747 | E: [g.kolt@westernsydney.edu.au](mailto:g.kolt@westernsydney.edu.au)

[westernsydney.edu.au](http://westernsydney.edu.au)

<image001.jpg>

---

**From:** Gregory Kolt  
**Sent:** Wednesday, 19 June 2019 5:14 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** RE: UTS-WSU TCM Course Mapping

Thanks Dianne

We will get this signed and returned as soon as we can.

Kind regards  
Gregory

Professor Gregory Kolt | Dean of Science and Health | Professor of Health Science  
School of Science and Health  
Locked Bag 1797, Penrith NSW 2751, Australia  
P: +61 2 4620 3747 | E: [g.kolt@westernsydney.edu.au](mailto:g.kolt@westernsydney.edu.au)

[westernsydney.edu.au](http://westernsydney.edu.au)

<image001.jpg>

---

**From:** Dianne Jolley [<mailto:Dianne.Jolley@uts.edu.au>]  
**Sent:** Wednesday, 19 June 2019 5:11 PM  
**To:** Gregory Kolt <[G.Kolt@westernsydney.edu.au](mailto:G.Kolt@westernsydney.edu.au)>  
**Subject:** RE: UTS-WSU TCM Course Mapping

Dear Gregory,

Thank you for the course mapping document, we will get started on it straight away.

I have now attached the signed MOU for signature at your end.

Looking forward to catching up next week.

Kind regards,  
Dianne

**Professor Dianne Jolley**  
Dean  
Faculty of Science  
University of Technology Sydney  
PO Box 123, Broadway NSW 2007  
E: [dianne.jolley@uts.edu.au](mailto:dianne.jolley@uts.edu.au)  
W [uts.edu.au](http://uts.edu.au)

<image002.png> <image003.png> <image004.png> <image005.png> <image006.png> <image007.png>

<image008.png>

---

**From:** Gregory Kolt <[G.Kolt@westernsydney.edu.au](mailto:G.Kolt@westernsydney.edu.au)>  
**Sent:** Tuesday, 18 June 2019 3:27 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** UTS-WSU TCM Course Mapping

Dear Dianne

We have now completed the initial course mapping. The attached

document shows the course sequences for students who has completed 1, 2, and 3 standard years of study in the UTS program, before transferring to WSU. You can likely ignore the Table on 1 standard year completion at UTS given that the transfer would likely take place for the commencement of 2021, and involve those who have completed 2 standard years at UTS. Of course, there will be those with non-standard progressions (part-time, etc.) who would need to be individually mapped with less guarantee of minimum completion times.

We have been able to achieve a reasonably clean mapping meaning that students who transfers with 2 standard years completed at UTS would be able to complete in a further 2 years at WSU (based on full-time study), and a person with 3 standard years completed at UTS would be a able to complete with a further 1 year at WSU (based on full-time study).

To start off our agenda list for our meeting on 26 June, I suggest the following items:

- Course mapping
- Issue of fee implications of additional module required to meet course and mapping expectations
- Issue of EFTSL transfer from 2020 onwards (will need VC intervention and Commonwealth approval)
- MoU finalisation (hopefully this is completed before the meeting)
- Communications strategy around transfer decisions and arrangements
- Communications to enquiries to UTS re commencing enrolments from now onwards
- Communications re UTS decision on its programs and transfer to WSU (I know the communications now indicate that UTS are exploring options – the sooner we can arrive at an Agreement and this is communicated the better).

I am sure we will think of other things along the way.

Kind regards  
Gregory

Professor Gregory Kolt | Dean of Science and Health | Professor of Health Science  
School of Science and Health  
Locked Bag 1797, Penrith NSW 2751, Australia  
P: +61 2 4620 3747 | E: [g.kolt@westernsydney.edu.au](mailto:g.kolt@westernsydney.edu.au)

[westernsydney.edu.au](http://westernsydney.edu.au)

<image001.jpg>

UTS CRICOS Provider Code: 00099F DISCLAIMER: This email message and any accompanying attachments may contain confidential information. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message. Any views expressed in this message are those of the individual sender, except where the sender expressly, and with authority, states them to be the views of the University of Technology Sydney. Before opening any attachments, please check them for viruses and defects. Think. Green. Do. Please consider the environment before printing this email.

**From:** [Andrew Parfitt](#)  
**To:** [Dianne Jolley](#)  
**Subject:** Re: Update: UTS-WSU TCM Course Mapping  
**Date:** Tuesday, June 25, 2019 6:10:19 PM

---

Dianne,

Yes I got your message. I'm on a train to Shanghai and the phone coverage is patchy.

There are two separate issues but as you point out for WSU they may be tightly linked. For us, too, I would say it is important for us to signal good intent to the TCM community that we are trying to find a long term solution for TCM education. If you and Gregory agree the principle that we will work together to find a long term solution then we will need to elevate any proposal to reassign CSP to the VCs. I think Attila was comfortable with this, as am I. But it will need a coordinated and senior approach. I'm not sure the transitional approach will be as attractive for WSU but worth asking. We wouldn't agree to a perpetual payment which is why I think Attila was ok to go into bat for either new or transferred CSPs.

On the teach out we can agree a model for progressively handing over the teaching to WSU, particularly as staff move on. This would involve some payment from UTS. I suspect for economies of scale it will also require us to do some alignment of our academic program with WSU. We'd need to work through professional accreditation requirements as we do this. It is worth asking Gregory whether he as a sense as to their capacity to take over teaching for all or part of the course, potentially using some of our staff if appropriate for a period. Working out some model, staged over several years, will take a bit of work so I wouldn't want the former issue of places to be a show stopper to doing this. For WSU, if they are over the cap, this is the win win for them, otherwise I can't see why they would help us out.

Hope that makes sense.

Andrew.

Sent from my iPad

On 25 Jun 2019, at 5:56 pm, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Hello Andrew,

I just left you a brief phone message. Based on your comments, I will approach tomorrow's WSU meeting with a delay around the discussion of transfer of places, but will flag the idea of a transitional subsidy to see how it is received.

UTS will need to model the options of teaching out with:

- (i) a completion date of Dec 2020, where most students will have completed 2<sup>nd</sup> year (with exceptions for underload, PT and failing students);
- (ii) a completion date of Dec 2021, where the majority of students will have completed 3<sup>rd</sup> year, and can graduate from UTS with a 3 year degree. We could seek a commitment from WSU to accept/consider UTS students for their fourth year program should they apply, as our students have a higher ATAR to enter, they will probably be attractive to WSU.

Gregory's comment was quite direct, but I will need to determine tomorrow if this is a deal breaker for WSU. "Given that you would not be taking a commencing intake in 2020, WSU would want to agree with UTS (and then with relevant Commonwealth approval) that for 2020 WSU would have your usual (or average) commencing EFTSL transferred. Then in 2021, we would look to have the remainder of your EFTSL (i.e., your usual or average EFTSL from Years 2, 3, and 4 of the program) transferred. In a capped funding environment that we have now, without this EFTSL transfer, WSU would not be able to take on and complete the training of these students. I am happy to talk with you about this ..."

I just had a long conversation with Tony Dooley, so am going home, perhaps for a Cognac.

Dianne

---

**From:** Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>  
**Sent:** Monday, 24 June 2019 2:49 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** Re: Update: UTS-WSU TCM Course Mapping

Dianne,

As I indicated, fee for service works for teach out in the short term but not if there is to be a long term additional arrangement. We won't want a bilateral financial arrangement long term (or in perpetuity) unless it involves places being shifted. This is a strategic decision rather than an operational one and depends how much we want to signal to the profession that we have its long term interest in mind even though we are discontinuing the course and related activities.

Another possible arrangement is a transitional one, where we subsidize WSU for a defined period.

Happy to discuss if we can find a convenient time or it can wait until next week.

Andrew.

Sent from Andrew's phone

On 24 Jun 2019, at 12:22 pm, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Hi Andrew,

When the UTS change team chatted this morning, there was significant discomfort that UTS may give away commonwealth funded university places to WSU. Once we have a better idea around what the teach out models, we can develop a longer-term financial plan around the scenarios. The idea that we use those calculations to establish a 'payment' to WSU to cover the cost of teaching those students, which is better than offering our places (which has longer term implications if the options 2 below doesn't succeed – especially based on FOS QILT employability data at the moment).

Attila mentioned the possibility of paying WSU to take the program, this could be a solution to UTS retaining the student places for the longer term.

Are you comfortable with me exploring this with WSU as a concept for a way forward?

Hope China is warmer than Sydney,  
Dianne

---

**From:** Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>  
**Sent:** Monday, 24 June 2019 10:24 AM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** Re: UTS-WSU TCM Course Mapping

Dianne,

I think there are two aspects:

1. The practicalities of teach out and the teach out model. This is best handled by direct financial arrangements I think, even though the EFTSL being taught might form a basis for the calculation and
2. Separately the negotiation with government to adjust caps or assign additional places to WSU as the compensation to the profession for us choosing not to continue with TCM.

Barney and Attila will need to agree and negotiate that one I should think.

2 assumes that WSU are above the cap as they claim.

I look forward to hearing how the discussions go, but my advice would be to keep these two areas separate.

Andrew.

Sent from my iPad

On 24 Jun 2019, at 7:40 am, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)> wrote:

Good morning Andrew,

Any thoughts on this? I have a zoom meeting with Gregory Kolt WSU on Wednesday. The agenda is covering curriculum mapping, communications, and he has requested EFTSL (see below).

My take on the current situation suggests:

- the majority of students are unlikely to want to transfer voluntarily and UTS doesn't want to make them (reputation and student care). We will offer several carrots, and declare when we will stop teaching all TCM subjects. So our plan is that we teach out and keep that EFTSL.

- We may have a bunch of voluntary transfers to WSU (we give them that EFTSL).

But logically, if we opt to teach out, wouldn't UTS want to retain all students and EFTSL, but design a different teaching model?

There's a meeting this morning with myself and Jacqui Wise, Greg Walsh, Lesley Healy and Theo to collate thoughts before Wednesday's meeting with WSU. This will help with student course mapping aspects.

Di

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology Sydney NSW Australia

---

**From:** Gregory Kolt <[G.Kolt@westernsydney.edu.au](mailto:G.Kolt@westernsydney.edu.au)>  
**Sent:** Thursday, 20 June 2019 6:17 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** FW: UTS-WSU TCM Course Mapping

Dear Dianne

I thought I would seed with you, before our meeting next week, our ideas regarding EFTSL transfer so that you could look to discuss these at your end before we meet.

Given that you would not be taking a commencing intake in 2020, WSU would want to agree with UTS (and then with relevant Commonwealth approval) that for 2020 WSU would have your usual (or average) commencing EFTSL transferred. Then in 2021, we would look to have the remainder of your EFTSL (i.e., your usual or average EFTSL from Years 2, 3, and 4 of the program) transferred.

In a capped funding environment that we have now, without this EFTSL transfer, WSU would not be able to take on and complete the training of these students.



I am happy to talk with you about this, but thought it best to provide some thoughts on how we could make this work so that students can be effectively taught to the completion of their degrees.

Please feel free to call me on <sup>s.2.1.3.</sup> [REDACTED] at any time to discuss.

Kind regards  
Gregory

Professor Gregory Kolt | Dean of Science and Health | Professor of Health Science  
School of Science and Health  
Locked Bag 1797, Penrith NSW 2751, Australia  
P: +61 2 4620 3747 | E: [g.kolt@westernsydney.edu.au](mailto:g.kolt@westernsydney.edu.au)

[westernsydney.edu.au](http://westernsydney.edu.au)

<image001.jpg>

---

**From:** Gregory Kolt  
**Sent:** Wednesday, 19 June 2019 5:14 PM  
**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** RE: UTS-WSU TCM Course Mapping

Thanks Dianne

We will get this signed and returned as soon as we can.

Kind regards  
Gregory

Professor Gregory Kolt | Dean of Science and Health | Professor of Health Science  
School of Science and Health  
Locked Bag 1797, Penrith NSW 2751, Australia  
P: +61 2 4620 3747 | E: [g.kolt@westernsydney.edu.au](mailto:g.kolt@westernsydney.edu.au)

[westernsydney.edu.au](http://westernsydney.edu.au)

<image001.jpg>

---

**From:** Dianne Jolley [<mailto:Dianne.Jolley@uts.edu.au>]  
**Sent:** Wednesday, 19 June 2019 5:11 PM  
**To:** Gregory Kolt <[G.Kolt@westernsydney.edu.au](mailto:G.Kolt@westernsydney.edu.au)>  
**Subject:** RE: UTS-WSU TCM Course Mapping

Dear Gregory,

Thank you for the course mapping document, we will get started on it straight away.

I have now attached the signed MOU for signature at your end.

Looking forward to catching up next week.

Kind regards,  
Dianne

**Professor Dianne Jolley**  
Dean  
Faculty of Science  
University of Technology Sydney  
PO Box 123, Broadway NSW 2007  
E: [dianne.jolley@uts.edu.au](mailto:dianne.jolley@uts.edu.au)  
W. [uts.edu.au](http://uts.edu.au)

<image002.png> <image003.png> <image004.png> <image005.png> <image006.png> <image007.png>

<image008.png>

---

**From:** Gregory Kolt <G.Kolt@westernsydney.edu.au>  
**Sent:** Tuesday, 18 June 2019 3:27 PM  
**To:** Dianne Jolley <Dianne.Jolley@uts.edu.au>  
**Subject:** UTS-WSU TCM Course Mapping

Dear Dianne

We have now completed the initial course mapping. The attached document shows the course sequences for students who has completed 1, 2, and 3 standard years of study in the UTS program, before transferring to WSU. You can likely ignore the Table on 1 standard year completion at UTS given that the transfer would likely take place for the commencement of 2021, and involve those who have completed 2 standard years at UTS. Of course, there will be those with non-standard progressions (part-time, etc.) who would need to be individually mapped with less guarantee of minimum completion times.

We have been able to achieve a reasonably clean mapping meaning that students who transfers with 2 standard years completed at UTS would be able to complete in a further 2 years at WSU (based on full-time study), and a person with 3 standard years completed at UTS would be a able to complete with a further 1 year at WSU (based on full-time study).

To start off our agenda list for our meeting on 26 June, I suggest the following items:

- Course mapping
- Issue of fee implications of additional module required to meet course and mapping expectations
- Issue of EFTSL transfer from 2020 onwards (will need VC intervention and Commonwealth approval)
- MoU finalisation (hopefully this is completed before the meeting)
- Communications strategy around transfer decisions and arrangements
- Communications to enquiries to UTS re commencing enrolments from now onwards
- Communications re UTS decision on its programs and transfer to WSU (I know the communications now indicate that UTS are exploring options – the sooner we can arrive at an Agreement and this is communicated the better).

I am sure we will think of other things along the way.

Kind regards  
Gregory

Professor Gregory Kolt | Dean of Science and Health | Professor of Health Science  
School of Science and Health  
Locked Bag 1797, Penrith NSW 2751, Australia  
P: +61 2 4620 3747 | E: [g.kolt@westernsydney.edu.au](mailto:g.kolt@westernsydney.edu.au)

[westernsydney.edu.au](http://westernsydney.edu.au)

<image001.jpg>

UTS CRICOS Provider Code: 00099F DISCLAIMER: This email message and any accompanying attachments may contain confidential information. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message. Any views expressed in this message are those of the individual sender, except where the sender expressly, and with authority, states them to be the views of the University of Technology Sydney. Before opening any attachments, please check them for viruses and defects. Think. Green. Do. Please consider the environment before printing this email.



# Confidential Review Traditional Chinese Medicine

Faculty of Science  
June 2019

## Status of Chinese Medicine in the UTS Faculty of Science

### Background

In 1994 Traditional Chinese Medicine moved from Acupuncture Colleges (Australia) to UTS, and in 1995 moved to the Faculty of Science. The courses initially taught included a 3.5 year undergraduate degree in acupuncture and a 2-year Masters by coursework program in Chinese herbal medicine. In 2000 the acupuncture and Chinese herbal medicine programs were combined to form a 4-year undergraduate course that covered both acupuncture and Chinese herbal medicine. Two undergraduate courses are currently offered: Bachelor of Health Science in Traditional Chinese Medicine, and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years). Staff and students have provided a public-facing Traditional Chinese Medicine Clinic at UTS since 1994 that also acts as a teaching facility for students in all years of the undergraduate courses.

The discipline of Traditional Chinese Medicine was re-named Chinese Medicine in 2015 with the formation of the new School of Life Sciences, and it is currently a Discipline Group in the School of Life Sciences with a Discipline Group leader (Associate Professor Chris Zaslowski). As a Discipline Group Leader, Associate Professor Zaslowski is a member of the School Executive. While the courses taught by staff in the Chinese Medicine Discipline Group are called 'Traditional Chinese Medicine' for consistency throughout this paper the combination of staff, teaching, research, and the clinic operations will collectively be referred to as Chinese Medicine (CM).

Elsewhere at UTS, research and research training in aspects of traditional Chinese medicine occur in the Faculty of Health in the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM). The Centre also does projects in a range of other complementary therapies. Within universities in NSW, traditional Chinese medicine exists only at Western Sydney University (WSU) in the School of Science and Health.

This report will inform thinking and decisions about options for the future of CM at UTS. It is a response to several strategic pressures: the results of the 2018 UTS Course Viability Analysis and internal Faculty financial analysis (provided later in this report); the strategic imperative (via UTS 2027) for UTS and the Faculty of Science to evolve from being research-active to research-intensive and the potential for CM to contribute to this; the need for continual improvement in the Faculty's overall financial position and efficiency of its operations; and consideration of the disciplinary fit of CM (with courses that graduate registered health practitioners) within the Faculty of Science.

This report was prepared by the Deputy Dean, Professor William Gladstone using publicly available information (e.g. web sites of UTS, other universities, private education providers) and data provided by staff from the CM Discipline Group, HRU, the Faculty's Finance Partner and Research admin team, and the Associate Dean (International). The Dean, Professor Dianne Jolley, has reviewed the draft and final versions of this report.

The CM Discipline Group reviewed two draft versions of this status report, and their comments and suggestions have been incorporated where relevant. The CM Discipline Group have provided a response to some of the matters reported in this status report in a separate document called Chinese Medicine Options Paper, which was submitted to the Dean and Deputy Dean and is submitted alongside this report. This will be referred to where relevant.

## Staff

In 2018 there were 21 staff employed as: 9 continuing academics (7 academics and 2 clinical educators); 3 fixed-term academics; 7 casual academics; and 2 casual professional staff. These staff represent 12.6 FTE. The 12.6 FTE includes Associate Professor Xianqin Qu (who teaches in the CM courses but is a member of the Medical Science Discipline Group in the School of Life Sciences) and Associate Professor Peter Meier (Associate Dean (Teaching and Learning), with a substantive appointment in the CM discipline (IR-1.2. [REDACTED])). The staff data presented for 2018, and the casual academic costs, also reflect that 1 academic (S.2.1.3. [REDACTED]). Two staff also teach into other subjects in the Faculties of Science, Health and Transdisciplinary Innovation<sup>1</sup>.

The 12 academic staff employed in fixed-term or continuing academic positions represented academic staff levels A (Associate Lecturer) to D (Associate Professor) and Clinical Educator, who had been employed for periods (IR-1.2. [REDACTED]) (Figure 1). These staff included (R-1.2. [REDACTED])

IR-1.2. [REDACTED]

In 2018 nineteen of the 24 CM-specific subjects required casual academics to assist with teaching. Twenty-seven different individuals were employed as casuels for a total of 500 hours and a total cost (including oncosts) of (S.2.1.5. [REDACTED]).

Average CM staff workloads in 2018 (for the nine continuing and three fixed-term academics) reported in the Faculty's workload calculators were: 60% teaching, 19% research, and 21% management/engagement. By comparison, the average workloads across all other academics in the Faculty of Science were: 22% teaching, 58% research, and 20% management/engagement. The distribution of workload across the three categories for CM staff differs from the average workload profile of the rest of the Faculty of Science because of: 42% of CM academics were employed as teaching only (i.e. the fixed-term academics and the clinical educators); two staff performed leadership roles (Meier, Zaslowski); and there were no research intensive academic staff.

---

<sup>1</sup> C Zaslowski provided the following information on the contributions of CM academics to teaching in other courses: In the Faculty of Science Shuai Zheng taught into 91239 Human Pathophysiology (IR-1.2. [REDACTED]) in 2017, 2018 and 2019; 91562 Health and Homeostasis (IR-1.2. [REDACTED]) in 2018 and 2017; and 91429 Physiological Basis of Human Movement (IR-1.2. [REDACTED]) in 2017. Dr Sean Walsh taught into 91708 Medical and Applied Physiology (IR-1.2. [REDACTED]); Faculty of Transdisciplinary Innovation, Bachelor of Creative Intelligence and Innovation in 81528 New Knowledge Making Map (IR-1.2. [REDACTED]) and 81513 Past, Present and Future of Innovation (IR-1.2. [REDACTED]); Faculty of Health, Bachelor of Nursing, 92482 Introduction to Speciality Practice: Women's Health (IR-1.2. [REDACTED]).

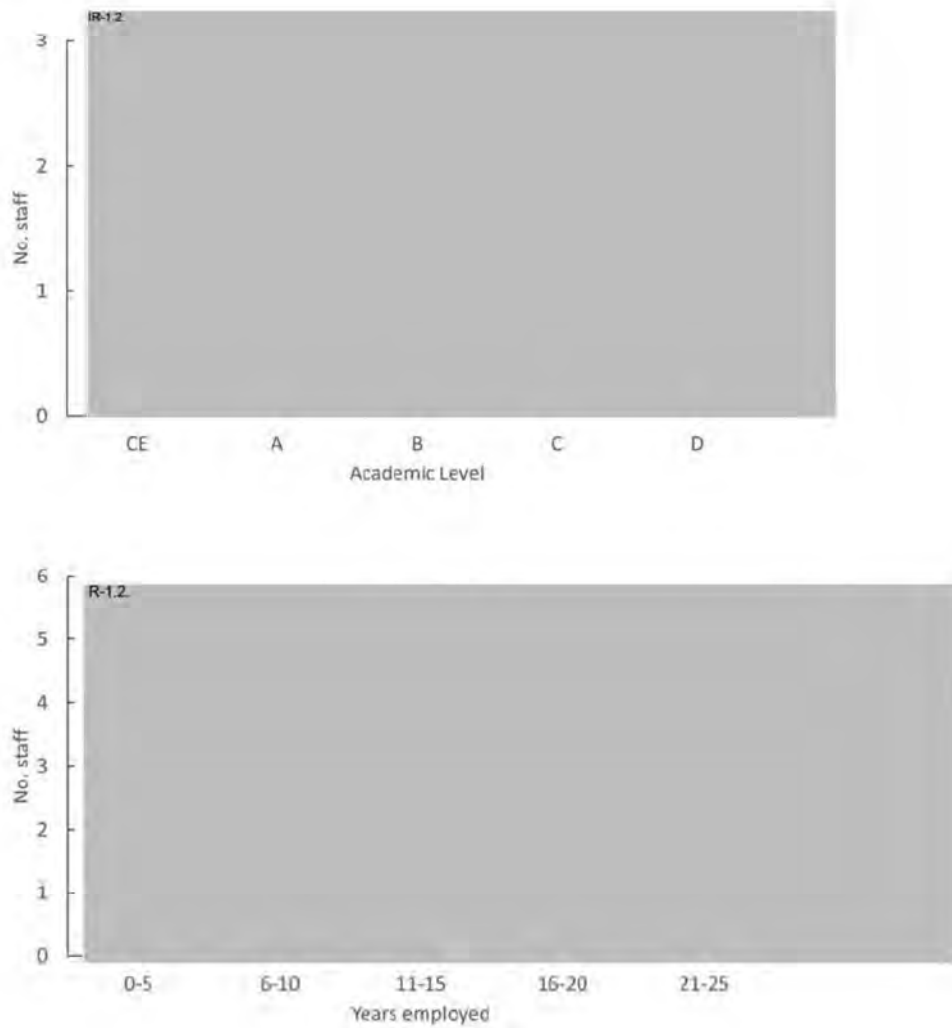


Figure 1. Profile of academic staff (fixed-term and continuing) employed in the CM discipline at the end of January 2019: (a) academic level (CE Clinical Educator; A Associate Lecturer; B Lecturer; C Senior Lecturer; D Associate Professor); (b) years employed at UTS.

## Courses and Teaching

The following courses are offered:

- Bachelor of Health Science in Traditional Chinese Medicine (4-years)
- Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years)

Throughout the 4-year Bachelor of Health Science in Traditional Chinese Medicine course CM students complete 30 subjects representing 192 credit points (Table 1). These subjects represent 24 CM-specific subjects, 5 non-CM subjects offered by the Faculty of Science, and 1 non-CM subject offered by the Faculty of Health. The 4-year course is prescribed i.e. there are no elective subjects.

Three CM subjects were taken by students enrolled in other courses during 2018: Chinese Medicine Foundations 1 (3.5 EFTSL), Clinical Practice 1 (0.5 EFTSL), and Clinical Features of Disease (2.9 EFTSL).

The five non-CM subjects offered by the Faculty of Science and taken by CM students include: (i) Human Anatomy and Physiology, a first-year core subject for all students enrolled in a course in the life sciences stream, (ii) Physiological Systems, a core subject in the Bachelor of Medical Science, Bachelor of Biomedical Engineering, and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science, Infection and Immunity majors), (iii) Human Pathophysiology, a core subject in the Bachelor of Medical Science and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science majors); (iv) Neuroscience, a core subject in the Bachelor of Medical Science; and (v) Clinical Features of Disease, a core subject in the Pre-Medicine major in the Bachelor of Advanced Science.

The CM subjects are delivered via a variety of modes including lectures, practicals, clinic, workshop or tutorial. Currently, no CM subjects are delivered in the Summer session. The clinic-based training (in the CM Clinic), commences in Autumn session of first-year in both courses. The number of clinic-based teaching hours increases in each year of the courses, delivered across eight clinical subjects. Students complete a total of 945 clinical hours throughout their course and a minimum number of patient treatments. The clinical training is an example of authentic learning and assessments are conducted under real-life circumstances.

As part of their clinical education CM students can elect to do a six-week clinical placement in a hospital in China (affiliated with the Chengdu University of Chinese Medicine) or South Korea (affiliated with Dong Eui University). These arrangements are supported by MoUs with both institutions. This opportunity is taken-up by 50-75% of final-year students. The overseas placements are self-funded by each student, although some financial assistance is provided through UTS Build and Colombo Plan (for students meeting the age requirement).

In comparison with other courses in the Faculty of Science, the majority (24/30 subjects i.e. 80%) of subjects in the CM course are CM-discipline subjects. This level of specificity is required to meet the external accreditation requirements because the majority of outcomes required for accreditation are specific to CM practice. The large component of clinical teaching also provides a relevant learning experience that distinguishes the UTS CM course from other courses. While this level of specificity provides a unique and intensive, discipline-based teaching experience it results in the teaching being resource intensive, and also leads to inefficiencies when the average number of enrolled students is low and there are few opportunities to offer subjects that are also of interest and relevant to non-CM students in, for example, biomedical or medical science courses. Two CM subjects are offered as electives for non-CM students: 99665 Chinese Medicine Foundations (3.5



EFTSL of non-CM students in 2018) and 99584 Clinical Features of Disease (2.9 EFTSL of non-CM students in 2018).

For other courses the School of Life Sciences uses a model of co-taught subjects and sharing of resources to optimise efficiency, whilst maintaining differentiation among courses. As a result, most courses have 20-30% unique subjects. These other courses also have greater enrolments, which further increases the efficiency of teaching. The CM Options Paper includes suggestions to improve the teaching efficiency in the TCM courses.

Table 1. Structure of the Bachelor of Health Science in Traditional Chinese Medicine. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject and <sup>2</sup> Faculty of Science non-TCM subjects.

<b>First Year</b>	<b>Credit points</b>	<b>Subject code</b>
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease	6	99584
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Clinic Level 6	6	99647
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Evaluating TCM: Theory, Practice and Research 2	6	91615
Clinical Practice 2 (TCM)	12	99631

Table 2. Structure of the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies combined degree. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject, <sup>2</sup> Faculty of Science non-TCM subjects, and <sup>3</sup> Faculty of Arts and Social Sciences subjects.

<b>First Year</b>	<b>Credit points</b>	<b>Subject code</b>
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Chinese Language and Culture 1 <sup>3</sup>	8	91701
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Chinese Language and Culture 2 <sup>3</sup>	8	97102
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease	6	99584
Chinese Language and Culture 3 <sup>3</sup>	8	97103
Foundations in International Studies <sup>3</sup>	8	976001
<i>Spring Session</i>		
Chinese Language and Culture 4 <sup>3</sup>	8	97104
Contemporary China <sup>3</sup>	8	976111
Clinic Level 6	6	99647
<b>Fifth Year</b>		
<i>Autumn Session</i>		
In-country Study 1: China <sup>3</sup>	24	977110
<i>Spring Session</i>		
In-country Study 2: China <sup>3</sup>	24	978110
<b>Sixth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Clinical Practice 2 (TCM)	6	99631
Evaluating TCM: Theory, Practice and Research 2	6	91615

Throughout the 6-year Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies students complete 38 subjects (Table 2), including 24 TCM subjects, 5 non-TCM subjects offered by the Faculty of Science, 1 non-TCM subject offered by the Faculty of Health, and 8 subjects offered by the Faculty of Arts and Social Science. The combined degree is structured so that students complete the majority of the TCM subjects in years 1-3, a mix of TCM and international studies subjects in year 4, a year of in-country study in China in year 5, and the remainder of the TCM course in year 6.

### **Student Load**

At the August 2018 census there were 176 enrolled students in TCM courses, representing 165 students in the Bachelor of Health Science in Traditional Chinese Medicine and 13 students in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies<sup>2</sup>. The total taught EFTSL was 129.1, including 123.4 Commonwealth supported places and 5.7 international fee-paying places<sup>3</sup>.

The total number of commencing students in the TCM courses declined annually from the peak of 79 in 2015 to 55 in 2018, with the numbers increasing to 73 in 2019 (Table 3). The taught EFTSL represented by all TCM students declined from 167.3 in 2015 to 128 in 2018 (

---

<sup>2</sup> CM Discipline Leader C Zaslowski advised that on 5 June 2019 there were 189 students enrolled in the Bachelor of Health Science in Traditional Chinese Medicine, 14 enrolled in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies, and 15 students were on leave of absence.

<sup>3</sup> These numbers differ slightly from the numbers in

Table 4 because of rounding of numbers in each row contributing to the total.

Table 4), and this is expected to show an increase in 2019 following the increased number of commencing students.

Table 3. Number of commencing students between 2014 and 2019 in the Bachelor of Health Science in Traditional Chinese Medicine (B Health Sc TCM) and Bachelor of Health Science in Traditional Chinese Medicine / Bachelor of Arts in International Studies (B Health S TCM + B AIS). The numbers of 2019 commencing students were based on data from 17 May 2019.

	2014	2015	2016	2017	2018	2019
B Health Sc TCM	50	74	64	59	48	70
B Health Sc TCM + B AIS	4	5	10	3	7	3
Total	54	79	74	62	55	73

Table 4. Total taught EFTSL of TCM students in subjects owned by the Faculty of Arts and Social Sciences (FASS), Faculty of Health (Health), Faculty of Science that are not TCM subjects (Science (non-TCM)), and in TCM subjects (TCM), for the Bachelor of Health Science in Traditional Chinese Medicine and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

	2014	2015	2016	2017	2018
FASS	2.2	2.5	0.5	0.7	1.7
Health	5.6	4.0	5.0	7.1	4.1
Science (non-TCM)	19.7	22.4	18.0	15.4	15.1
TCM	127.5	138.4	135.2	121.0	107.1
Total	155.0	167.3	158.7	144.2	128.0

### Financial Position: Faculty-level Analysis

The Faculty's financial analysis of CM is shown in Table 5. The financial analysis includes taught load income (Commonwealth Supported Places, and international fee-paying), income from TCM clinic, direct expenses (salary and NSI), and indirect expenses (UTS overheads, and Faculty-allocated overheads). The total gross income (taught load, clinic fees) in 2018 was \$<sup>s.2.1.5.</sup> .

s.2.1.5.

The UTS overhead costs were based on the information used in the 2018 Course Viability Analysis. The Faculty-based overheads were attributed based on staff FTE. The largest cost items were direct costs (salaries and NSI, estimated to be \$<sup>s.2.1.5.</sup> ) and indirect costs from UTS central overheads (\$<sup>s.2.1.5.</sup> ) and Faculty overheads ( \$<sup>s.2.1.5.</sup> ). The net financial position was an estimated deficit of \$1.483M at the end of 2018.

### Course Viability Analysis

The first Course Viability Analysis (CVA) was done in 2018 as a part of the Business Model Strategy. The intention was for the CVA to support informed decisions on the closure, subsidisation or retention of undergraduate and postgraduate courses. The CVA approach was to fully match non-research net costs to teaching revenues for all UTS courses using data for 2017, and to incorporate indicators of quality alongside the financial indicators.

s.2.1.5.

s.2.1.5.

A large rectangular area of the document is redacted with a solid grey fill, obscuring several lines of text.

s.2.1.5.

A large rectangular area of the document is redacted with a solid grey fill, obscuring several lines of text.

The CVA also assessed five indicators of course quality that covered student performance, student experience and graduate feedback. The five indicators were: success rate, retention rate, student satisfaction with quality, graduate satisfaction with course, and graduate satisfaction with teaching. An index was calculated for each indicator, which was the reported result divided by the national average (i.e. a course that performed better than the national average would have an index value  $>1$ ). Each indicator was weighted as a measure of its relative importance. The weighted indexes for the five indicators were summed to produce a Course Quality Index. A Course Quality Index  $>1$  is a positive result relative to the national average, and an Index of  $<1$  is a negative result. Each course was assessed for its net profitability (described in the previous paragraph) and Course Quality Index by plotting on XY axes (Figure 2).

The performance of the two TCM courses combined in the CVA is shown in Figure 2. The position of the TCM courses at the bottom left of the graph indicates a large negative net profit margin and an overall Course Quality Index below the national average benchmark (shown as 1 on the graph).





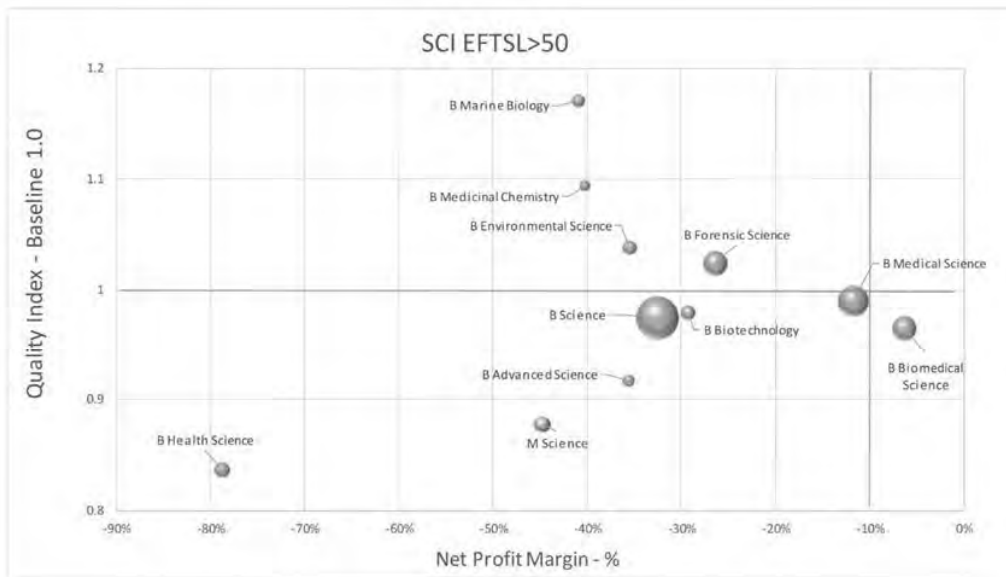


Figure 2. Graphical summary of the results of the Course Viability Analysis for courses in the Faculty of Science with an enrolled student load >50 EFTSL. The calculation and interpretation of the net profit margin and quality index are explained in the text. B Health Science is the combined result for the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

The TCM courses had a Course Quality Index of 0.84. This overall below average result was driven by below average results for the Graduate Satisfaction with Course (0.807) and Graduate Satisfaction with Teaching (0.535), and the higher weightings for these indexes (25%) compared to the other indexes. The other indexes were close to, or at, national average values: Success Rate (1.011, 15% weighting), Retention Rate (1.042, 15% weighting), and Student Satisfaction with Quality (0.969, 20% weighting). Data for the Course Quality Index, for the UTS results and the national benchmarks, were obtained from the Student Experience Survey and the Graduate Outcomes Survey.

### Accreditation: Internal

Courses at UTS are approved for periods of five years via the Award Course Approval and Reaccreditation Policy and the Award Course Approval and Reaccreditation Procedures. The depth and extent of the approval process depend on the previous performance of the course, and courses with a record of good performance require a 'short reaccreditation' process. The UTS Courses Accreditation Committee recommended (after a Short Reaccreditation process during 2016) that the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies be re-accredited for 2017-2021. This recommendation was approved by Academic Board in July 2016.

The UTS Curriculum Performance Report reviews all UTS courses and subjects against a set of benchmarks determined by the Provost and Deputy Vice-Chancellor (Education & Students). The indicators (determined for courses and subjects) used in the CPR are designed to link course performance with UTS KPIs. The CPR provides an assessment of the performance of courses and

subjects relative to the indicators and highlights areas requiring action to address issues that have been identified.

The Bachelor of Health Science in Traditional Chinese Medicine was included on the Outstanding Courses List for 'consecutive excellent ratings and improving over two or more years' in the 2014 and 2015 Curriculum Performance Reports.

The Bachelor of Health Science in Traditional Chinese Medicine received an overall rating of Green each year in its annual Course Performance Reports for 2015-17. Specific indicators that were also Green each year included: UAC preferences 1-3 to total preferences; student load; success rate; and attrition rate. Average salary of graduates was Green in 2017 and 2015. There have been no consistent issues (indicated by a Red rating) over these three years, with timetabled hours/EFTSL flagged as Red in 2017 and 2015.

The Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies received Green assessments annually in the Course Performance Reports for 2015-17 for Success Rate, and for two of three years for UAC preferences 1-3 to total preferences. No indicator was flagged with a Red warning in every year, however SFS for student satisfaction was flagged Red in 2015 and 2016 (and was Green in 2017). Student Load and Attrition moved from Red to Green over 2015 to 2017.

All TCM subjects have been learning.futures certified, and all Science-owned subjects in the TCM courses have been peer-reviewed.

#### **Accreditation: External**

The TCM courses are accredited externally by the Australian Health Practitioner Regulation Agency (AHPRA) within the National Registration and Accreditation Scheme (NRAS) for health practitioners. Graduates are eligible for professional registration as a health practitioner with the Chinese Medicine Board of Australia (CMBA) within AHPRA (<http://www.handbook.uts.edu.au/courses/c10164.html>). Graduates are registered to practice at a Chinese herbal medicine, dispensing and acupuncture practice, and eligible for membership with the relevant professional associations (<https://www.uts.edu.au/future-students/find-a-course/bachelor-health-science-traditional-chinese-medicine>).

The external accreditation requires that students achieve a number of outcomes, and the majority of these are specific to the discipline and practice of CM. The structure of the TCM course reflects, in large part, these requirements. The two TCM courses were accredited by AHPRA in December 2017 with one condition and 4 monitoring conditions. The responses to these conditions were reported in November 2018 and in its response (March 2019) the accreditation committee decided to remove the one condition and four monitoring conditions. The Accreditation Committee does not accredit courses for a defined period of time, instead undertaking monitoring (via requested reports) of the education provider (i.e. UTS) and the course<sup>4</sup>.

---

<sup>4</sup> Australian Health Practitioner Regulation Agency / Chinese Medicine Board of Australia (2017) Chinese Medicine accreditation process (Australian Health Practitioner Regulation Agency, Melbourne).

## Benchmarking: QILT

In the Quality Indicators of Learning and Teaching (QILT) TCM is classified in the Health Services and Support study area. The other UTS courses included within this study area are: Bachelor of Health Science; Bachelor of Human Movement; and Bachelor of Sport and Exercise Science. In the Student Experience Survey 2016 and 2017 (Table 6), UTS courses in Health Services and Support were close to the national average in all areas of Student Experience, exceeded the national average in two areas of Graduate Satisfaction (Overall Satisfaction, Teaching Scale), and below the national average in full-time employment. The combination of TCM and other UTS courses covered by this study area means that it is not possible to directly report the QILT results for the TCM courses.

Table 6. Summary of the Student Experience Survey 2016 and 2017 outcomes for the Health Services and Support area (undergraduate) at UTS and compared to the national average (Source: www.qilt.edu.au).

		UTS	National av
Student Experience	Overall quality of educational experience	77.9%	80.6%
	Teaching quality	81.8%	82.8%
	Learner engagement	64.7%	64.5%
	Learning resources	84.5%	84.1%
	Student support	70.0%	73.0%
	Skills development	83.2%	81.5%
Graduate Satisfaction	Overall satisfaction	85.5%	80.3%
	Teaching scale	71.0%	65.7%
	Skills scale	80.6%	82.8%
Graduate Employment	Full-time employment	64.1%	72.1%
	Overall employment	88.0%	89.8%
	Full-time study	49.3%	23.4%

## Research Training

Of the 12 continuing or fixed-term academic staff in CM, four are supervising HDR students as principal supervisor, six are not acting as a principal supervisor of a HDR student, and <sup>s.2.1.2.</sup> current HDR students.

At the end of 2018 there were 27 (headcount) HDR students enrolled in CM-related MSc (research) or PhD projects. These HDR students consisted of <sup>s.2.1.2. and s.2.1.5.</sup>

There have been no HDR commencement in 2019 so far.

The annual number of CM HDR students completing has been: 4 in 2015, 1 in 2016, 1 in 2017, and 3 in 2018. The CM Discipline Group advised that <sup>s.2.1.2.</sup>

## Research<sup>5</sup>

CM undertakes research, mainly human clinical research but also some profession focused research. This is undertaken by four fulltime academic staff and the 28 HDR students. Currently there are nine randomised clinical trials (RCTs) being developed, conducted or reported in peer reviewed journals. These are acupuncture and tennis elbow pain, Chinese herbal medicine and insomnia, acupuncture and cancer pain, acupuncture and mental stress in university students, acupuncture and hot flushes in breast cancer patients, cluster analysis of prodromal stage in Parkinson's Disease (using big data), vitamin D in reducing DM risks and acupuncture and osteoarthritic knee pain and male potency following radical prostatectomy and qigong and well-being. In the past, CM has undertaken RCTs for taiji and stress, acupuncture and hepatitis C, acupuncture and post-traumatic stress disorder and acupuncture and male subfertility. Two of the RCTs are in partnership with specialised oncology units at the Royal North Shore Hospital, and another at the Chris O'Brien Lifehouse (Royal Prince Alfred Hospital).

CM staff and HDR students are also undertaking experimental human studies including transcranial magnetic stimulation, pain challengers e.g. pressure pain threshold and thermal thermography. CM staff and students undertake survey research projects such as referral between medical, allied health and CM practitioners, adverse event profile of Chinese herbal medicine, clinical outcomes implementation for acupuncture and Chinese medicine and the use of the Chinese herb qingdai for eczema. Other projects are evaluating the safety of moxa smoke, clinical reasoning, professional communication, acupuncture needling sensations, radial and carotid artery tonometry, Parkinson's disease symptomology, a delphi study on osteoarthritic knee pain, transcriptome analysis of Chinese herbs on human squamous cancer cell line and a critical classical medical literature review.

Finally there are several educational projects on student empathy and enablement, collaborative learning experiences, technologies and civic virtues, linguistic analysis of Chinese medicine clinical interaction and student visualization in education. In total there are 33 research projects currently being undertaken by CM academic staff and HDR students.

CM researchers (in total) attracted external research grant income of \$10,000-\$64,000 p.a. between 2014 and 2018, representing <1% of the total external research income awarded to the Faculty of Science (Table 7). None of this external grant income was classified as Category 1 grant income. This annual grant income was awarded to one CM academic in 2014 and 2015, three CM academics in 2016, six CM academics in 2017, and two CM academics in 2018. Over this same time period CM academic staff represented 2.3-4.9% of total academic staff in the Faculty of Science. During this time, one academic <sup>s.2.1.3.</sup> .

---

<sup>5</sup> The first three paragraphs describing the research being done in TCM were provided by C Zaslowski.

Table 7. Total external research grant income awarded to researchers in CM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-18. For comparison, the income for CM is shown as % total FoS external research grant income (CM % total), and the number of CM staff is shown as % of total number of FoS academic staff.

	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	\$10,000	\$11,123,023	\$11,133,023	0.09%	3.0%
<b>2015</b>	\$10,000	\$13,347,000	\$13,357,000	0.07%	2.9%
<b>2016</b>	\$65,000	\$16,244,000	\$16,309,000	0.4%	2.3%
<b>2017</b>	\$39,495	\$16,666,505	\$16,706,000	0.24%	4.9%
<b>2018</b>	\$64,064	\$19,492,936	\$19,557,000	0.33%	4.5%

The total annual weighted publication points of CM researchers varied between 0.70 and 5.27 (Table 8), representing 0.3-2.1% of the total for the Faculty of Science. The total number of publications varied between 4 and 34, representing 0.8-5.7% of the Faculty's total publications.

Table 8. Total publications and weighted publication points for researchers in Chinese Medicine (CM) and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-17 (2018 publication data not yet finalized). The volumes for Chinese Medicine are shown as a % of the totals for the whole of the Faculty of Science, and the % Faculty academic staff that are in Chinese Medicine are also shown.

Weighted pub points	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	3.29	227.66	230.95	1.4%	3.0%
<b>2015</b>	0.70	238.35	239.05	0.3%	2.9%
<b>2016</b>	3.04	273.41	276.45	1.1%	2.3%
<b>2017</b>	5.27	249.86	255.13	2.1%	4.9%

Total publications	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	9	490	499	1.8%	3.0%
<b>2015</b>	4	528	532	0.8%	2.9%
<b>2016</b>	19	616	635	3.0%	2.3%
<b>2017</b>	34	566	600	5.7%	4.9%

Elsewhere at UTS, the Faculty of Health hosts the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM) (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine>). The Centre's web page notes that complementary and alternative medicine includes acupuncture, herbal medicines, and massage (all of which form part of the TCM curriculum) as well as other therapies. Both ARCCIM and CM undertake research that tests the efficacy of traditional Chinese medicine approaches, such as acupuncture. ARCCIM supervises PhD students but does not teach undergraduate or postgraduate courses. The ARCCIM web pages (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine/research/research-0-26>) list only one project that involves a collaboration with a CM staff member ('Chinese medicine practitioner knowledge,

experience and attitudes towards professional registration in New South Wales', collaborators include TCM academic Carolyn Michael). Overall, there has been limited collaboration between CM and ARCCIM represented by: co-supervision (by ARCCIM staff) of some CM PhD students, and five co-authored publications since 2014.

UTS research in Complementary and Alternative Medicine (represented by the research outputs of ARCCIM and the Faculty of Science CM) was assessed in ERA 2018-19 as 4 (above world average). The outputs of the Faculty of Science CM represented 16% of the submission to ERA.

## External Engagement

### TCM Clinic

The TCM Clinic is open to the public (at a reduced cost) for acupuncture, Chinese herbal medicine, and remedial massage (Figure 3). The TCM Clinic also operates as an intern clinic for final-year students, who are supervised by qualified CM staff. Final-year intern students complete 750 hours of contact clinical hours and administer 300 individual treatments

(<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/about-us/year-4-intern-clinic>). In 2017 there were 6019 patient visits to the TCM Clinic, and in 2018 there were 5999 visits (representing 4920 acupuncture, 777 herbal therapies, and 294 massage visits). Gross income from the TCM Clinic in 2018 was \$224,239 (Table 5).



Figure 3. Entrance to the Traditional Chinese Medicine Clinic on level 2 of Building 4 (corner of Harris and Thomas Streets).

### Concord Hospital

During 2018 final-year TCM students provided 300 acupuncture treatments at Concord Hospital to cancer survivors as a community service (i.e. no fee was charged). This program, voluntary for students, ran in 2016-2018. It occurred within the oncology/haematology outpatients clinic at Concord Hospital and treated cancer survivor patients for pain either associated with their cancer treatment or independent of their cancer status (e.g. lower back pain). The program occurred for 20-30 weeks, the students were supervised, and patients were recruited through the Cancer Survivor Centre at Concord Hospital.

### International partnerships

UTS has active MoUs with the following organisations for CM:

- Dong-Eui University (Republic of Korea), for outbound teaching
- Shaolin Temple (China), for research
- Healthpac Centre for Excellence in Integrative Medicine Pty Ltd (Australia) for research
- Chengdu University of Traditional Chinese Medicine (China), for outbound teaching and research
- Korea Institute of Oriental Medicine (KIOM) (Republic of Korea), for research

### Stakeholder organisations

Staff in CM interact with a number of external stakeholder organisations including:

- World Health Organisation (WHO) (policy and publication development)
- Standards Australia via ISO Technical Committee (ISO/TC 249 Traditional Chinese Medicine) (standards development)
- Concord Hospital Cancer Survivor Centre (community activity)
- Australian Acupuncture and Chinese Medicine Association
- Chinese Medicine and Acupuncture Society of Australia
- Chinese Medicine Board of Australia (committee membership)
- Chinese Medicine Council of New South Wales (Council membership)
- Australian Natural Therapists Association
- World Federation of Acupuncture and Moxibustion Societies (Directorship)
- World Federation of Chinese Medicine Societies
- TESQA course accreditation committees (committee membership)
- New Zealand Qualifications Authority
- Australian Vice Chancellor Committee (committee membership)
- Can Revive Cancer support organisation (Sydney) (community activity)
- Australian Health Practitioner Registration Agency
- Beijing University of Chinese Medicine (China)
- Tsukuba University of Technology (Japan)
- Chinese Academy of Chinese Medical Sciences (China)
- Shanghai University of Chinese Medicine (China)

- Hong Kong Baptist University
- Henan University of Chinese Medicine (China)
- Australian Chinese Medical Association (community activity)

### Other

The CM team also convened an international research conference at UTS in 2012 titled “Scientific Acupuncture and Meridian Symposium” that attracted international significance and over 100 attendees. CM academics have often shared their expertise for community philanthropic events. For example Dr Shuai Zheng has provided health talks for cancer survivors. UTS and the Sydney Institute of Traditional Chinese Medicine are the only locations able to run AHPRA clinical viva assessments. UTS CM are engaged to assess clinical competency and present reports and recommendations for international and domestic practitioners wishing to apply for national registration.

### **TCM at other Universities**

Courses in TCM are offered at 2 other universities:

- Western Sydney University, School of Science and Health: Bachelor of Traditional Chinese Medicine (4 years), which is accredited by the Chinese Medicine Board of Australia; and Master of Chinese Medicine (1.5 years full time, 3 years part-time) with the choice of a Clinical Stream or Research Stream (this is not an accredited degree)
- RMIT (Victoria), School of Health and Biomedical Sciences: Bachelor of Health Science/Bachelor of Applied Science (Chinese Medicine) (5 years) which is accredited by the Chinese Medicine Board of Australia; Master of Applied Science (Acupuncture) (3 years part-time); and Master of Applied Science (Chinese Herbal Medicine) (3 years part-time).

WSU offers a TCM Clinic as part of UniClinic. At RMIT students in the final two years of their course work treat patients in the Chinese Medicine Clinic that is part of the Health Science Clinic at University Hill in Bundoora, Victoria. Research in TCM at RMIT, and additional education related to TCM, occur through the WHO Collaborating Centre for Traditional Medicine, and the Chinese Medicine Confucius Institute.

Courses in TCM are also offered by two private providers in Sydney:

- Sydney Institute of Traditional Chinese Medicine: Bachelor of Traditional Chinese Medicine (4 years) (approved by the Chinese Medicine Board of Australia); Diploma of Traditional Chinese Medicine Remedial Massage (1 year).
- Endeavour College of Natural Health: Bachelor of Health Science – Acupuncture (4 years) (not approved by Chinese Medicine Board of Australia).



Appendix 1 (on following page): Summary of financial analysis of courses in the Faculty of Science for the 2018 Course Viability Analysis.

s.2.1.2. and s.2.1.5.





# Appendix Traditional Chinese Medicine Discipline Options Paper

Faculty of Science  
June 2019

## **Chinese Medicine Options Paper**

### **Addendum to the Chinese Medicine Status Report**

#### **Executive Summary**

The status report prepared by the Faculty provides a factual account of the Chinese Medicine (CM) course. It has been used in its draft form to inform some decision making processes to date. In early consultations with CM staff, it was understood that the report would look at options. However, the final draft of the report did not discuss any options as such. Consequently this follow-up paper has been prepared by CM staff as an addendum for consideration with the status report.

This options papers has been designed to frame the discussions to date and to contextualise the information in the status report.

In regards to course financial viability, the question is posed as to what level of financial profitability or loss is acceptable. This has not been defined to date. Options to improve course viability have been provided including options for course restructure and staff re-profiling.

Consideration should be given to the opportunities for the development of postgraduate courses that could provide additional income when articulated with the accredited undergraduate program. This includes expansion into the continuing professional education markets and articulations with VET sector programs.

In regards to strategic fit, research productivity should be assessed against the CM discipline profile rather than another discipline profile as is currently done.

Most importantly, the CM course provides an opportunity for UTS and Science to directly interact with the local community through the provision of low-cost clinical services. As a matter of social justice, the wider community should have choice in regards to their health care and the type of health services available. As the largest provider of training of government registered CM health practitioners UTS plays an important role in supporting the provision of that choice.

It is hoped that any decision regarding the course future would allocate an appropriate balance of weighting to the issues of financial viability vs community engagement, teaching quality and research with an understanding that not every course will provide the same level of contribution to the Faculty in each of these areas, and if appropriate, opportunities provided to enact some of the proposed solutions.

## Options for Chinese Medicine (CM) in the UTS Faculty of Science

The previous status report, which has been circulated as a draft was created with an intention to “inform thinking and decisions about options for the future of CM and UTS”. Whilst this document has not been finalised to date, discussions on options have proceeded.

Options considered were

- Discontinuation: no decision taken at this point
- Transfer
  - To Faculty of Health: has been rejected by the Faculty of Health
  - To another institution: the course structure and accreditation with the Australian Health Practitioner Regulation Agency (AHPRA) means that transfer to the Western Sydney University course (the only other CM course in NSW taught within the University sector) is not practical due to incompatibility of the course structures and the fact that AHPRA accredits each course individually so that its graduates are eligible for registration. This makes transfer for students in later years of the program particularly problematic.
- Build up the program: the Faculty is considering this option but is generally unsupportive due to the three following issues identified at a recent consultation meeting with staff:
  - Financial viability
  - Research productivity
  - Alignment with FOS Strategy or strategic fit

This paper address the three issues noted above and provides additional comments in regards to other areas including engagement and teaching quality. As the majority of detail in regards to some of these issues has been covered in the status report, only the salient points will be discussed in this options paper.

### Financial Viability

s.2.1.5. [REDACTED]

***Under the existing science costing model, what is an acceptable level of loss for the CM course?***

If such a question has been considered and an acceptable level of loss determined, or alternately an income or savings target set, this has not been communicated to the CM unit for purposes of attempting to meet such a target.

s.2.1.5.

s.2.1.5.

s.2.1.5.

## Solutions that may address financial viability

### Course restructure

The course structure could be revised to increase the overall EFSTL coming to the Faculty via the following methods:

- Subject 92227, currently delivered by the Faculty of Health can be taught in-house, directing EFTSL back into the Faculty;
- The two CM research subjects 91614 and 91615 could be discontinued and replaced with 60207 which is a research subject taught in the Advanced science course and funded at a higher CSP cluster and another medically relevant cluster 7 funded subject added;
- 99584 is a clinical features subject incorrectly banded at CSP cluster 8 (agriculture \$32,949). It should be banded as CSP cluster 8 (medical \$34,585);
- Further efficiencies to teaching delivery and assessment could be implemented to save on staffing workloads that could allow for the redeployment of these resources to other income generating activities such as post-graduate courses or articulated VET programs;
- A double degree option with the Bachelor of Creative Intelligence and Innovation could be created which may be attract a small number of additional students.

### Staff re-profiling

This is a complex issue that requires the Faculty to clearly articulate its priorities for the course which would subsequently affect the choice of options in this area to result in better utilisation of staff capabilities and skills.

At the moment, a simple cost saving would be to allocate staff on higher duties <sup>IR-1.2.</sup> to other subject/course areas as is done in other Faculties. This activity is more reflective of the issues around the course viability business model rather than necessarily creating a real saving. However, since that model is being used to judge course viability, following the practices used by other faculties would “improve” the CM financial bottom line in the model.

In more real terms, there are some staff retirements in the planning and how these staff are replaced could have a significant impact on the course outcomes and viability. Any number of the following options or a combination of them could affect the financial liability:

1. If research outputs were a priority, the Faculty could appoint research active staff and maintain the current balance of casual teaching staff to address any research gap that it might prioritise;
2. If the course was more heavily weighted or valued for its teaching and community contribution, instead of employing 40:40:20 staff with a research focus, a stronger focus could be placed on hiring of scholarly teaching fellows who under the EBA have greater teaching workloads, resulting in existing research outputs being similar to current levels. Furthermore, there is a requirement under the EBA to hire a certain number of Scholarly teaching fellows;
3. Increasing the number of fixed term sessional staff could be another option as these are normally 100% teaching roles for only fixed periods of the year and suit industry based practitioners, can be fixed for 3 or 5 years providing stability to staff and could be a cost effective way of maintaining the course teaching loads, whilst existing 40:40:20 staff focus on research and course quality management.
4. Alternately, retiring staff would not be replaced and the remaining staff would manage a casual workforce for the delivery of teaching. This would not necessarily be a preferred model, but it would allow for the continuation of the course and its contribution to the community whilst improving financial viability. It would require a greater level of online learning to be developed whereby subject coordination moves away from traditional activities and becomes more of a stewardship model, with greater opportunities for distance learning, CPE learning and micro-credentialing.

#### **Articulated VET programs**

Several years ago, the unit was exploring the possibility, through ACCESS UTS, of integrating a VET qualification in Tui Na (Chinese massage). This model articulated a Certificate IV and Diploma qualification accredited through VET with the UTS degree. This would have the advantage of providing an additional stream of students into the course from the VET sector, whilst allowing current UTS graduates to credential in a related discipline and improve their capacity for income generation as practitioners. However, changes to the Faculty management resulted in the withdrawal of support for these programs and they were consequently not reaccredited. Furthermore, this proposal was not renewed due to the complexities of working with ACCESS UTS at that time. Since the development of this original proposal, issues in regards to the extent of integration with the VET sector has changed considerably. Relationships between universities and VET sector in the state of Victoria could be used to pilot this model in NSW, as originally envisaged. This option would require further exploration should the decision be to continue the CM program.

#### **Articulated Post Graduate programs**

There are significant opportunities in the post graduate coursework space which have not been properly investigated due to the overall sense that the future of CM as whole remains uncertain at UTS.

Under AHPRA requirements, CM health care practitioners are required to undertake a minimum of 20 points of Continuing Professional Education (CPE) per annum. In addition, there is an *Extended Education Pathway* for practitioners that do not meet English language testing requirements which essentially stipulates 6 years of continuous full-time study. Currently these practitioners and potential students are meeting these requirements though undertaking short course or programs of study with mainly private CM education providers.

As of March 2019, there were 1,988 CM practitioners registered in NSW and 4,857 registered nation-wide. This essentially represents a captive market. Under the new University proposal for short forms of learning and micro-credentialing, it would be possible to create a stackable Masters of a nominal 2 years duration, with nested degrees (grad cert; grad diploma, Masters, Extended Masters), which could be predominantly delivered online through a series of 2 or 3 cp subjects which could function either as solely CPE or as for-credit micro credentials. This would require an initial investment in subject development but after that, would be predominately a stewardship role given the predominance of online delivery with cleverly scaffolded assessment. It is also conceivable that a number of these units of study may be of CPE value to other professions. It should also be noted that any Masters at this level would not necessarily need to be branded as CM but could fit into a generic Masters model for the Faculty.

The advantage of postgraduate coursework in the CM space is that it does not require AHPRA accreditation and does not lead to practitioner registration for graduates. The undergraduate program which is already AHPRA accredited, accommodates this need. Hence the proposed Masters would be a natural articulation to the CM undergraduate program and the pipeline of students would help maintain numbers in addition to any external enrolments based on CPE or *Extended Education Pathway* needs.

A proposal for an Extended Masters course was under development in 2016/2017. At the time a survey of practitioners, graduates and existing students was undertaken to determine the interest in what was proposed as a set of nested courses of one semester length each, run in an intensive block mode. Of the 123 responses received, 117 indicated an interest in undertaking further specialised studies for CPE (no=6) and 106 were interested in obtaining CPE and a graduate qualification (no=16, n=122). It is highly likely that the demand for postgraduate qualifications remains high and the new short forms of learning provides greater flexibility in meeting these needs than previous course structures and University processes allowed.

It should also be noted that a number of these potential subjects would be of interest to other registered health care practitioners. There are currently 190 000 registered health care practitioners in NSW, all with annual CPE requirements. Integrative medicine is an area of rising interest in health care. The breadth and depth of experience within the CM discipline with integrative health care practice, and with their links to industry and regulators, make the discipline well suited to develop programs for this market and provide a new post graduate income stream.

## Research Productivity

The Faculty has taken a position that the research outputs of the unit/staff should be comparable to that of other units/staff within the Faculty. Whilst this could be considered a reasonable position, the following should be taken into account:

- The majority of the Faculty's research outputs are generated by approximately 20% of its staff. Not all staff or research units perform at the same level, nor are they expected to.
- The Faculty has clearly indicated that it can only support a certain amount of research and that allocation of support to institutes and centres has to be discriminatory. This consequently affects outputs. It could be argued that expectations should be measured relative to support rather than comparisons to average outputs.
- Whilst in the past, the CM unit has proposed the development of centres for CM research, the Faculty has not identified CM as an area of research investment. The CM unit has acknowledged that it is not a strategic priority for the Faculty and likely never will be. It is therefore reasonable to expect staff to have research outputs commensurate with their discipline profile, which has not been the case to date (a biomedical discipline profile has been used, which is substantially different in expectations).
- The CM unit should be assessed against its own discipline profile (as developed in 2014 with other Faculty discipline profiles – see appendix) in the same way other disciplines have been.

Taking these points into consideration, the question around research productivity consequently becomes:

***Is the level of research output generated by the CM unit/staff adequate to maintain the integrity of the discipline and allow for the advancement of scientific investigation into the practice of CM and integrative medicine?***

A full report of 2014 to 2018 research output data is noted in the status report. At the end of 2018 there were 27 HDR students enrolled in research programs, grant income was approximately \$64,000 and in 2017 there were 34 publications which contributed to an assessed ERA 2018-19 rank of 4 (above world average) for UTS research in Complementary and Alternative Medicine (representing joint efforts of the Faculty of Health and Faculty of Science). Since then, research outputs and HDR student enrolments have increased. These data should be measured against the discipline profile for CM which for teaching intensive staff at level c is 2 papers per year, \$22,000 in income and 3 HDR students. The CM discipline profile is attached as an appendix. It is a matter of judgement for the Faculty as to what is deemed adequate in regard to outputs but as noted in the status report, the majority of staff carry heavier teaching loads and it would seem that against the discipline profile, staff would be generally performing within expectations

One of the criticisms often made of CM is the lack of scientific research. This is a generally inaccurate view as research into acupuncture and acupuncture as a neuro-modulation intervention, is now commonly undertaken, even by major international institutions such as Harvard Medical School, Stanford University and the Karolinska Institute, with considerable research funding from the US NIH and US military. Pain in particular is an area with substantial evidence supporting acupuncture (as a neuro-modulation intervention). One of the primary objectives of bringing the course into the University was to improve the level of research and ensure an evidence-based approach to teaching and learning. This has been achieved over the time of the course at UTS as reflected for example, in the randomised clinical trials that are in development with specialist cancer



hospitals. Discontinuation of the course will obviously stop the development of research in what is becoming internationally recognised as a legitimate field of integrative medicine study.

As the Faculty has determined that CM is not a research priority and will not be receiving major forms of investment in the way other Faculty research centres attract funding, it would be unreasonable to hold the CM unit/staff to these standards. It is not clear that a CM staff member is any less productive than a normal 40:40:20 staff member that is not linked to a research centre. When compared to the CM discipline profile, staff would appear on average to meet those standards, whilst comparison to Faculty averages may result in a washout of data. More importantly, the Faculty has the choice on how it prioritises research funding and outputs in any given discipline and it is not unreasonable to assume that greater weighting may be placed on other factors such as teaching and engagement in a course such as CM where there is an exceptionally strong professional and vocational focus. Having stated this, the CM unit continues to value and undertake research as shown by the number of staff and students actively engaged in clinical research, contributing to the UTS ethics review activities, as well as actively integrating its research into its teaching.

#### Alignment with Faculty Strategy or Strategic Fit

The course can be mapped against the current Faculty strategic plan as noted below:

Faculty Strategy plan theme	CM Course
Development of technologies	Links to standard development through ISO especially devices and a relationship between medical device companies in Shanghai China (Daosheng P/L) and Korea are at an initial stage of development.
Creative hubs (advice to governments and industry)	Close links to AHPRA, CMBA, HCCC (The Chinese Medicine Council in NSW) and professional organisations eg Standards Australia and the Chinese Medicine Industry Council (CMIC). Internationally: WHO, ISO and WFAS
Strengthening the course portfolio (with needs of industry)	UTS CM graduates hold key positions of influence within professional and relevant government bodies. integrative medical practices including specialist hospitals (Kinghorn. LifeHouse)
Shaping the future workplace	UTS alumni form the backbone of the profession, including industry associations and regulators.
Placing science on an international stage	The course has many international links and global placements in Asia for students
Co-creation with industry and government (to enhance employability)	The course is professionally and vocationally focused,

## CM Course Mapping against 2027 strategy:

Lifetime learning	Developing lifetime learning skills and provision of continuing professional education is paramount to CM
Personal learning experience	CM promotes development of adaptive learners and strongly supports self-directed student learning and skills specialisation
Digital partners	Digital learning and learning technologies are blended into student theoretical and clinical learning experiences.
New Ways of working	Will require further exploration if the course is maintained
Precinct, community, partnerships	The course and clinical services are heavily invested in the local community
Connected research	The clinical research undertaken is of direct relevance to the course and the profession and is well integrated into the learning experiences
International profile	The program has a strong international profile and links to research and clinical institutions
Social change	It can be argued that the integration of CM within the community, health services, integrative medicine etc is at the very heart of social justice and impact on the community and is one of the main reasons for maintaining the course

Arguments can be made in regards to how the course “fits” within the UTS or Faculty strategies. The University is involved in complementary and alternative medicine in areas outside of the Faculty of Science. Whilst it is not considered a major focus, the CM course is not isolated within the wider activities of the University, having been part of UTS for the past 25 years. It appears the “strategic fit” is a euphemism for an unspecified set of criteria and consequently it is difficult to address these issues head on. However other factors that should be considered as part of the decision making process are:

### Course quality

As noted in the status report, there is conflicting data in relation to course quality. This is primarily due to the emphasis placed on particular metrics in the two major quality indicators. The CQI shows the course to have poor quality, the CPR indicates a green or good rating and on several occasions the course has been on the commended list for consecutive excellent ratings. Consequently there would be greater value in looking at the specific metrics within each quality index that are individually rated as underperforming and determine how to best address these moving forward.

According to the CQI Graduate satisfaction with teaching was scored a (0.535). The CPR shows SFS agreement with overall satisfaction at 82% (green). The CQI shows graduate satisfaction with the course as (0.807), the CPR shows an overall rating of 2.24 (green). Details are provided in the status report. There is no doubt going to be room for improvement in metrics in any course and CM staff are committed to learning.futures, LX transformation and continual quality improvement.

## Engagement

One of the major strengths of the CM program which does not appear to have been factored into decision making is the quality of community engagement.

- The program is strongly linked to the local Chinese community and features in Chinese language based media;
- The clinical services not only provide a separate income stream in addition to EFTSL, but provides valued health services and links into local communities and hospitals (detailed in the status report);
- The clinic has strong engagement with other local communities, e.g. in Glebe, which have a high proportion of low socio-economic residents that benefit from the clinical health services provided that they would otherwise not be able to access;
- All members (excluding external legal and community members) of the Chinese Medicine Council of NSW (a government sponsored body that works with the Health Care Complaints Commission and AHPRA) have UTS qualifications, indicating the high esteem in which UTS qualified alumni are considered;
- There are considerable links to national and international professional bodies, educational institutions and health institutions;
- The UTS course is the premier course in the country with a history dating back to 1969 – UAC preferences regularly outstrip UWS and private providers by a factor of 3 or 4;
- As the major provider of CM education in NSW, closure of the course will have a significant impact on the profession in NSW and potentially nationally given there are only two other university providers (SWU and RMIT);
- The popularity of the course and support for the clinical services within the community can be evidenced in the student led petition which has been able to amass over 4000 signatures within 6 days. This petition has been forwarded separately and I doubt that any other Science course would be able to elicit this level of community support in such a short period of time.

Consequently the question in regards to “strategic fit” should essentially resolve around:

***What is the appropriate balance between teaching, research, engagement and service to the community within any one course and how does the CM course fit into an overall Faculty balance of delivering on these elements?***

On the understanding that different units within the Faculty will contribute in different proportions to teaching, research and engagement.

## Summary

With the wider context of a decision to continue or discontinue the course, weighting should be given to:

- Using the CM discipline profile as an appropriate yardstick for research outputs;
- Appropriate weighting to factors such as community engagement and provision of community services, social justice elements such as the provision of alternative forms of health care and training of practitioners that support diversity of health care as well and integrative health services, and the impact that the closure of the course may have on the

profession given the high standing of the course within the local and professional community and UTS being the primary training provider for the majority of CM trained practitioners.

Should the course be kept the following actions/decisions will need to be taken in regards to addressing course viability:

- Course re-structure to direct more EFTSL back to the Faculty;
- Improve teaching efficiencies to carve out time for development of postgraduate coursework as an additional source of income;
- Re-profile staff in the context of a decision as to appropriate levels of research engagement, including the consideration of alternative models of staffing; and
- Addressing the specific metrics within the CQI and CPR that may be affecting course quality

## Appendix

***Traditional Chinese Medicine*****Workload  
DISCIPLINE PROFILE****Research and Scholarship**

All academic staff are expected to be active researchers. The indicators of research are the metrics currently used in Australia to compute university research quantum; the publication of results in high-impact, refereed scientific journals, the ability of staff to attract competitive research funding, and supervision and completion of postgraduate students. Increasingly external rating agencies such as the ERA are using a combination of qualitative and quantitative data to assess research performance. In order to attract grants, and to a lesser extent good HDR students, publication track record needs to be of high quality and volume. It is the specific intention of the *Discipline Profile* to set expectations for individual staff that provide guidance for career development and research success in their discipline, as well as helping the Faculty and University to meet their strategic goals in research.

The primary metric of research publication for the Faculty of Science is the refereed journal article (category C1 in the HERDC classification), and equivalents (refereed book chapters/monographs and the like - category B1). Other research outputs such as conference participation, abstracts, un-refereed contributions, invited and plenary addresses and the like are all evidence of research activity and should be part of a balanced research portfolio but cannot replace the primary metrics listed above.

Similarly, an ability to attract external funding ranges in "prestige" depending on the source, with the highly competitive ARC and NHMRC grants being the foremost measure of research quality. In this respect, it is expected that academic staff will seek to fund their research from sources external to the Faculty/University, and the range of Category 1 ([Australian Competitive Grant Register](#)), Category 2 (Other Public Sector Research Income), Category 3 (Industry and Other Research Income), and Category 4 (CRC Income) sources should all be considered in a balanced portfolio. In terms of expectations, all academic staff are expected to participate in grant preparation and submission, on a regular basis.

**Research**

All staff are expected to participate in research (defined by the metrics currently used by the ARC – publication, grant/income, HDR completions). Any other activities (meetings with partners, program participation, conference attendance and the like) are all part of reputation building, developing renown, and recognised as necessary to produce the metrics listed above, but are not in themselves “counted” in lieu of these.

The expectations listed below are derived from the ERA2012 outcomes. The average across Australia in each of the 4 digit FoRs for number of publications and grant income per FTE per year can be extracted from this data, along with various other benchmarks. This data is aggregated across the academic levels although the majority of FTE are in

the level B/C grades. There is no data on the distribution of workload allocation between research, teaching and administration. The data can therefore be used to provide a reasonable expectation for a level C 40:40:20 academic to be at the national average within their respective discipline. While it is possible to attribute at the four digit level, here for brevity the average across the 4 digit FoRs predominant across the School have been used. HDR numbers are based upon Faculty target of average 3 per FTE.

Income data have been indexed at 4 % pa. ERA income data is averaged across 2008 – 2010. Data for level C 40:50:10 are the national averages from ERA, other data are weighted relative to salary at mid-band for each level and relative to research loading.

It is important to note that these figures are expectations to be at the national average, to be nationally competitive one might expect considerably higher levels of performance.

As a general guide, staff should be looking to publish only in the top 50% of international journals (as determined by the ranking of journal impact factors for their relevant 4-digit FOR codes;

<b>Level</b>	<b>Normal (40:40:20)</b>	<b>Research Intensive (20:60:20)</b>	<b>Teaching Intensive (60:20:20)</b>
<b>Level B</b>	1.5 C1 articles per year; \$18,000 total external income per year; 2.5 HDR	2.5 CI articles per year; \$30,000 total external income per year; 3.7 HDR per year, 1 hons per year.	1 C1 articles per year; \$9,000 total external income per year; 1.2 HDR per year;
<b>Level C</b>	2 C1 articles per yr; \$22,000 total external income per year; 3 HDR	3 C1 articles per year; \$33,000 total external income per year; 4.5 HDR	1 C1 articles per year; \$11,000 total external income per year; 1.5 HDR per year;
<b>Level D</b>	2.5 C1 articles per yr; \$25,000 total external income per year; 3.5 HDR	3.5 C1 articles per year; \$40,000 total external income per year; 5.3 HDR per year	1 C1 articles per year; \$13,000 total external income per year; 1.8 HDR per year;
<b>Level E</b>	3 C1 articles per year; \$30,000 total external income per year; 4.2 HDR	4 CI articles per year; \$50,000 total external income per year; 6.4 HDR per year;	1.5 C1 publications per year; \$15,000 total external income per year; 2.1 HDR per year;

**From:** [Greg Welsh](#)  
**To:** [Andrew Parfitt](#); [Kate Higgs](#); [Dianne Jolley](#); [Fiona Thomas](#)  
**Subject:** RE: Media enquiries: Cancel Traditional Chinese Medicine program  
**Date:** Wednesday, June 12, 2019 1:24:02 PM  
**Attachments:** [image001.png](#)

---

Will do, Andrew. I believe the best time to do extensive stakeholder consultation will be when we have a preferred outcome, allowing us to answer specific questions on likely impacts, timeframes etc. Until then, I think we are best to answer reactively and stick to our agreed messaging. We might need to review this approach though, depending upon how long we are in this phase, and the level of the noise

Best wishes

Greg

---

**From:** Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>  
**Sent:** Wednesday, 12 June 2019 1:15 PM  
**To:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>; Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>  
**Subject:** Re: Media enquiries: Cancel Traditional Chinese Medicine program

Thanks Greg. I'm sure you'll let us know when it is necessary and/or appropriate to make a public statement about the status of the process.

Andrew.

**Professor Andrew Parfitt**

Provost and Senior Vice-President

**University of Technology Sydney**

Building 1, Level 4A, 15 Broadway, ULTIMO NSW 2007

T. +61 (02) 9514 1350

E. [Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)

W. [uts.edu.au](http://uts.edu.au)




---

**From:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Date:** Wednesday, 12 June 2019 at 12:49 pm  
**To:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>, Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>, Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>  
**Subject:** FW: Media enquiries: Cancel Traditional Chinese Medicine program

Just a heads up. Not sure about the 'aren't authorised to comment' advice. I think it's probably

inevitable, and that staff will probably just make an anonymous comment anyway

Best wishes

Greg

---

**From:** Marea Martlew <[Marea.Martlew@uts.edu.au](mailto:Marea.Martlew@uts.edu.au)>

**Sent:** Wednesday, 12 June 2019 12:01 PM

**To:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Cc:** Marilla Dann <[Marilla.Dann@uts.edu.au](mailto:Marilla.Dann@uts.edu.au)>

**Subject:** FW: Media enquiries: Cancel Traditional Chinese Medicine program

**Importance:** High

Hi Greg

FYI Dr Sean Walsh (Deputy Discipline Leader) has advised me that TCM staff and students are now being asked about the future of the course by the media especially local Chinese media and the ABC (through the TCM Clinic).


I've advised him that all enquiries should go through to you and that staff aren't authorised to comment.

I've asked him to forward any requests for information.

Regards

Marea

s.2.1.9. (out of scope)





## Status of Traditional Chinese Medicine in the UTS Faculty of Science (PRELIMINARY DRAFT: CONFIDENTIAL)

### Preamble

This report has been developed to inform thinking and decisions about options for the future of Traditional Chinese Medicine at UTS. It is a response to several strategic pressures: the results of the 2018 UTS Course Viability Analysis and internal Faculty financial analysis (provided later in this report); the strategic imperative (via UTS 2027) for UTS and the Faculty of Science to evolve from being research-active to research-intensive and the potential for Traditional Chinese Medicine to contribute to this; the need for continual improvement in the Faculty's overall financial position and efficiency of its operations; and consideration of the disciplinary fit of Traditional Chinese Medicine (with courses that graduate complementary health professionals) with the Faculty of Science.

The material in this draft report has been assembled and written by Prof William Gladstone based on information provided by HRU Faculty Partner Raelene La Ferla, Finance Faculty Partner John Maddalena, Research Manager Lisa Merry, Associate Head of School (T&L) in the School of Life Sciences Assoc Prof Willa Huston, and the Traditional Chinese Medicine Discipline Group. This preliminary draft report does not yet include feedback from the Traditional Chinese Medicine Discipline Group, or Head of School of Life Sciences.

### Background

In 1994 Traditional Chinese Medicine moved from Acupuncture Colleges (Australia) to UTS, and in 1995 moved to the Faculty of Science. The courses initially taught included a 3.5 year undergraduate degree in acupuncture and a 2-year Masters by coursework program in Chinese herbal medicine. In 2000 the acupuncture and Chinese herbal medicine programs were combined to form a 4-year undergraduate course that covered both acupuncture and Chinese herbal medicine. Two undergraduate courses are currently offered: Bachelor of Health Science in Traditional Chinese Medicine, and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years). Staff and students have provided a public-facing Traditional Chinese Medicine Clinic at UTS since 1994 that also acts as a teaching facility for students in all years of the undergraduate courses.

The discipline of Traditional Chinese Medicine was re-named Chinese Medicine in 2015 with the formation of the new School of Life Sciences, and it is currently a Discipline Group in the School of Life Sciences with a Discipline Group leader (Associate Professor Chris Zaslowski). As a Discipline Group Leader, Associate Professor Zaslowski is a member of the School Executive. The courses taught by staff in the Chinese Medicine Discipline Group are called 'Traditional Chinese Medicine' and so for consistency throughout this paper the combination of staff, teaching, research, and the clinic operations will collectively be referred to as Traditional Chinese Medicine (TCM).

Elsewhere at UTS, research and research training in aspects of traditional Chinese medicine occur in the Faculty of Health in the Australian Research Centre for Complementary and Integrative Medicine. The Centre also does projects in a range of other complementary therapies. Within universities in NSW, traditional Chinese medicine exists only at Western Sydney University (WSU) in the School of Science and Health.

## Staff

In 2018 there were 21 staff employed as: 9 continuing academics; 3 fixed-term academics; 7 casual academics; and 2 casual professional staff. These staff represent 12.6 FTE. The 12.6 FTE includes Associate Professor Xianqin Qu (who teaches in the TCM courses but is a member of the Medical Science Discipline Group in the School of Life Sciences) and Associate Professor Peter Meier (Associate Dean (Teaching and Learning), with a substantive appointment in the TCM discipline).

The 12 academic staff employed in fixed-term or continuing academic positions represented academic staff levels A (Associate Lecturer) to D (Associate Professor) and Clinical Educator, who had been employed for periods <sup>R-1.2</sup> [REDACTED] (Figure 1). These staff included <sup>R-1.2</sup> [REDACTED]

IR-1.2 [REDACTED]

In 2018 nineteen of the 24 TCM-specific subjects required casual academics to assist with teaching. Twenty-seven different individuals were employed as casuals for a total of 500 hours and a total cost (including oncosts) of \$<sup>S2.15</sup> [REDACTED].

Average TCM staff workloads in 2018 (for the nine continuing and three fixed-term academics) reported in the Faculty's workload calculators were: 60% teaching, 19% research, and 21% management/engagement. By comparison, the average workloads across all other academics in the Faculty of Science were: 22% teaching, 58% research, and 20% management/engagement. The distribution of workload across the three categories for TCM staff differs from the average workload profile of the rest of the Faculty of Science because of: 42% of TCM academics were employed as teaching only (i.e. the fixed-term academics and the clinical educators); two staff performed leadership roles (Meier, Zaslowski); and there were no research intensive academic staff.

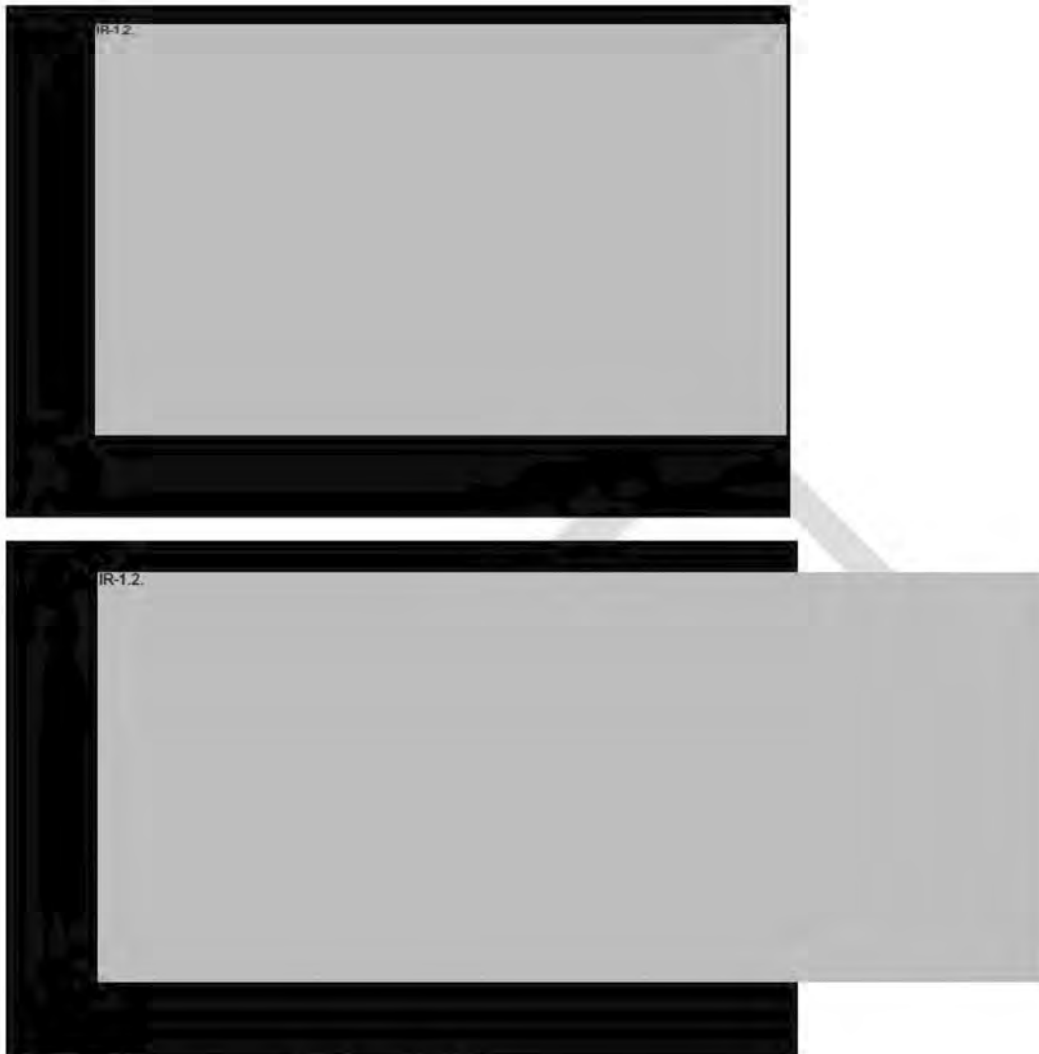


Figure 1. Profile of academic staff (fixed-term and continuing) employed in the TCM discipline at the end of January 2019: (a) academic level (CE Clinical Educator; A Associate Lecturer; B Lecturer; C Senior Lecturer; D Associate Professor); (b) years employed at UTS.

## Courses and Teaching

The following courses are offered:

- Bachelor of Health Science in Traditional Chinese Medicine (4-years)
- Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years)

Throughout the 4-year Bachelor of Health Science in Traditional Chinese Medicine course TCM students complete 30 subjects representing 192 credit points (Table 1). These subjects represent 24 TCM-specific subjects, 5 non-TCM subjects offered by the Faculty of Science, and 1 non-TCM subject offered by the Faculty of Health. The 4-year course is prescribed i.e. there are no elective subjects.

Three TCM subjects were taken by students enrolled in other courses during 2018: Chinese Medicine Foundations 1 (3.5 EFTSL), Clinical Practice 1 (0.5 EFTSL), and Clinical Features of Disease (2.9 EFTSL).

The five non-TCM subjects offered by the Faculty of Science and taken by TCM students include: (i) Human Anatomy and Physiology, a first-year core subject for all students enrolled in a course in the life sciences stream, (ii) Physiological Systems, a core subject in the Bachelor of Medical Science, Bachelor of Biomedical Engineering, and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science, Infection and Immunity majors), (iii) Human Pathophysiology, a core subject in the Bachelor of Medical Science and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science majors); (iv) Neuroscience, a core subject in the Bachelor of Medical Science; and (v) Clinical Features of Disease, a core subject in the Pre-Medicine major in the Bachelor of Advanced Science.

The TCM subjects are delivered via a variety of modes including lectures, practicals, clinic, workshop or tutorial. Currently, no TCM subjects are delivered in the Summer session. The clinic-based training (in the TCM Clinic), commences in Autumn session of first-year in both courses. The number of clinic-based teaching hours increases in each year of the courses, delivered across eight clinical subjects. Students complete a total of 1000 clinical hours throughout their course.

As part of their clinical education TCM students can elect to do a six-week clinical placement in a hospital in China (affiliated with the Chengdu University of Chinese Medicine) or South Korea (affiliated with Dong Eui University). These arrangements are supported by MoUs with both institutions. This opportunity is taken-up by 50-75% of final-year students. The overseas placements are self-funded by each student, although some financial assistance is provided through UTS Build and Colombo Plan (for students meeting the age requirement).

In comparison with other courses in the Faculty of Science, the majority (24/30 subjects i.e. 80%) of subjects in the TCM course are TCM-discipline subjects. This level of specificity is required to meet the external accreditation requirements because the majority of outcomes required for accreditation are specific to TCM practice. The large component of clinical teaching also provides a relevant learning experience that distinguishes the UTS TCM course from other courses. While this level of specificity provides a unique and intensive, discipline-based teaching experience it results in the teaching being resource intensive, and also leads to inefficiencies when the number of enrolled students is low and there are few opportunities to offer subjects that are also of interest and relevant to non-TCM students in, for example, biomedical or medical science courses.

For other courses the School of Life Sciences uses a model of co-taught subjects and sharing of resources to optimise efficiency, whilst maintaining differentiation among courses. As a result, most courses have 20-30% unique subjects. These other courses also have greater enrolments, which further increases the efficiency of teaching.

Table 1. Structure of the Bachelor of Health Science in Traditional Chinese Medicine. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject and <sup>2</sup> Faculty of Science non-TCM subjects.

<b>First Year</b>	<b>Credit points</b>	<b>Subject code</b>
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease <sup>2</sup>	6	99584
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Clinic Level 6	6	99647
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Evaluating TCM: Theory, Practice and Research 2	6	91615
Clinical Practice 2 (TCM)	12	99631

Table 2. Structure of the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies combined degree. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject, <sup>2</sup> Faculty of Science non-TCM subjects, and <sup>3</sup> Faculty of Arts and Social Sciences subjects.

<b>First Year</b>	<b>Credit points</b>	<b>Subject code</b>
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Chinese Language and Culture 1 <sup>3</sup>	8	91701
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Chinese Language and Culture 2 <sup>3</sup>	8	97102
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease <sup>2</sup>	6	99584
Chinese Language and Culture 3 <sup>3</sup>	8	97103
Foundations in International Studies <sup>3</sup>	8	976001
<i>Spring Session</i>		
Chinese Language and Culture 4 <sup>3</sup>	8	97104
Contemporary China <sup>3</sup>	8	976111
Clinic Level 6	6	99647
<b>Fifth Year</b>		
<i>Autumn Session</i>		
In-country Study 1: China <sup>3</sup>	24	977110
<i>Spring Session</i>		
In-country Study 2: China <sup>3</sup>	24	978110
<b>Sixth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Clinical Practice 2 (TCM)	6	99631
Evaluating TCM: Theory, Practice and Research 2	6	91615



Throughout the 6-year Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies students complete 38 subjects (Table 2), including 24 TCM subjects, 5 non-TCM subjects offered by the Faculty of Science, 1 non-TCM subject offered by the Faculty of Health, and 8 subjects offered by the Faculty of Arts and Social Science. The combined degree is structured so that students complete the majority of the TCM subjects in years 1-3, a mix of TCM and international studies subjects in year 4, a year of in-country study in China in year 5, and the remainder of the TCM course in year 6.

### TCM at other Universities

Courses in TCM are offered at 2 other universities:

- Western Sydney University, School of Science and Health: Bachelor of Traditional Chinese Medicine (4 years), which is accredited by the Chinese Medicine Board of Australia; and Master of Chinese Medicine (1.5 years full time, 3 years part-time) with the choice of a Clinical Stream or Research Stream
- RMIT, School of Health and Biomedical Sciences: Bachelor of Health Science/Bachelor of Applied Science (Chinese Medicine) (5 years) which is accredited by the Chinese Medicine Board of Australia; Master of Applied Science (Acupuncture) (3 years part-time); and Master of Applied Science (Chinese Herbal Medicine) (3 years part-time).

WSU offers a TCM Clinic as part of UniClinic. At RMIT students in the final two years of their course work treat patients in the Chinese Medicine Clinic that is part of the Health Science Clinic at University Hill in Bundoora. Research in TCM at RMIT, and additional education related to TCM, occur through the WHO Collaborating Centre for Traditional Medicine, and the Chinese Medicine Confucius Institute.

Courses in TCM are also offered by two private providers in Sydney:

- Sydney Institute of Traditional Chinese Medicine: Bachelor of Traditional Chinese Medicine (4 years) (approved by the Chinese Medicine Board of Australia); Diploma of Bachelor of Traditional Chinese Medicine Remedial Massage (1 year).
- Endeavour College of Natural Health: Bachelor of Health Science – Acupuncture (4 years) (not recognised by Chinese Medicine Board of Australia).

### **Student Load**

At the August 2018 census there were 176 enrolled students in TCM courses, representing 165 students in the Bachelor of Health Science in Traditional Chinese Medicine and 13 students in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies. The total taught EFTSL was 129.1, including 123.4 Commonwealth supported places and 5.7 international fee-paying places<sup>1</sup>.

<sup>1</sup> These numbers differ slightly from the numbers in Table 4 because of rounding of numbers in each row contributing to the total.

The total number of commencing students in the TCM courses has declined annually from the peak of 79 in 2015 (Table 3), and the taught EFTSL represented by all TCM students has declined from 167.3 in 2015 to 128 in 2018 (Table 4).

Table 3. Number of commencing students between 2014 and 2019 in the Bachelor of Health Science in Traditional Chinese Medicine (B Health Sc TCM) and Bachelor of Health Science in Traditional Chinese Medicine / Bachelor of Arts in International Studies (B Health S TCM + B AIS).

	2014	2015	2016	2017	2018	2019
B Health Sc TCM	50	74	64	59	48	54
B Health Sc TCM + B AIS	4	5	10	3	7	2
<b>Total</b>	<b>54</b>	<b>79</b>	<b>74</b>	<b>62</b>	<b>55</b>	<b>56</b>

Table 4. Total taught EFTSL of TCM students in subjects owned by the Faculty of Arts and Social Sciences (FASS), Faculty of Health (Health), Faculty of Science that are not TCM subjects (Science (non-TCM)), and in TCM subjects (TCM), for the Bachelor of Health Science in Traditional Chinese Medicine and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

	2014	2015	2016	2017	2018
FASS	2.2	2.5	0.5	0.7	1.7
Health	5.6	4.0	5.0	7.1	4.1
Science (non-TCM)	19.7	22.4	18.0	15.4	15.1
TCM	127.5	138.4	135.2	121.0	107.1
<b>Total</b>	<b>155.0</b>	<b>167.3</b>	<b>158.7</b>	<b>144.2</b>	<b>128.0</b>

#### Financial Position: Faculty-level Analysis

The Faculty's financial analysis of TCM is shown in Table 5. The financial analysis includes taught load income (Commonwealth Supported Places, and international fee-paying), income from TCM clinic, direct expenses (salary and NSI), and indirect expenses (UTS overheads, and Faculty-allocated overheads).<sup>s2.1.5</sup>

Of the 29 subjects delivered by the Faculty of Science in the TCM course, 21 subjects (72%) are classified as Cluster 3, 7 subjects (24%) are classified as Cluster 7 and one subject (3%) is classified as Cluster 8.

The UTS overhead costs were based on the information used in the 2018 Course Viability Analysis. The Faculty-based overheads were attributed based on staff FTE. The largest cost items were direct costs (salaries and NSI, estimated to be \$<sup>s2.1.5</sup>) and UTS central overhead costs (\$<sup>s2.1.5</sup>). The net financial position was an estimated deficit of \$1.483M at the end of 2018.



### Course Viability Analysis

The first Course Viability Analysis (CVA) was done in 2018 as a part of the Business Model Strategy. The intention was for the CVA to support informed decisions on the closure, subsidisation or retention of undergraduate and postgraduate courses. The CVA approach was to fully match non-research net costs to teaching revenues for all UTS courses using data for 2017, and to incorporate indicators of quality alongside the financial indicators.

s2.1.5



s2.1.5



s2.1.5



The CVA also assessed five indicators of course quality that covered student performance, student experience and graduate feedback. The five indicators were: success rate, retention rate, student satisfaction with quality, graduate satisfaction with course, and graduate satisfaction with teaching. An index was calculated for each indicator, which was the reported result divided by the national average (i.e. a course that performed better than the national average would have an index value >1). Each indicator was weighted as a measure of its relative importance. The weighted indexes for the five indicators were summed to produce a Course Quality Index. A Course Quality Index >1 is a positive result relative to the national average, and an Index of <1 is a negative result. Each course was assessed for its net profitability (described in the previous paragraph) and Course Quality Index by plotting on XY axes (Figure 2).

The performance of the two TCM courses combined in the CVA is shown in Figure 2. The position of the TCM courses at the bottom left of the graph indicates a large negative net profit margin and an overall Course Quality Index below the national average benchmark (shown as 1 on the graph).

Table 5. Financial analysis of TCM based on student load income at the August 2018 census (provided by J Maddalena, Faculty Finance partner).

<u>Income</u>	<u>EFTSL</u>	<u>Income \$</u>	<u>Source</u>
<b>Commonwealth Supported Places</b>	\$2.15		
TCM Subjects taught within TCM Courses		\$2.15	2018 August Census
TCM Subjects taught within Non-TCM Courses		\$2.15	2018 August Census
Non-TCM Subjects taught within TCM Courses		\$2.15	2018 August Census
<b>International Fee Paying (and Other)</b>			
TCM Subjects taught within TCM Courses		\$2.15	2018 August Census
TCM Subjects taught within Non-TCM Courses		\$2.15	2018 August Census
Non-TCM Subjects taught within TCM Courses		\$2.15	2018 August Census
<b>Total Taught EFTSL/Income</b>		\$2.15	
<b>Total Enrolled Student Headcount</b>			2018 August Census
<b>Expenses</b>		<b>Cost \$</b>	<b>Source</b>
TCM Academic Salary Expenses (Operating)		\$2.15	2019 Budget
Acupuncture Casual Academic Costs		\$2.15	2019 Budget
Chinese Medicine Casual Academic Costs		\$2.15	2019 Budget
<b>Total Staff FTE/Costs</b>		\$2.15	
Operating NSI 0226049		\$2.15	2018 Actuals
Operating NSI 0226086		\$2.15	2018 Actuals
Operating NSI 0226392		\$2.15	2018 Actuals
<b>Total Salary &amp; NSI Expenses</b>		\$2.15	
Income (Clinical Services & Fees)		\$2.15	2018 Actuals
<b>Net Direct Expenses</b>		\$2.15	
Indirect Faculty Costs (by FTE)		\$2.15	2019 FTE applied to 2018 Budget Model
Indirect Faculty Costs (by EFTSL)		\$2.15	2018 EFTSL applied to 2018 Budget Model
<b>Total Indirect Faculty Costs</b>		\$2.15	
<b>Indirect Central Overhead Costs</b>		\$2.15	2018 Taught Load applied Provost's CVA Estimate
<b>Total Indirect Costs</b>		\$2.15	
<b>Net Result at UTS Level</b>		<b>(1,483,718)</b>	

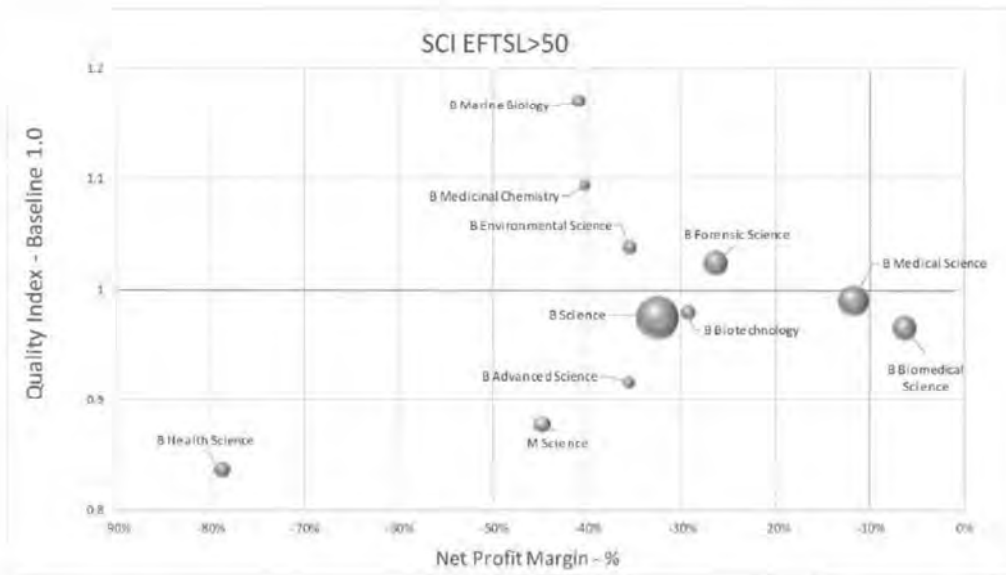


Figure 2. Graphical summary of the results of the Course Viability Analysis for courses in the Faculty of Science with an enrolled student load >50 EFTSL. The calculation and interpretation of the net profit margin and quality index are explained in the text. B Health Science is the combined result for the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

The TCM courses had a Course Quality Index of 0.84. This overall below average result was driven by below average results for the Graduate Satisfaction with Course (0.807) and Graduate Satisfaction with Teaching (0.535), and the higher weightings for these indexes (25%) compared to the other indexes. The other indexes were close to, or at, national average values: Success Rate (1.011, 15% weighting), Retention Rate (1.042, 15% weighting), and Student Satisfaction with Quality (0.969, 20% weighting).

**Accreditation: Internal**

Courses at UTS are approved for periods of five years via the Award Course Approval and Reaccreditation Policy and the Award Course Approval and Reaccreditation Procedures. The depth and extent of the approval process depend on the previous performance of the course, and courses with a record of good performance require a 'short reaccreditation' process. The UTS Courses Accreditation Committee recommended (after a Short Reaccreditation process during 2016) that the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies be re-accredited for 2017-2021. This recommendation was approved by Academic Board in July 2016.

The UTS Curriculum Performance Report reviews all UTS courses and subjects against a set of benchmarks determined by the Provost and Deputy Vice-Chancellor (Education & Students). The indicators (determined for courses and subjects) used in the CPR are designed to link course performance with UTS KPIs. The CPR provides an assessment of the performance of courses and subjects relative to the indicators and highlights areas requiring action to address issues that have been identified.

The Bachelor of Health Science in Traditional Chinese Medicine was included on the Outstanding Courses List for 'consecutive excellent ratings and improving over two or more years' in the 2014 and 2015 Curriculum Performance Reports.

The Bachelor of Health Science in Traditional Chinese Medicine received an overall rating of Green each year in its annual Course Performance Reports for 2015-17. Specific indicators that were also Green each year included: UAC preferences 1-3 to total preferences; student load; success rate; and attrition rate. Average salary of graduates was Green in 2017 and 2015. There have been no consistent issues (indicated by a Red rating) over these three years, with timetabled hours/EFTSL flagged as Red in 2017 and 2015.

The Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies received Green assessments annually in the Course Performance Reports for 2015-17 for Success Rate, and for two of three years for UAC preferences 1-3 to total preferences. No indicator was flagged with a Red warning in every year, however SFS for student satisfaction was flagged Red in 2015 and 2016 (and was Green in 2017). Student Load and Attrition moved from Red to Green over 2015 to 2017.

**Accreditation: External**

The TCM courses are accredited externally by the Chinese Medicine Accreditation Committee of the Australian Health Practitioner Regulation Agency (AHPRA). Graduates are eligible for professional membership as a health practitioner with the Chinese Medicine Board of Australia within AHPRA (<http://www.handbook.uts.edu.au/courses/c10164.html>). Graduates are accredited to practice at a Chinese herbal medicine, dispensing and acupuncture practice, and eligible for membership with the relevant professional associations (<https://www.uts.edu.au/future-students/find-a-course/bachelor-health-science-traditional-chinese-medicine>).

The external accreditation requires that students achieve a number of outcomes, and the majority of these are specific to the discipline and practice of TCM. The structure of the TCM course reflects, in

large part, these requirements. The two TCM courses were accredited by AHPRA in December 2017 with one condition and 4 monitoring conditions. The responses to these conditions were reported to APHRA in November 2018 and in March 2019 APHRA's Chinese Medicine Accreditation Committee responded that it had decided to accredit the two courses 'without conditions'. The Accreditation Committee does not accredit courses for a defined period of time; it undertakes monitoring (via requested reports) of the education provider (i.e. UTS) and the course<sup>2</sup>.

### Benchmarking: QILT

In the Quality Indicators of Learning and Teaching (QILT) TCM is classified in the Health Services and Support study area. The other UTS courses included within this study area are: Bachelor of Health Science; Bachelor of Human Movement; and Bachelor of Sport and Exercise Science. In the Student Experience Survey 2016 and 2017 (Table 6), UTS courses in Health Services and Support were close to the national average in all areas of Student Experience, exceeded the national average in two areas of Graduate Satisfaction (Overall Satisfaction, Teaching Scale), and below the national average in full-time employment. The combination of TCM and other UTS courses covered by this study area means that it is not possible to directly report the QILT results for the TCM courses.

Table 6. Summary of the Student Experience Survey 2016 and 2017 outcomes for the Health Services and Support area (undergraduate) at UTS and compared to the national average (Source: [www.qilt.edu.au](http://www.qilt.edu.au)).

		UTS	National av
Student Experience	Overall quality of educational experience	77.9%	80.6%
	Teaching quality	81.8%	82.8%
	Learner engagement	64.7%	64.5%
	Learning resources	84.5%	84.1%
	Student support	70.0%	73.0%
	Skills development	83.2%	81.5%
Graduate Satisfaction	Overall satisfaction	85.5%	80.3%
	Teaching scale	71.0%	65.7%
	Skills scale	80.6%	82.8%
Graduate Employment	Full-time employment	64.1%	72.1%
	Overall employment	88.0%	89.8%
	Full-time study	49.3%	23.4%

<sup>2</sup> Australian Health Practitioner Regulation Agency / Chinese Medicine Board of Australia (2017) Chinese Medicine accreditation process (Australian Health Practitioner Regulation Agency, Melbourne).

## Research Training

Of the 12 continuing or fixed-term academic staff in TCM, four are supervising HDR students as principal supervisor, six are not acting as a principal supervisor of a HDR student, and <sup>s.2.1.2</sup> [REDACTED] current HDR students.

At the end of 2018 there were 27 (headcount) HDR students enrolled in TCM-related MSc (research) or PhD projects. These HDR students consisted of <sup>s.2.1.2. and s.2.1.5.</sup> [REDACTED]

[REDACTED] There have been no HDR commencement in 2019 so far.

The annual number of TCM HDR students completing has been: 4 in 2015, 1 in 2016, 1 in 2017, and 3 in 2018.

## Research<sup>3</sup>

TCM undertakes research, mainly human clinical research but also some profession focused research. This is undertaken by four fulltime academic staff and the 28 HDR students. Currently there are nine randomised clinical trials (RCTs) being developed, conducted or reported in peer reviewed journals. These are acupuncture and tennis elbow pain, Chinese herbal medicine and insomnia, acupuncture and cancer pain, acupuncture and mental stress in university students, acupuncture and hot flushes in breast cancer patients, vitamin D in reducing DM risks and acupuncture and osteoarthritic knee pain and male potency following radical prostatectomy and qigong and well-being. In the past, TCM has undertaken RCTs for taiji and stress, acupuncture and hepatitis C, acupuncture and post-traumatic stress disorder and acupuncture and male subfertility.

TCM staff and HDR students are also undertaking experimental human studies including transcranial magnetic stimulation, pain challengers e.g. pressure pain threshold and thermal thermography. TCM staff and students undertake survey research projects such as referral between medical, allied health and TCM practitioners, adverse event profile of Chinese herbal medicine, clinical outcomes implementation for acupuncture and Chinese medicine and the use of the Chinese herb qingdai for eczema. Other projects are evaluating the safety of moxa smoke, clinical reasoning, professional communication, acupuncture needling sensations, radial and carotid artery tonometry, Parkinson's disease symptomology, a delphi study on osteoarthritic knee pain, transcriptome analysis of Chinese herbs on human squamous cancer cell line and a critical classical medical literature review.

Finally there are several educational projects on student empathy and enablement, collaborative learning experiences, technologies and civic virtues, linguistic analysis of Chinese medicine clinical interaction and student visualization in education. In total there are 33 research projects currently being undertaken by TCM academic staff and HDR students.

TCM researchers (in total) attracted external research grant income of \$10,000-\$64,000 p.a. between 2014 and 2018, representing <1% of the total external research income awarded to the Faculty of Science (Table 7). None of this external grant income was classified as Category 1 grant income. This annual grant income was awarded to one TCM academic in 2014 and 2015, three TCM academics in 2016, six TCM academics in 2017, and two TCM academics in 2018. Over this same

<sup>3</sup> The first three paragraphs describing the research being done in TCM were provided by C Zaslawski.



time period TCM academic staff represented 2.3-4.9% of total academic staff in the Faculty of Science.

Table 7. Total external research grant income awarded to researchers in TCM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-18.

	<b>TCM</b>	<b>FoS</b>	<b>TCM % FoS</b>	<b>% TCM staff</b>
<b>2014</b>	\$10,000	\$11,123,023	0.09%	3.0
<b>2015</b>	\$10,000	\$13,347,000	0.07%	2.9
<b>2016</b>	\$65,000	\$16,244,000	0.40%	2.3
<b>2017</b>	\$39,495	\$16,666,505	0.24%	4.9
<b>2018</b>	\$64,064	\$19,492,936	0.33%	NA

The total annual weighted publication points of TCM researchers varied between 0.70 and 5.27 (Table 8), representing 0.3-2.1% of the total for the Faculty of Science.

Table 8. Total weighted publication points for researchers in TCM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-17 (2018 publication data not yet finalized).

	<b>TCM</b>	<b>FoS</b>	<b>TCM % FoS</b>	<b>% TCM staff</b>
<b>2014</b>	3.29	227.66	1.4	3.0
<b>2015</b>	0.70	238.35	0.3	2.9
<b>2016</b>	3.04	273.41	1.1	2.3
<b>2017</b>	5.27	249.86	2.1	4.9

Elsewhere at UTS, the Faculty of Health hosts the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM) (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine>). The Centre's web page notes that complementary and alternative medicine includes acupuncture, herbal medicines, and massage (all of which form part of the TCM curriculum) as well as other therapies. Both ARCCIM and TCM undertake research that tests the efficacy of traditional Chinese medicine approaches, such as acupuncture. ARCCIM supervises PhD students but does not teach undergraduate or postgraduate courses. The ARCCIM web pages (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine/research/research-0-26>) list only one project that involves a collaboration with a TCM staff member ('Chinese medicine practitioner knowledge, experience and attitudes towards professional registration in New South Wales', collaborators include TCM academic Carolyn Michael). Overall, there has been limited collaboration between TCM and ARCCIM represented by: co-supervision (by ARCCIM staff) of some TCM PhD students, and five co-authored publications since 2014.

## External Engagement

### TCM Clinic

The TCM Clinic is open to the public (at a reduced cost) for acupuncture, Chinese herbal medicine, and remedial massage (Figure 3). The TCM Clinic also operates as an intern clinic for final-year students, who are supervised by qualified TCM staff. Final-year intern students complete 750 hours of contact clinical hours and administer 300 individual treatments

(<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/about-us/year-4-intern-clinic>). In 2017 there were 6019 patient visits to the TCM Clinic, and in 2018 there were 5999 visits (representing 4920 acupuncture, 777 herbal therapies, and 294 massage visits).



Figure 3. Entrance to the Traditional Chinese Medicine Clinic on level 2 of Building 4 (corner of Harris and Thomas Streets).

### Concord Hospital

During 2018 final-year TCM students provided 300 acupuncture treatments at Concord Hospital to cancer survivors as a community service (i.e. no fee was charged). This program, voluntary for students, has been running since 2016. It occurs within the oncology/haematology outpatients clinic at Concord Hospital and treats cancer survivor patients for pain either associated with their cancer treatment or independent of their cancer status (e.g. lower back pain). The program occurs for 20-30 weeks, the students are supervised, and patients are recruited through the Cancer Survivor Centre at Concord Hospital.



### International partnerships

UTS has active MoUs with the following organisations for TCM:

- Dong-Eui University (Republic of Korea), for outbound teaching
- Shaolin Temple (China), for research
- Healthpac Centre for Excellence in Integrative Medicine Pty Ltd (Australia) for research
- Chengdu University of Traditional Chinese Medicine (China), for outbound teaching
- Korea Institute of Oriental Medicine (KIOM) (Republic of Korea), for outbound teaching

### Stakeholder organisations

Staff in UTS TCM interact with a number of external stakeholder organisations including:

- Standards Australia via ISO Technical Committee (ISO/TC 249 Traditional Chinese Medicine)
- Concord Hospital Cancer Survivor Centre
- Australian Acupuncture and Chinese Medicine Association
- Chinese Medicine and Acupuncture Society of Australia
- Chinese Medicine Board of Australia
- Chinese Medicine Council of New South Wales
- Australian Natural Therapists Association
- World Federation of Acupuncture and Moxibustion Societies
- World Federation of Chinese Medicine Societies

### Other

The CM team also convened an international research conference at UTS in 2012 titled “Scientific Acupuncture and Meridian Symposium” that attracted international significance and attendees.

### **Overview**

#### *UTS 2027*

The UTS 2027 Strategy has the vision that “UTS will be a leading public university of technology recognised for our global impact”. The Strategy moves UTS towards this vision via initiatives in: lifetime learning; personal learning experience; digital partners; new ways of working; precinct, community, partnerships; connected research; international profile; and social change. Disciplines in the Faculty of Science will contribute to UTS 2027 through integrated strategies at the School- and Faculty-levels. Beyond the potential contributions of TCM to the partnerships (via MoUs with the profession and overseas universities teaching TCM), international profile (via international collaborations for teaching), and social change (via the TCM Clinic and work at Concord Hospital) initiatives, the discipline’s contributions to lifetime learning and connected research would require significant development e.g. via postgraduate qualifications, short courses for continued professional development, and greater research performance.

Although the current UTS Health Strategy has the mission of “Creating sustainable, people-centred and integrated health systems and care, with the wider health sector, underpinned by translational

science, thought leadership, advocacy and innovative health technologies, policies and practice”, it did not recognise TCM or research in complementary medicine as an existing health-related expertise at UTS.

#### *The Science ‘Brand’ at UTS*

Only one other university in Sydney, and across NSW, offers courses in TCM (i.e. Western Sydney University). TCM therefore provides a distinctive niche for the Faculty of Science in the complementary health area. However, TCM differs from all other disciplines in the Faculty, which are clearly science-aligned disciplines (i.e. biology and biotechnology; chemistry; environmental science; forensic science; mathematics; statistics; medical science; physics). Where TCM occurs at other universities (i.e. WSU and RMIT) it is located within schools (equivalent to UTS faculties) that also include health-related disciplines (e.g., School of Science and Health at WSU [https://www.westernsydney.edu.au/ssh/school\\_of\\_science\\_and\\_health](https://www.westernsydney.edu.au/ssh/school_of_science_and_health)).

In the Australian university sector standalone science is structurally organised as a faculty, college or school in 13 universities (Adelaide, ANU, Charles Sturt, Edith Cowan, Melbourne, Monash, Newcastle, Queensland, RMIT, Sydney, UNSW, Western Australia, UTS). In other universities science occurs in combination with engineering, health or technology. Five universities among the 13 with a faculty of science include an allied health discipline (i.e. dentistry and nursing at Charles Sturt; psychology at Newcastle; optometry and psychology at UNSW; psychology at Sydney; and exercise physiology at Western Australia). None of the 13 universities with standalone science faculties (or equivalent) except UTS include a complementary health discipline such as TCM.

Elsewhere at UTS, aspects of traditional Chinese medicine are covered in the Faculty of Health through the research being conducted within the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM). Although the field of complementary and integrative medicine includes acupuncture and herbal therapies, and the aims of ARCCIM and TCM overlap, there have been few collaborative research projects between the two groups. The existence of similar discipline areas in another faculty, with limited examples of collaboration, suggests opportunities for profile-raising, financial efficiency, deeper collaboration, and cognate culture have not been realized.

#### *External Profile*

The TCM Clinic and, to a lesser extent, the program at Concord Hospital, provide a shopfront to the wider community and therefore contribute to UTS’s external profile and its opportunities for social impact. UTS TCM has memoranda of understanding with several institutions in China and Korea, and many TCM students travel overseas to complete part of their course in a university that specializes in traditional Chinese medicine. The staff of TCM are engaged with the profession via their involvement in local, national and international organisations and committees, and UTS TCM is viewed positively by stakeholder organisations: during the preparation of this report I received letters strongly supporting UTS TCM from the Register of Acupuncture and Traditional Chinese Medicine Inc, and the Chinese Medicine & Acupuncture Society of Australia (attached as Appendix 2). The evidence indicates that UTS TCM is held in high regard by external TCM stakeholder organisations and the community of TCM practitioners.

There is ongoing debate about the underlying basis and treatment efficacy of traditional Chinese medicine. While traditional Chinese medicine practitioners can be registered with the Chinese

Medicine Board of Australia and their training is regulated by the Australian Health Practitioner Regulation Agency, and acupuncture treatment can be reimbursed through the Medical Benefits Scheme when administered by a registered medical practitioner, concerns continue to be expressed from some parts of the health and medical profession. MacLennan and Morrison (2012)<sup>4</sup>, in an editorial in the Medical Journal of Australia that critiqued the teaching of 'pseudoscientific health courses' at a number of Australian universities, included the TCM course at UTS in their list of examples. In 2016 the Friends of Science in Medicine released a media statement ('Acupuncture Found to be Pointless') and a review ('Is there any place for acupuncture in 21st century medical practice?', <https://www.scienceinmedicine.org.au/2017/01/29/media-release-acupuncture-found-to-be-pointless-2/>) that was critical of traditional Chinese medicine in general and of acupuncture in particular. Since 2012 there have been 12 articles published in The Conversation debating various aspects of the legitimacy and efficacy of traditional Chinese medicine. Outside of the traditional Chinese medicine profession it is not known whether the existence of TCM in the Faculty of Science has a positive, negative or neutral impact on the reputation of UTS.

#### *Viability and Efficiency*

The Faculty's internal financial analysis showed that TCM delivers a net negative financial result (of -\$1.48M in 2018). The major driver of this was that total income (from teaching and the TCM Clinic) was less than the combination of total indirect costs (from UTS and the Faculty of Science) and direct costs (salaries and NSI). Of concern for the financial position of TCM that the numbers of commencing students, and total taught load, have been declining since 2016 (although 2019 commencing student is similar to 2018). Similarly, the CVA revealed a significant issue for TCM with negative net profitability and below-standard Course Quality. A major driver of the negative net profitability was the relatively high staff costs and the low CSP income per student. It will be difficult to significantly improve efficiencies because the external accreditation requires a large number of TCM-specific subjects and the achievement of clinical skills. As well as being constrained by the lower CSP income and accreditation requirements, there appear to be limited opportunities for the course to improve efficiencies by including relevant non-TCM subjects that have a larger EFTSL base and are more efficient to teach. TCM academic staff have a higher % teaching workload than other academic staff in the Faculty of Science, and while reducing this teaching workload might lead to improved research performance it will increase the costs of teaching (e.g. from hiring additional academic staff).

The Faculty's internal financial analysis shows that, without considering the indirect costs, TCM had a net result of +\$1.29M in 2018. At first glance, discontinuation of TCM would therefore worsen the Faculty's financial position by \$1.29M, assuming all indirect costs do not change. However, TCM is the least efficient course in the Faculty (among courses with an EFTSL of at least 50), and if the Faculty is allowed to retain the 129 taught EFTSL load (and assuming there are only incremental costs to other courses to teach this additional load) then the Faculty's overall teaching efficiency will be improved because the same EFTSL will be taught with a reduced direct cost base.

Measures of Course Quality were included in the UTS CVA. The CVA revealed low Quality scores for the two measures of graduate feedback: Graduate Satisfaction with Course (0.807) and Graduate

<sup>4</sup> MacLennan AH and Morrison RGB (2012) Tertiary education institutions should not offer pseudoscientific medical courses. Medical Journal of Australia 196:225-6.

Satisfaction with Teaching (0.535). The data were obtained from the Graduate Outcomes Survey (GOS). Graduate Satisfaction with Course is a recent graduate's response to a single question about her/his overall satisfaction. Graduate Satisfaction with Teaching is "The percentage of graduates who agreed they had experienced good teaching practices during their study" (from <https://www.qilt.edu.au/about-this-site/graduate-satisfaction>) and is the average of a recent graduate's responses to six questions. A meaningful change in the Course Quality index will require a deeper understanding of the drivers of graduates' responses to questions related to their overall satisfaction and experiences with teaching, and a program of improvements.

### *Teaching*

TCM staff believe the TCM courses are nationally leading, largely due to the clear focus on TCM-specific subjects, the significant clinical component, and links to overseas universities that provide in-country teaching for final-year students. The TCM courses provide opportunities for internship-like experiences via their learning in a clinic setting in the TCM Clinic. The TCM courses have a record, in UTS internal accreditation processes, of commendable teaching. All TCM subjects are learning.futures' certified, and while the primary aim of the course is to graduate accredited TCM practitioners the TCM staff have integrated research into the curriculum via two subjects in 'Evaluating TCM: Theory, Practice and Research'. APHRA's Chinese Medicine Accreditation Committee accredited the two UTS TCM courses without conditions in March 2019.

The CVA revealed issues in graduate's overall satisfaction with the course and with teaching. At this stage it is not known what degree of improvement in the two graduate-related metrics is required to improve the overall Course Quality index. In addition, the time to understand the drivers of graduates' responses, plan and implement responses, and note any change may be at least three years. While the Course Quality index was viewed with the net profit margin to assess overall course viability, there were also other courses in the Faculty of Science with Course Quality indexes similar to, or worse than, the index for TCM. The Faculty's strategic project in Course Viability and Teaching Efficiency was instigated to formulate responses and action plans to address the issues in all courses revealed by the CVA and to drive overall improvements in teaching efficiency in all of the Faculty's courses.

### *Research and Research Training*

The TCM discipline groups is under-performing in research relative to the rest of the Faculty. The factors that have contributed to this include: limited success in attracting external research grants; lack of Professor-level, research intensive or post-doc research fellows in the discipline group; not all staff are able to supervise HDR students; limited collaborations with successful researchers in other disciplines in the Faculty or the Faculty of Health; a historical focus on teaching and graduating health practitioners; a greater teaching workload than other disciplines; and a relatively greater reliance on teaching-only staff on short-term contracts (thereby reducing the proportion of TCM staff able to undertake research).

While the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM) has attracted significant philanthropic funding for its research, TCM has not been successful in this sector and only received limited funding from other sources for its research into the benefits of traditional Chinese medicine. Other than philanthropic funding, the major funding sources for



health-related research are the National Health and Medical Research Council (NHMRC) and the Medical Research Future Fund (MRRF). The MRRF's 2018-20 funding priorities do not specifically mention traditional Chinese medicine or complementary medicine; however its priorities include Comparative Effectiveness Research for 'research that engages patient populations that are typical in primary and acute care settings in randomised control trials'<sup>5</sup>. NHMRC has 'since 2007...provided more than \$67 million in funding for scientific research into complementary medicine and alternative therapies, through competitive, peer reviewed processes'<sup>6</sup>. The lack of success of TCM staff in attracting category 1 research funding and the lack of experience in leading or managing large funded collaborative research projects suggests that, without a significant change in individual researcher's profile or approach to research, there is limited potential for future success from these sources of research funding.

### Conclusions

The UTS 2027 Strategy has the ambitious vision that "UTS will be a leading public university of technology recognised for our global impact". UTS has experienced rapid growth in recent years and its national and international reputations have also rapidly grown, and many areas of research and teaching are recognised as world-leading. The UTS 2027 Strategy puts UTS on a trajectory for continued and greater successes and for impact. The Faculty of Science, as a major contributor to the world-leading profile of UTS, is expected to play a significant role in the future successes of UTS. Recent changes in Commonwealth funding of universities, declining student demand in both the undergraduate and postgraduate domains, and ongoing increases in costs have focused attention on the need to reverse some of these market trends while also improving efficiencies. The UTS Course Viability Analysis revealed that TCM courses are a 'loss maker' and have below standard Quality Index. The Faculty's internal financial analysis revealed that TCM had a net position of -\$1.48M in 2018. There is limited scope to significantly improve the course's financial position. While other courses in the Faculty are also financial 'loss makers' they are traditional science disciplines and have active and successful research programs. Notwithstanding the positives of TCM (its reputation with the profession and practitioners locally and internationally; the commendable record of teaching; its provision of internship-like experiences and study abroad opportunities), there is a strategic need to address the financial and research performance issues so the Faculty is optimally placed to support UTS 2027.

The following options for the future of TCM have been informed by the findings of this review. They include options to retain and invest, transfer to Western Sydney University, or discontinue.

<sup>5</sup> Source: <https://beta.health.gov.au/resources/publications/australian-medical-research-and-innovation-priorities-2018-2020>

<sup>6</sup> Source: <https://www.nhmrc.gov.au/health-advice/all-topics/complementary-medicines>

## **Option 1: Retain TCM and Invest in its Renewal**

### **Requirements**

Appoint a research intensive Chair of TCM (supported by research fellows and research funding); appoint an additional four research active academic staff (to cover the teaching currently done by sessional and casual staff and reduce the teaching load of other staff); undertake a change management or competitive re-appointment process for existing staff with priority given to demonstrated excellence in research and teaching.

Re-develop the TCM courses (while maintaining external accreditation) to: improve efficiency of delivery; attract significantly greater numbers of commencing students; address the quality issues revealed by the 2018 CVA.

Develop new PG offerings, and new short courses (e.g. for ongoing professional development of practitioners).

Facilitate collaborations with researchers elsewhere in the Faculty of Science and with the Faculty of Health.

Develop and roll-out a re-branding communications and marketing strategy that focuses on the science-based and evidence-led foundations of TCM at UTS, and the profile of the Faculty of Science that includes TCM.

### **Benefits and Opportunities**

Growth in the research profile and performance of the TCM discipline, and greater potential to attract large competitive grants.

TCM viewed as a significant contributor to the Faculty's achievements.

The Faculty retains and increases its international fee-paying student load, and number of students undertaking study abroad and internship-like experiences.

Improvements in the position of the TCM courses in the CVA.

Some stability for existing TCM staff and students.

### **Risks and Impacts**

Disruption to currently employed TCM staff arising from the change management process.

The time required to realize the expected growth in research performance (3-5 years, allowing for establishment of newly recruited staff).

Difficulty, or delays in, attracting a suitable Chair-level appointee and the additional academic appointments.

The financial investment required may constrain the Faculty's ability to invest in other already established areas where the risks are less.

Uncertainty about Commonwealth funding for additional student places.

The growth in quality and reputation of Chinese universities may limit the attractiveness of UTS as a destination for overseas students wanting to study TCM.

Ongoing competition from the other universities with established and successful TCM research programs may constrain the chances for significant growth in research performance (especially external grant success).

The possibility of further losses of health insurance rebates for complementary medicine treatments might make the profession less attractive and reduce the numbers of commencing students, and reduce investment in clinical trials research.

DRAFT

## **Option 2: Transfer to Western Sydney University**

### **Requirements**

Agreement from WSU on the details of the transfer, including numbers of staff that would move to WSU.

Determine and agree to the credit transfer arrangements for students currently enrolled in the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (WSU offers a three-year Bachelor of International Studies with a major in Chinese languages), and the impact (if any) on transferring students to have an academic record that meets accreditation requirements.

WSU able to provide teaching resources, including necessary clinic teaching hours.

Integration of TCM students with WSU cohorts of TCM students.

Staff communications, consultations and support.

The Faculty of Science retains the TCM taught EFTSL and allocates it to other courses.

### **Benefits and Opportunities**

The Faculty's overall teaching efficiency is improved, arising from a reduction in direct costs of <sup>s.2.1.5.</sup> (assuming total Faculty EFTSL is unchanged).

TCM staff have secure employment at WSU.

Space becomes available within the Faculty (e.g. the TCM Clinic) that can be repurposed/refitted to support the Faculty's other strategic outcomes.

TCM staff and students re-housed in an allied academic environment at WSU.

No requirement to teach-out the currently enrolled students.

Consistent science-based brand of the UTS Faculty of Science.

Positive perceptions among other staff and managers about the utility of the 2018 UTS Course Viability Analysis project.

Support for further development of a productive relationship with WSU.

### **Risks and Impacts**

WSU might not agree to transfer all staff and so some staff may lose their job.

Damage to UTS reputation among: affected TCM staff and students, TCM stakeholders and institutions involved in MoUs.

Damage to UTS reputation at WSU if move does not deliver expected benefits to WSU.

Some students might be unwilling/unable to transfer to WSU and change to a private provider, thereby reducing the financial benefit to WSU.



Students' overall experience of UTS negatively impacted.

Short-term costs to refurbish the vacated TCM Clinic and teaching spaces for other uses.

Staff employed as casuals to teach TCM subjects at UTS lose that income.

Loss of 18.5 taught load EFSTL (~ \$526,000) from non-TCM subjects offered by the Faculty of Science that were taken by TCM students

Loss of 4.1 taught load EFTSL from subjects offered by the Faculty of Health and 1.7 taught load EFTSL from subjects offered by the Faculty of Arts and Social Sciences.

Reduction in total number of international fee-paying students from the Faculty of Science, representing 5.8 taught load EFTSL (\$172,414).

Reduced choice of elective subjects for non-TCM students who would have chosen a TCM subject as an elective.

Loss of the external, community-facing TCM Clinic and the associated reputation damage to UTS within this community

Reduction in the Faculty's student mobility outcomes due to a decline in total numbers of students travelling overseas for study abroad as part of their course.

Reductions in the Faculty's international, fee-paying student load (without any growth from other areas in the Faculty) leading to negative impacts on the associated KPIs.

### Option 3: Discontinue TCM at UTS

#### Requirements

Teach-out the currently enrolled students, including the requirements to maintain the external accreditation of the TCM courses.

Change plan for TCM staff, which might include internal transfers, redundancy payments, or other options.

Provision of career and psychological support for affected staff and students.

Development and delivery of a communications plan that covers TCM staff and students; other staff and students in the Faculty of Science; wider UTS community of staff and students; external stakeholders; and MoU partners.

Development and delivery of a plan for closure of the TCM Clinic, while meeting the remaining students' needs for supervised clinic time to fulfil the professional accreditation requirements, and any ongoing treatment needs for patients.

The Faculty of Science retains the TCM taught EFTSL and allocates it to other courses.

#### Benefits and Opportunities

The Faculty's overall teaching efficiency is improved, arising from a reduction in direct costs of ~\$<sup>5.2.1.5.</sup> (assuming total Faculty EFTSL is unchanged).

Frees up space that can be re-purposed to drive Faculty of Science and UTS 2027 strategic outcomes.

Ensures resources within Faculty are closely aligned to the overall Faculty strategy.

Positive perceptions among other Faculty of Science staff about Faculty's commitment to core Faculty business.

Greater clarity about Faculty's core business.

Positive perceptions among other staff and managers about the utility of the 2018 UTS Course Viability Analysis project.

#### Risks and Impacts

Job losses or reduced income of TCM staff (continuing, fixed-term, and casuals) with associated social and psychological issues and impacts on academic career progression.

Negative feedback and reputational damage among external TCM-related stakeholders and partner institutions involved in MoUs.

Dissatisfaction among some non-TCM staff at loss of colleagues.

Teach-out of remaining students could take up to five years, be difficult to deliver (e.g. with existing staff leaving to pursue job opportunities with longer term prospects), and lead to opportunity costs to the remaining staff who have to manage teaching delivery.

Loss of some research outcomes for the Faculty and UTS.

Short-term costs to refurbish the vacated TCM Clinic and teaching spaces for other uses.

Reduced choice of elective subjects, for non-TCM students who would have chosen a TCM subject as an elective.

Loss of 18.5 taught load EFSTL (~ \$526,000) from non-TCM subjects offered by the Faculty of Science that were taken by TCM students

Loss of 4.1 taught load EFTSL from subjects offered by the Faculty of Health and 1.7 taught load EFTSL from subjects offered by the Faculty of Arts and Social Sciences

Loss of the external, community-facing TCM Clinic and the associated reputation damage to UTS within this community

Reduction in the Faculty's student mobility outcomes due to a decline in total numbers of students travelling overseas for study abroad as part of their course.

Reductions in the Faculty's international, fee-paying student load (without any growth from other areas in the Faculty) leading to negative impacts on the associated KPIs.

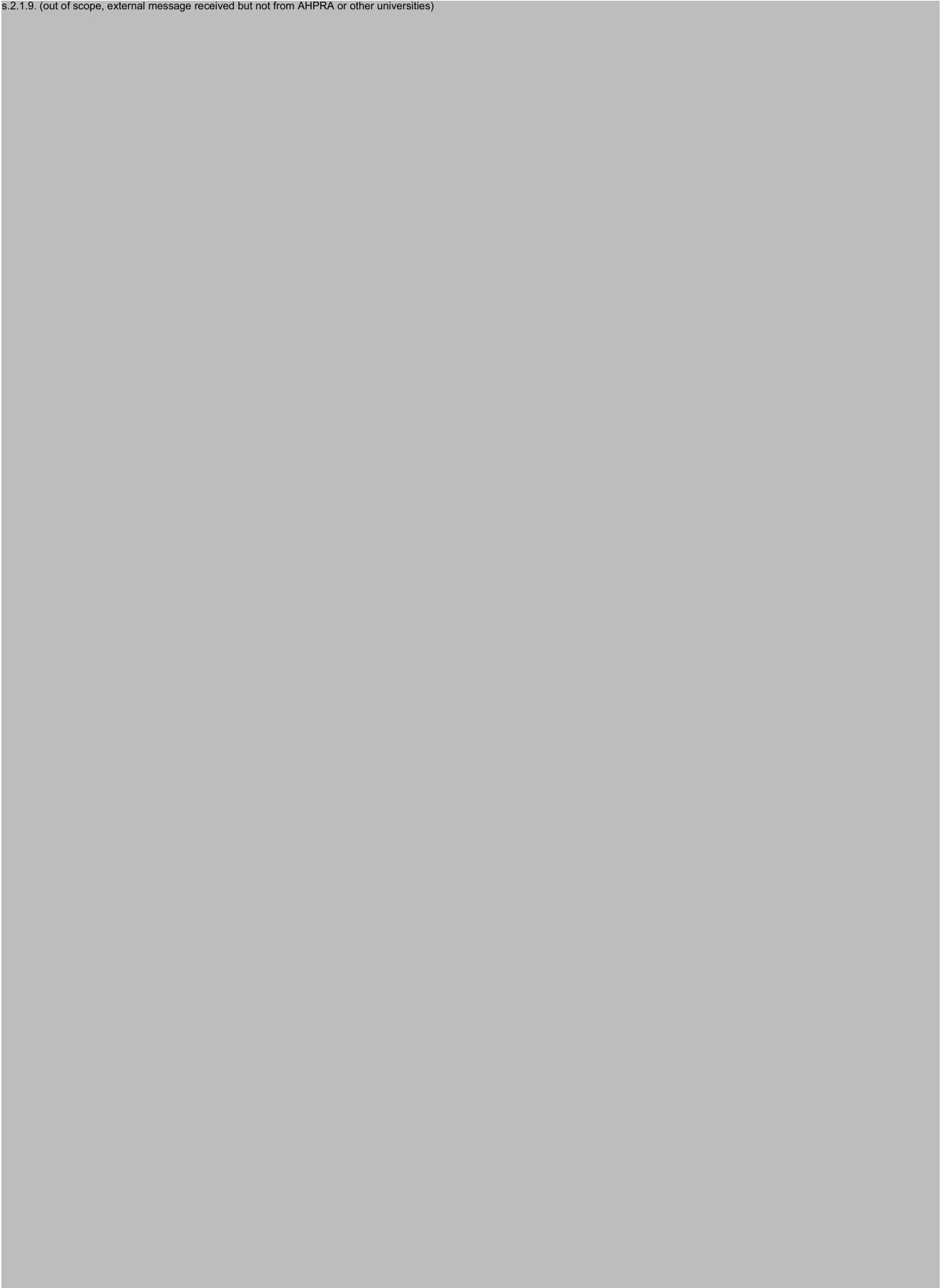
DRAFT

Appendix 1. Results of the 2018 Course Viability Analysis.


s.2.1.2. and s.2.1.5.




s.2.1.9. (out of scope, external message received but not from AHPRA or other universities)




s 2.1 9. (out of scope, external message received but not from AHPRA or other universities)



s.2.1.9. (out of scope, external message received but not from AHPRA or other universities)

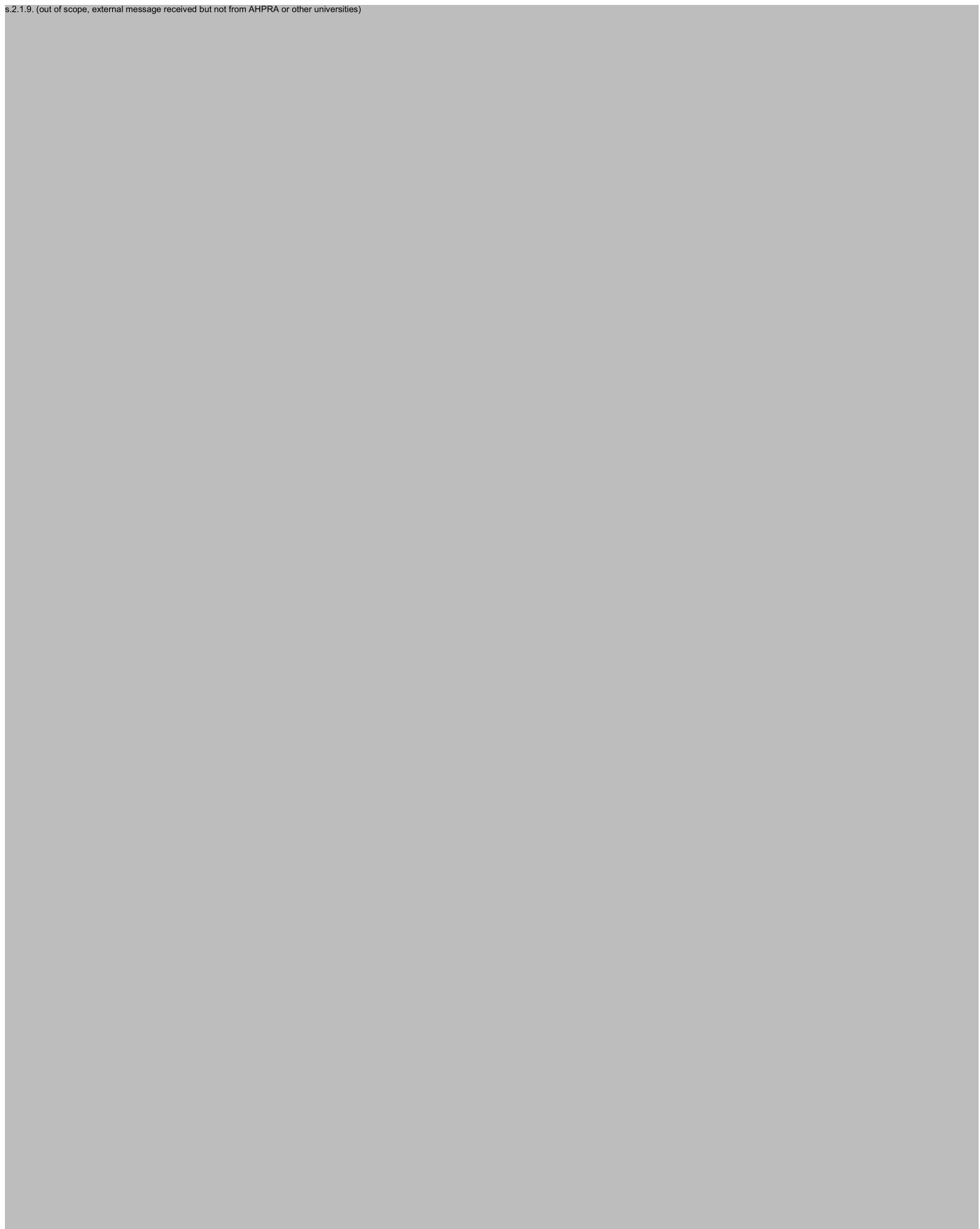


s.2.1.9. (out of scope, external message received but not from AHPRA or other universities)

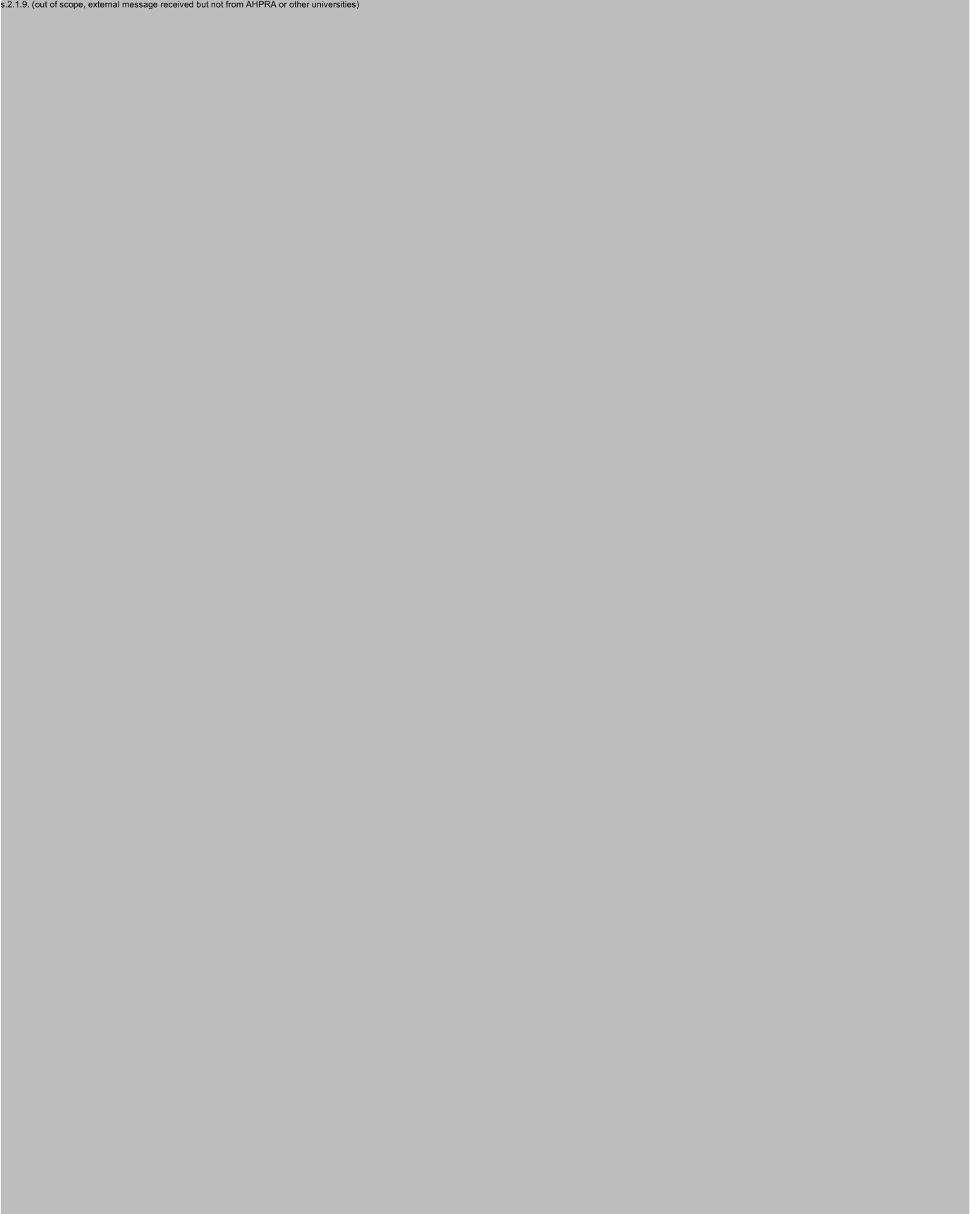




s.2.1.9. (out of scope, external message received but not from AHPRA or other universities)



s.2.1.9. (out of scope, external message received but not from AHPRA or other universities)



## TCM Change Strategy for Discussion with Provost

Action	Key Activities	Responsible	Timeline
Options Paper	<p>Develop Options Paper on the future of Traditional Chinese Medicine Options will include:</p> <ul style="list-style-type: none"> <li>- Continuation with evolution (with input from Christopher Zaslawski)</li> <li>- Transfer to Faculty of Health</li> <li>- Transfer of Business</li> <li>- Discontinue</li> </ul>	Bill Gladstone	TBD
Communication Plan	<p>Communication workshop for internal and external comms. Identify key stakeholders and develop Communication Plan including any media responses that may be required</p>	Bill Gladstone / Andrea Leigh / MCU / HRU	TBD
Support for Staff in TCM	Develop a program of support for relevant staff in TCM throughout the program of change	Bill Gladstone / Andrea Leigh / HRU	TBD
Consultation on options	<p>Provide relevant staff / stakeholders within Traditional Chinese Medicine with a Consultation Paper on the options outlined within the Options Paper. Staff given a 2 week period to provide feedback</p>	Bill Gladstone / Andrea Leigh	TBD
Risk Assessment	Feedback collated and circulated back to relevant staff within TCM	Bill Gladstone	TBD
Identification of preferred option	<p>Risk assessment developed for each option Options Paper updated to incorporate feedback from staff / stakeholders and provided to the Provost</p>	Bill Gladstone / Nick Glover (??) Bill Gladstone	TBD TBD
Implementation Planning on preferred option	<p>Taking all feedback into consideration, options for the future of TCM presented to SEM Preferred option identified on the future of TCM</p>	Provost / Bill Gladstone SEM	TBD TBD
Clause 53.2 Academic Enterprise Agreement 2014	<p>Detail Design/ Implementing Planning on preferred option Impact assessment conducted deriving from the preferred option for the future of TCM and preparation of Change Proposal</p>	Bill Gladstone / Andrea Leigh / HRU Bill Gladstone /HRU Change	TBD TBD

Action	Key Activities	Responsible	Timeline
Consultation and Change Process	1:1 consultation meetings with affected staff. Consultation paper provided to relevant staff regarding the impact and a proposed implementation plan of the change Staff given a 2 week period to provide feedback	Bill Gladstone / Andrea Leigh	TBD
	Feedback considered and amendments made as appropriate	Bill Gladstone / Andrea Leigh	TBD
	Change plan prepared	Bill Gladstone / Andrea Leigh / HRU	TBD
	Change plan released to relevant staff	Bill Gladstone	TBD
	Implementation of Change as outlined in Change Plan	Bill Gladstone / Andrea Leigh / HRU	TBD

#### Staff Impact for Options Paper

There are potentially 21 individuals affected by a proposed change, as follows:

- 8 continuing academic staff
- 3 fixed-term academics
- 7 casual academics
- 2 casual professional staff
- 1 academic staff member mentioned in our meeting – is this Qu, Xianqin (level D continuing academic)?

The impact for staff will vary depending on the decided option on the future of TCM.

#### For Discussion with Andrew:

Consultation with SEM needs to be built into this process

Student offers for 2019 intake into TCM suspended

**From:** [William Gladstone](#)  
**To:** [Andrea Leigh](#); [Fiona Thomas](#); [Lesley Healy](#); [Raelene La Ferla](#)  
**Cc:** [Greg Welsh](#)  
**Subject:** FW: Chinese Medicine  
**Date:** Friday, November 23, 2018 7:52:06 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[TCM numbers\\_2018.docx](#)

---

Dear all

Please see the email below from Peter Meier re the TCM options paper process. I will reply and address each of his points as far as I can.

Re the timeline, we have not been able to meet some of the milestones for this week, in particular the following:

	<b>Met with TCM team (include Xianqin Qu)</b>	<b>Outline high level timeline.</b>	<b>BG / AL</b>	<b>16 Nov 18</b>	
	Develop an Options Paper on the future of Traditional Chinese Medicine and provide to Provost for comment		BG	23 Nov 18	In progress
	Discuss the support staff in TCM may need during this process, with an emphasis on immediate needs	HRU to organise (Ray)	HRU / CZ / BG / AL	23 Nov 18	

I am meeting with the TCM team next Tuesday 27 Nov. I won't be able to finish the draft options paper and provide it to the Provost by today. And, we (ie Rae and I) will meet with Chris after the TCM team meeting to discuss support.

Thanks  
Bill

**Professor William Gladstone GAICD**  
 Interim Dean

**Faculty of Science**  
 University of Technology Sydney  
 T. +61 (02) 9514 8272  
 M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]  
 PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)




---

**From:** Peter Meier  
**Sent:** Thursday, 22 November 2018 2:13 PM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>  
**Subject:** RE: Chinese Medicine

Hi Bill,

I attach a copy of some figures request by Attila back in September FYI.

In light of the conversation we had, I am also enquiring in respect of the offers for 2019. Given the timeline you have outlined for a decision to be made by SEM in January after adequate consultation with TCM staff, there is an issue with current offers. As you know open day is on the 15th of December and we need to prepare. If TCM is to be discontinued with no intake for 2019, we would need to begin informing students on open day as they should have an opportunity to choose other options. There are also approximately 70 offers currently in play and those students would need to be contacted and informed that their course choice is no longer available as advertised and that they will need to seek other options. If there are students coming through InSearch or who deferred from previous years they will also need to be informed. Given the Faculty is facing a downturn in offers and enrolment numbers fro 2019, it would appear that turning down 70 offers at this point to be less than prudent, given those numbers will not be absorbed by other courses in the current climate. As I also mentioned in our meeting a loss of student and staff numbers does not represent a cost saving in the way a loss of staff only might present.

My concern with the process at this point is that it is a little vague, especially in regards to allowing TCM to respond or input into the paper before in goes to SEM, especially in regards to the range of options such as including making budget savings and staying in the faculty; moving to health which has a different cost base to science and a similar band funding meaning that in the provosts model the TCM course may be financially viable in Health; changing the course structure to make it more viable or have a UG/Master 3+2 option; as well as other options to be explored. It will require time and discussion with staff and we need to outline a process. The last change management process involved multiple consultations and multiple re-workings of the documentation. If any option other

than discontinuation is to be genuinely considered, then a disruption in the enrolment numbers and income of the course would adversely affect any future changes.

The exclusion of TCM from the early round offers and involvement of HR, rightly or wrongly signals that the decision may have already been predetermined, especially as rumours of a TCM demise have been promulgated by various staff in the school for almost 18 months and this perception will need to be managed with staff. I also wonder at what point if any will current students be consulted as they could be considered stakeholders along with TCM staff.

I would suggest at this moment in time it would be best to proceed with a 2019 enrolment as normal and thereby fulfil our advertised commitments to incoming students. Moving to a quick kill order is not going to result in any short term budgetary benefit and I think that TCM staff and students should be given an appropriate time to consider and feedback into the options paper. Speaking for myself, I would like input into the paper before it goes to SEM or alternately if appropriate, provide a separate response to SEM that they should consider as part of their decision making process.

Peter

-----  
 Peter C Meier  
 Associate Dean (Teaching and Learning)  
 Faculty of Science

---

**From:** Doreen Borg **On Behalf Of** William Gladstone

**Sent:** Monday, 19 November 2018 4:20 PM

**To:** Bill Booth <[Bill.Booth@uts.edu.au](mailto:Bill.Booth@uts.edu.au)>; Alaina Ammit <[Alaina.Ammit@uts.edu.au](mailto:Alaina.Ammit@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Anthony Dooley <[Anthony.Dooley@uts.edu.au](mailto:Anthony.Dooley@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; Graham Nicholson <[Graham.Nicholson@uts.edu.au](mailto:Graham.Nicholson@uts.edu.au)>; Helen Hume <[Helen.Hume@uts.edu.au](mailto:Helen.Hume@uts.edu.au)>; Liz Harry <[Elizabeth.Harry@uts.edu.au](mailto:Elizabeth.Harry@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>; Peter Ralph <[Peter.Ralph@uts.edu.au](mailto:Peter.Ralph@uts.edu.au)>; William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Subject:** Chinese Medicine

Dear SMG,

The Provost has asked me to draft an options paper regarding the future of Chinese Medicine at UTS. This has arisen from the results of the recent Course Viability Analysis, research performance, and disciplinary fit in the future Faculty of Science.

I will be drafting the options paper and then consulting with the Chinese Medicine discipline group on this draft, after which the final paper will be sent to the Senior Executive Management (SEM) for consideration. The aim is to have this first consultation phase completed by the end of this year and for SEM to make a decision on the preferred option, ideally in January.

Once a decision on the preferred option has been made, there will be further consultation about how best to proceed with that option. Together with Andy, I will be working with HR on this to ensure that the appropriate level of consultation is undertaken and people are supported during a potentially uncertain time. I have briefed the incoming Dean, Dianne Jolley, about this.

It is important that I inform you about this now in case you are approached by someone, in which case, you can explain the process I've outlined above. However, unless approached, please treat this information as confidential at this stage.

Best regards

Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**

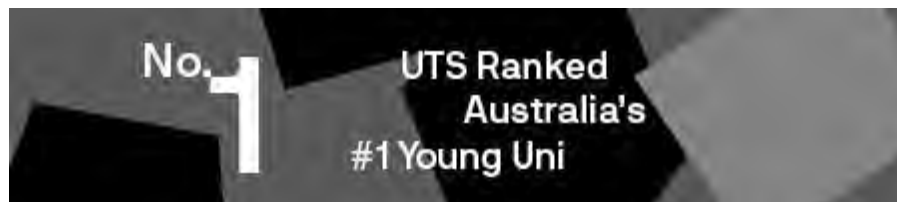
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)





### TCM Staff and Student Numbers

	TCM Undergrad Students	Domestic	International
C10186	B Health Science in TCM	s.2.1.2.	
C10164	B Health Science in TCM/B Arts in International Studies		
	<b>Total</b>	206	7

TCM HDR Students	
Doctor of Philosophy	19
Masters by Research	6
<b>Total</b>	<b>25</b>

### TCM Staff

FTE Permanent: (notional 40/40/20, TCM staff generally have higher teaching workloads negotiated)

- 4.8 staff
- s.2.1.3.

FTE Permanent assigned to SSG

- 1 staff
- This staff member has IR-1.2. teaching load. The remainder is covered by staff on fixed term contracts

Fixed term contracts of 1 year ending 2018

- 0.8 FTE staff (100% teaching)
- 1.0 FTE staff (80% teaching)

Sessional fixed term for 3 years ending 2020

- 0.6 FTE (100% teaching)

Clinical Educators (not technically academic contracts but counted as 100% teaching)

- 1.2 FTE Permanent

Consequently, excluding workload of staff currently being replaced by fixed term, the total number of **FTE staff teaching into the program is 7.6 FTE** (this load is spread across 11 individuals, with varying teaching/research/other loadings)

Staff: student ratio 1:30

Counting staff including those on s.2.1.3. the total count is 9.4 FTE. It would be misleading to use this figure to produce a staff:student ratio

Clinic visits as of 22<sup>nd</sup> August 2018

- N = 3825
- Gross clinical income \$142,000

**From:** [Fiona Thomas](#)  
**To:** [Kate Higgs](#); [Lesley Healy](#)  
**Subject:** Re: Another "all-CM" staff email - sent from [IR-1.3.](#) (16/7)  
**Date:** Wednesday, July 17, 2019 11:23:05 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

no probs and also we dont need to respond immediately

Sent from my Samsung Galaxy smartphone.

----- Original message -----

**From:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Date:** 17/7/19 10:51 am (GMT+10:00)  
**To:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>, Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>  
**Subject:** RE: Another "all-CM" staff email - sent from [IR-1.3.](#) (16/7)

Yes, thanks

I'm open to all wording suggestions, but agree we need to be kind/compassionate and clear that feedback has been received and considered.

I am in meetings until 5pm (except 12:45-1pm). Any wording ideas/suggestions appreciated.

Thx

---

**From:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>  
**Sent:** Wednesday, 17 July 2019 9:55 AM  
**To:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Cc:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>  
**Subject:** FW: Another "all-CM" staff email - sent from [IR-1.3.](#) (16/7)

Hi Kate,

I would not send that email drafted by greg – it will set [IR-1.3.](#) off.

Lets draft a nicer response.

Fi

---

**From:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>

**Sent:** Wednesday, 17 July 2019 9:54 AM  
**To:** Fiona Thomas <Fiona.Thomas@uts.edu.au>  
**Subject:** FW: Another "all-CM" staff email - sent from [R-1.3.] (16/7)

Kind regards,

**Lesley Healy**

HR Change Partner (*Mon, Tues, Wed*)  
Organisational Change and Delivery  
Human Resource Unit

T. +61 (02) 9514 7420  
Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

---

**From:** Greg Welsh <Greg.Welsh@uts.edu.au>  
**Sent:** Wednesday, 17 July 2019 9:45 AM  
**To:** Raelene La Ferla <Raelene.LaFerla@uts.edu.au>; Dean of Science TCM <dean.of.science.TCM@uts.edu.au>  
**Cc:** Lesley Healy <Lesley.Healy@uts.edu.au>; Dianne Jolley <Dianne.Jolley@uts.edu.au>  
**Subject:** Re: Another "all-CM" staff email - sent from [R-1.3.] (16/7)

Hi Kate

I'll leave the HR aspects to my HR colleagues, but EAP sounds sensible to me. In regard to [R-1.3.] email, how about the following?

best wishes

Greg

Dear [R-1.3.]

thank you for your response. As you're aware, TCM staff have had the opportunity to provide input into the review, and this input has been given due consideration. Nonetheless, the majority decision of the Science management group was to phase out the program. Our priority was to convey this to staff, we will now let students now

kind regards

Dianne

**From:** Raelene La Ferla  
**Sent:** 17 July 2019 07:45:52  
**To:** Dean of Science TCM; Greg Welsh  
**Cc:** Lesley Healy; Dianne Jolley  
**Subject:** RE: Another "all-CM" staff email - sent from <sup>R-1.3</sup> [REDACTED] (16/7)

Hi Kate

I am going to send both emails to Frank & Fiona to get their thoughts on our response.

However my thoughts are, I'm a little concerned about <sup>IR-1.2</sup> [REDACTED].

I think TCM staff have been given opportunity to put their feedback forward and it has been considered. We may want to draft a response to that effect however let me confirm with Fi and Frank.

Sorry I am not in the office <sup>S2.1.3</sup> [REDACTED] but I am contactable on the mobile if you need me.

Rae

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Sent:** Tuesday, 16 July 2019 9:24 PM  
**To:** Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Cc:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** Another "all-CM" staff email - sent from <sup>R-1.3</sup> [REDACTED] (16/7)

Hi Rae & Greg,

What response is appropriate given <sup>IR-1.3</sup> [REDACTED] has cc:'d all CM staff – email sent 7:40pm today.

Would a response or silence be wiser?

Note: In relation to <sup>R-1.3</sup> [REDACTED] email, the Addendum to the Review was/is the consultation response provided by CM staff, hence all feedback provided by staff during the second consultation 29/5-6/6 (and extended for a few days by request from CM staff directly with Bill) was provided unedited to the Provost & SMG for consideration. Also keeping in mind the first round of CM staff consultation occurred late 2018, so the second consultation was to gather formal CM staff input after two face-to-face communication/question sessions. I think it is reasonable to conclude that CM staff input has been provided & considered, although I cannot see the specifics of his financial viability argument within the Review or Addendum.

Kind rgds,

Kate

FYI below Dianne... I'm sure <sup>R-1.3</sup> [REDACTED] would expect you to have seen this email.

---

**From:** <sup>IR-1.3</sup> [REDACTED]  
**Sent:** Tuesday, 16 July 2019 7:40 PM

**To:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>; IR-1.3. [REDACTED]

**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Dear Dianne

Thank you for the update and the disappointing decision of the Senior Management Group to phase out/discontinue the Chinese medicine program. Has this been communicated to the student body at this point in time? We note that the reasons given for the decision revolve around financial viability, research productivity, and strategic fit.

In regard to financial viability we have consistently raised the issue of the indirect costs associated with the program, s.2.1.5. [REDACTED]

[REDACTED] This issue has not been addressed in any communication from yourself or Bill in regards to the equity across the Science programs. In addition the modelling was based on two academics (IR-1.2. [REDACTED] and s.2.1.3. [REDACTED]) teaching into the program. In fact during that period of time we had to cover their teaching responsibilities with casual contracts which resulted in higher than normal costs. I fed back to Bill and John but no changes were made to the financial costs during that period. A realistic costing needs to be done to ensure an accurate picture of funding for the retrospective period.

In relation to research productivity during the years 2017-2018, the CM academics and their HDR students published or received a DOI (and have gone on to publication) for **32 publications** (listed below). These included systematic reviews including one Cochrane Systematic Review, experimental studies, surveys, clinical trials, scale development, laboratory studies and educational papers. I am not sure why these publications were not taken into account when evaluating the research productivity for the group and how an argument can be made about poor research productivity.

1. Choi T-Y, Lee MS, Kim JI, **Zaslowski C** (2017) Moxibustion for the treatment of osteoarthritis: An updated systematic review and meta-analysis. *Maturitas* 100:33-

48 Jun 2017

2. **Eldson DS**, Spanswick S, **Zaslowski C**, **Meier PC**. (2017) Protocol: Testing the relevance of acupuncture theory in the treatment of myofascial pain in the upper trapezius muscle. *Journal of Acupuncture and Meridian Studies* (2017), doi: 10.1016/j.jams.11.007.
3. **Zheng S**, Kim C, **Meier P**, Sibbritt D and **Zaslowski, C**. (2017) Development of a novel questionnaire for the TCM pattern diagnosis of stress. *Journal of Acupuncture and Meridian Studies* Doi: 10.1016/j.jams.2017.06.002
4. Lee HW, Lee MS, Kim TH, Alraek T, **Zaslowski C**, Kim JW, Moon DG Cochrane Urology draft protocol - Ginseng versus placebo for erectile dysfunction (2017) DOI: 10.1002/14651858.CD012654
5. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) The effects of a structured mindfulness program on the development of empathy in healthcare students. *NursingPlus Open* Volume 3, 2017, Pages 1–5.
6. **Shuai Zheng**, Christine Kim, Sara Lal, **Peter Meier**, David Sibbritt, **Chris Zaslowski**. (2017) Tai Chi and Stress: A Randomised Controlled Trial. *Journal of Clinical Psychology* DOI: 10.1002/jclp.22482
7. Caroline A Smith, **Christopher J. Zaslowski**, Suzanne Cochrane, Xiaoshu Zhu, Zhen Zheng, Bertrand Loyeung, **Peter C Meier**, **Sean Walsh**, Charlie Changli Xue, Anthony L. Zhang, Paul P Fahey, Alan Bensoussan (2017) Reliability of the NICMAN Scale: an instrument to assess the quality of acupuncture administered in clinical trials. *Evidence Based Complementary and Alternative Medicine* doi:10.1155/2017/5694083
8. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. Mindfulness in Physical and Occupational Therapy Education and Practice: A Scoping Review *Physical Therapy Reviews* doi.org/10.1080/10833196.2017.1341594
9. Shohreh Razavy; Shi Ping Zhang; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap\_and **Christopher Zaslowski**; Psychophysical responses in patients receiving a mock laser within context of an acupuncture clinical trial: An Interoceptive perspective; *BMC Complementary and Alternative Medicine* DOI 10.1186/s12906-017-1859-0
10. Shohreh Razavy, Shi Ping Zhang, Ph.D; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap, **Christopher Zaslowski**. Investigation of the phenomenon of Propagated Sensation along the Channels (PSCs) in the upper limb following administration of acupuncture and mock laser *Journal of Acupuncture and Meridian Studies* DOI: 10.1016/j.jams.2017.06.007
11. Lees, T., Nassif, N., Simpson, A., Shad-Kaneez, F., Martiniello-Wilks, R., Lin, Y., Jones, A., **Qu, X.** & Lal, S. 2017, 'Recent advances in molecular biomarkers for diabetes mellitus: a systematic review.', *Biomarkers*, pp. 1-13.
12. Ong, M., Peng, J., Jin, X. & **Qu, X.** 2017, 'Chinese Herbal Medicine for the Optimal Management of Polycystic Ovary Syndrome.', *Am J Chin Med*, vol. 45, no. 3, pp. 405-422.

13. **Zheng, S.**, Kim, C, **Lal, S.**, **Meier, P.**, Sibbritt, D & **Zaslowski, C** 2018, 'The Effects of Twelve Weeks of Tai Chi Practice on Anxiety in Stressed But Healthy People Compared to Exercise and Wait-List Groups-A Randomized Controlled Trial.', *Journal of Clinical Psychology*, vol. 74, no. 1, pp. 83-92. (IF 2.330).
14. Dean, S., **Walsh, S.**, Williams, C., **Zaslowski, C.**, Morgan, A., & Levett-Jones, T. 2018, 'The mystery shopper student learning experience in undergraduate health education: A case study', *Nurse Education Today*, vol. 70, no. 2018, pp. 69-70. (IF 2.53; quartile 1, 6/133)
15. Oh, J.E., **Walsh, S.**, & **Zaslowski, C.J.**, 2018, 'A 10 year comparison update: A survey of soci- demographics and practice characteristics of members of the Australian Acupuncture and Chinese Medicine Association', *Australian Journal of Acupuncture and Chinese Medicine*, vol. 12, no. 1, pp. 19-25. (IF unknown; quartile 4, 90/103)
16. Choi, Y.B., Cobbin, D. & **Walsh, S.** 2018, 'Does Modern Research Concerning Chinese Medicine Acupoints Relate to Original Prescriptions? If Not, Why Not?', *Medical Acupuncture*. <https://doi.org/10.1089/acu.2018.1300>
17. Razavy, S., Gadau, M., Zhang, S.P., Wang, F.C., Bangrazi, S., Berle, C., Li, T., **Li, W.H.**, **Zaslowski, C.** 2018, 'Anxiety related to De Qi psychophysical responses as measured by MASS: A sub-study embedded in a multisite randomised clinical trial', *Complementary Therapies in Medicine*, vol. 39, pp. 24-35. doi: 10.1016/j.ctim.2018.05.009. Epub 2018 May 22 (IF 1.49; quartile 1, 9/103)
18. Popplewell M, Reizes J, **Zaslowski C.** 'Appropriate Statistics for Determining Chance-Removed Interpractitioner Agreement', *Journal of Alternative Complementary Medicine* 2018 May 31. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
19. Loyeung B, Lee J, **Michael C.**, **Zaslowski C.** 2018, 'An experimental study in distinguishing an authentic herbal substance from sham herbal substances', *Complementary Therapies in Medicine*. 2018 Aug;39:92-96. doi: 10.1016/j.ctim.2018.04.005. Epub 2018 Apr 11. (IF 1.54; quartile 1, 9/103)
20. Popplewell M, Reizes J, **Zaslowski C.** 2018 'Consensus in Traditional Chinese Medical Diagnosis in Open Populations', *Journal of Alternative and Complementary Medicine*. 2018 Mar 1. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
21. Xiao H, **Zaslowski C.**, Vardy J, Oh B. 2018 'Treatment of Sciatica Following Uterine Cancer with Acupuncture: A Case Report', *Medicines (Basel)*, vol. 5, no. 1, pii: E6. doi: 10.3390/medicines5010006 (IF unknown)
22. Yu, XF, **Zaslowski C** and Lim DCE. (2018) Vitamin D on glycaemia control in type 2 diabetes patients: a systematic review of randomised clinical Trials. *Journal of the Australian Traditional Medicine Society*, vol. 13, no. 2, pp. 82-88. (IF unknown; quartile 4, 98/103)
23. Popplewell M, Reizes J, **Zaslowski C.** 2018, 'A Novel Approach to Describing Traditional Chinese Medical Patterns: The Traditional Chinese Medical Diagnostic Descriptor', *Journal of Alternative and Complementary Medicine*

<https://doi.org/10.1089/acm.2018.0065> 2018. (IF 1.498)

24. **McCambridge** AB, **Zaslowski**, C. & **Bradnam**, V. 2018 'The effect of verum and sham acupuncture on corticomotor excitability in healthy adults', *Clinical Neurophysiology*, vol. 129, s1, pp. e119. DOI: 10.1097/WNR.0000000000001159
25. Oh B, Eade T, Kneebone A, Hruby G, Lamoury G, Pavlakis N, Clarke S, **Zaslowski** C, Marr I, Costa D, Back M. 2018, 'Acupuncture in Oncology: The Effectiveness of Acupuncture May Not Depend on Needle Retention Duration', *Integrative Cancer Therapies*, vol. 17, no. 2, pp. 458-66. doi: 10.1177/1534735417734912 (IF 2.65; quartile 1, 11/103)
26. Oh B, Yeung A, Klein P, Larkey L, Ee C, **Zaslowski** C, Knobf T, Payne P, Stener-Victorin E, Lee R, Choi W, Chun M, Bonucci M, Lang HD, Pavlakis N, Boyle F, Clarke S, Back M, Yang P, Wei Y, Guo X, Weng CD, Irwin MR, Elfiky AA, Rosenthal D. 2018 'Accreditation Standard Guideline Initiative for Tai Chi and Qigong Instructors and Training Institutions', *Medicines (Basel)*. Vol. 5, no. 2, pii: E51. doi: 10.3390/medicines502005
27. **Ong M**, Cheng J, Jin X, Lao W, Johnson M, Tan Y, **Qu X**. 2018 'Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of cytochrome P450 17A1 expression in primary murine theca cells.' *J Ethnopharmacol*, vol. 229, pp. 97-103. doi: 10.1016/j.jep.2018.09.006.
28. Chen H, McGowan EM, Ren N, Lal S, Nassif N, Shad-Kaneez F, **Qu X**, Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. *Biomark Insights*. 2018 Jul 5;13:1177271918785130. doi: 10.1177/1177271918785130.
29. Reyna Zeballos, J.L. & **Meier, P** 2018, 'A Practical Model for Implementing Digital Media Assessments in Tertiary Science Education', **American Journal of Educational Research**, vol. 6, no. 1, pp. 27-31.
30. Reyna Zeballos, J.L., Hanham, J & **Meier, P** 2018, 'The Internet explosion, digital media principles and implications to communicate effectively in the digital space', *E-Learning and Digital Media*, vol. 15, no. 1, pp. 36-52.
31. Reyna Zeballos, J.L. & **Meier, P.**, Hanham, J 2018, 'A Framework for Digital Media Literacies for Teaching and Learning in Higher Education', **E-Learning and Digital Media**, vol. 15, no. 4.
32. Reyna Zeballos, J.L. & **Meier, P** 2018, 'Using the Learner-Generated Digital Media (LGDM) Framework in Tertiary Science Education: A Pilot Study', **Education Sciences**, vol. 8, no. 3, pp. 1-23.

As to strategic fit, the CM course has been taught within the Faculty of Science since 1994. The course has several research methods subjects within the curriculum and has a reasonable group of HDR students undertaking clinical and experimental projects across a variety of areas. We specialise in neuroscience (trans-magnetic cortical stimulation for example) and clinical aspects of acupuncture. We have a positive outcome for a multisite clinical trial publication coming out this year for tennis elbow pain and several publications already for 2019.



The CM group are at odds to understand how the decision was made by SMG concerning these three areas.

IR-1.3.

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Sent:** Monday, 15 July 2019 4:56 PM  
**To:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As you know, the management of the Faculty of Science at UTS has recently been undertaking a review of the Traditional Chinese Medicine program. The review considered a range of information about the program, including staffing profiles, courses and teaching, student load, financial position within the faculty, course viability analyses, accreditation, benchmarking QILT, research training, research activity and productivity, external engagement, and TCM at other universities. Chinese Medicine staff had two opportunities to respond to the draft document, and their comments were received, considered and incorporated into the review where appropriate.

As part of the review, the Science Senior Management Group were then asked to support one of two options as a recommendation to the Provost:

- Discontinuation of the program at UTS
- Build up the program

The Senior Management Group acknowledged the length of time the program has run, the high quality of the students, the excellent QILT outcomes, and their respect of their colleagues. However, based on the program's poor financial viability, research productivity, and strategic fit within Science, the outcome of the discussion was a majority vote to phase out/discontinue the program.

Whilst no final decision is made prior to the formal process in accordance with the UTS Award Course Approval Policy and Procedures, I wish to provide as much transparency as possible and will continue to communicate with staff, students and other stakeholders as we are able. We will provide a further update after the Faculty Board meeting to be held later in July.

The university acknowledges the uncertainty staff are currently dealing with. Staff are encouraged to utilise support as needed via UTS Human Resources, our partner being Raelene La Ferla, and/or our UTS Employee Assistance Program support provider, PeopleSense (1300 307 912). Note, we are also looking at providing individual support to you and your colleagues during this process and I will be in touch with more details on this soon.

Thank you once again for your contributions and professionalism through this review process.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

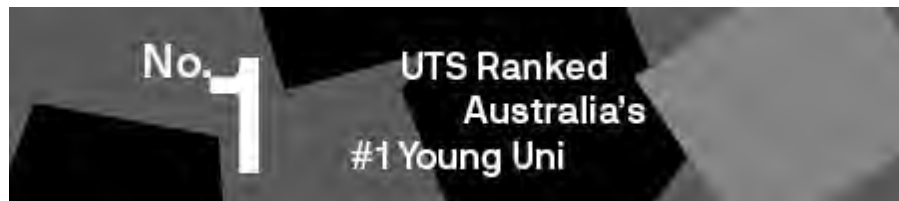
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Raelene La Ferla](#)  
**To:** [Kate Higgs](#); [Fiona Thomas](#)  
**Cc:** [Lesley Healy](#)  
**Subject:** RE: Another "all-CM" staff email - sent from [REDACTED] (16/7)  
**Date:** Thursday, July 18, 2019 6:32:54 PM  
**Attachments:** [image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[image008.png](#)

I'm just going to say that I'm [REDACTED] however happy to answer any questions they may have next week.

---

**From:** Raelene La Ferla  
**Sent:** Thursday, 18 July 2019 5:50 PM  
**To:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>; Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>  
**Cc:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>  
**Subject:** RE: Another "all-CM" staff email - sent from [REDACTED] (16/7)

Thanks Kate – there's a slight issue as I have [REDACTED]. What do you think I need to say?

Rae

---

**From:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Sent:** Thursday, 18 July 2019 5:48 PM  
**To:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Cc:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>  
**Subject:** RE: Another "all-CM" staff email - sent from [REDACTED] (16/7)

Rae was on [REDACTED] all-TCM email distribution, so she doesn't need to say she's monitoring the Dean of Science TCM mailbox (easier to be silent don't you think?).

I'd alter the signoff to not sound like the signoff "Di" has used a couple of times "Thank you once again for your contributions and professionalism through this review process." Instead, something like... "I'm happy to answer any further questions you might have, as far as I can until Di is back on Monday..."

Oh, & Dianne is a double n...

See you tmw,  
Kate

---

**From:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>  
**Sent:** Thursday, 18 July 2019 5:38 PM

**To:** Raelene La Ferla <Raelene.LaFerla@uts.edu.au>  
**Cc:** Lesley Healy <Lesley.Healy@uts.edu.au>; Kate Higgs <Kate.Higgs@uts.edu.au>  
**Subject:** FW: Another "all-CM" staff email - sent from IR-1.3. (16/7)

Sorry Rae,

Its been busy !!!

Lesley's draft is below and I have tweaked it to now come from you – happy for you to make any further tweaks.

Dear IR-1.3.

*As you may know Dianne is away at the moment and in her absence she has asked me to keep across the Dean of Science TCM mailbox.*

*After reading your email I referred back to the CM Status Report and to the Addendum to the report, which includes the feedback provided by CM staff during the consultation period 29 May – 6 July. It appears that the points you have raised regarding publications and strategic fit have been incorporated into the Review/Addendum, and that feedback has been received, considered and will inform the decision making process. I will confirm this with Diane and Bill on their return.*

*Regarding your point on Financial Viability, I am unfortunately not across this detail and I will also confirm with them that the information you have provided has been taken into consideration in the CM Status Report*

*Thank you once again for your contributions and professionalism through this review process.*

*Kind regards*

---

**From:** Lesley Healy <Lesley.Healy@uts.edu.au>  
**Sent:** Wednesday, 17 July 2019 5:47 PM  
**To:** Fiona Thomas <Fiona.Thomas@uts.edu.au>  
**Subject:** FW: Another "all-CM" staff email - sent from IR-1.3. (16/7)

**Draft Email Response:**

Dear IR-1.3.,

*As you may know Dianne is away at the moment and in her absence she has asked me to manage the Dean of Science TCM mailbox.*

*After reading your email I referred back to the CM Status Report and to the Addendum to the report, which includes the feedback provided by CM staff during the consultation period 29 May – 6 July. It appears that the points you have raised regarding publications and strategic fit have been incorporated into the Review/Addendum so that feedback has been received, considered and will inform the decision making process.*

*Regarding your point on Financial Viability, I am unfortunately not across this detail and I will confirm with Dianne, when she returns, that the information you have provided has been taken into consideration in the CM Status Report*

*We have communicated to students that we remain committed to them completing their studies and, when a final decision has been made, UTS will communicate with them to ensure we honour that commitment.*

*Thank you once again for your contributions and professionalism through this review process.*

*Kind regards*

*Kate Higgs*

---

Also, I had a look through the CM Status Report to see if the points that IR-1.3. makes in his email were included in the report:

#### **Financial Viability:**

As Kate mentioned in her email below I also cannot find the specifics of his point in the Report. The data in Table 5 in the report shows that the Indirect Faculty Costs (by FTE) for TCM in 2018 was s.2.1.5.

Also on page 21 there is an Appendix showing the 2018 Course Viability Analysis but I can't find the numbers that IR-1.3. is referring to!

#### **Publications:**

The data in table 8 in the report (below) shows the Total Publications for CM in 2017 was 34. IR-1.3. mentions 32 publications.

Total publications	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	9	490	499	1.8%	3.0%
<b>2015</b>	4	528	532	0.8%	2.9%
<b>2016</b>	19	616	635	3.0%	2.3%
<b>2017</b>	34	566	600	5.7%	4.9%

#### **Strategic Fit:**

There are two research subjects are referred to in the report:

Evaluating TCM: Theory, Practice and Research 1 6 91614

Evaluating TCM: Theory, Practice and Research 2 6 91615

In the addendum the following wording has been added under the heading: Solution that may address financial liability (page 3) - *'The two CM research subjects 91614 and 91615 could be discontinued and replaced with 60207 which is a research subject taught in the Advanced science course and funded at a higher CSP cluster and another medically relevant cluster 7 funded subject added'*

Page 15 outlines the number of HDR students:

*Of the 12 continuing or fixed-term academic staff in CM, four are supervising HDR students as principal supervisor, six are not acting as a principal supervisor of a HDR student, and s.2.1.2. current HDR students.*

*At the end of 2018 there were 27 (headcount) HDR students enrolled in CM-related MSc (research) or PhD projects.*

On page 16 of the report there are three paragraphs (which, the report states, were provided by Chris) –these paragraphs refer to research in trans-magnetic cortical stimulation, tennis elbow and acupuncture research

Kind regards,

**Lesley Healy**

HR Change Partner (*Mon, Tues, Wed*)

Organisational Change and Delivery

Human Resource Unit

T. +61 (02) 9514 7420

Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

---

**From:** Raelene La Ferla

**Sent:** 17 July 2019 07:45:52

**To:** Dean of Science TCM; Greg Welsh

**Cc:** Lesley Healy; Dianne Jolley

**Subject:** RE: Another "all-CM" staff email - sent from R-1.3. (16/7)

Hi Kate

I am going to send both emails to Frank & Fiona to get their thoughts on our response.

However my thoughts are, I'm a little concerned about <sup>IR-12</sup> [REDACTED]

I think TCM staff have been given opportunity to put their feedback forward and it has been considered. We may want to draft a response to that effect however let me confirm with Fi and Frank.

Sorry I am not in the office <sup>S2.13</sup> [REDACTED] but I am contactable on the mobile if you need me.

Rae

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Sent:** Tuesday, 16 July 2019 9:24 PM  
**To:** Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Cc:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** Another "all-CM" staff email - sent from <sup>IR-13</sup> [REDACTED] (16/7)

Hi Rae & Greg,

Note: In relation to <sup>R-13</sup> [REDACTED] email, the Addendum to the Review was/is the consultation response provided by CM staff, hence all feedback provided by staff during the second consultation 29/5-6/6 (and extended for a few days by request from CM staff directly with Bill) was provided unedited to the Provost & SMG for consideration. Also keeping in mind the first round of CM staff consultation occurred late 2018, so the second consultation was to gather formal CM staff input after two face-to-face communication/question sessions. I think it is reasonable to conclude that CM staff input has been provided & considered, although I cannot see the specifics of his financial viability argument within the Review or Addendum.

Kind rgds,

Kate

FYI below Dianne... I'm sure <sup>R-13</sup> [REDACTED] would expect you to have seen this email.

---

**From:** <sup>IR-13</sup> [REDACTED]  
**Sent:** Tuesday, 16 July 2019 7:40 PM  
**To:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>; <sup>IR-13</sup> [REDACTED]

[REDACTED]

**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla

<Raelene.LaFerla@uts.edu.au>

**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Dear Dianne

Thank you for the update and the disappointing decision of the Senior Management Group to phase out/discontinue the Chinese medicine program. Has this been communicated to the student body at this point in time? We note that the reasons given for the decision revolve around financial viability, research productivity, and strategic fit.

In regard to financial viability we have consistently raised the issue of the indirect costs associated with the program, <sup>s.2.1.5.</sup> [REDACTED]

[REDACTED] This issue has not been addressed in any communication from yourself or Bill in regards to the equity across the Science programs. In addition the modelling was based on two academics (<sup>IR-1.2.</sup> [REDACTED] and <sup>s.2.1.3.</sup> [REDACTED] [REDACTED]) teaching into the program. In fact during that period of time we had to cover their teaching responsibilities with casual contracts which resulted in higher than normal costs. I fed back to Bill and John but no changes were made to the financial costs during that period. A realistic costing needs to be done to ensure an accurate picture of funding for the retrospective period.

In relation to research productivity during the years 2017-2018, the CM academics and their HDR students published or received a DOI (and have gone on to publication) for **32 publications** (listed below). These included systematic reviews including one Cochrane Systematic Review, experimental studies, surveys, clinical trials, scale development, laboratory studies and educational papers. I am not sure why these publications were not taken into account when evaluating the research productivity for the group and how an argument can be made about poor research productivity.

1. Choi T-Y, Lee MS, Kim JI, **Zaslowski C** (2017) Moxibustion for the treatment of osteoarthritis: An updated systematic review and meta-analysis. *Maturitas* 100:33-48 Jun 2017
2. **Elsdon DS**, Spanswick S, **Zaslowski C**, **Meier PC**. (2017) Protocol: Testing the relevance of acupuncture theory in the treatment of myofascial pain in the upper trapezius muscle. *Journal of Acupuncture and Meridian Studies* (2017), doi: 10.1016/j.jams.11.007.
3. **Zheng S**, Kim C, **Meier P**, Sibbritt D and **Zaslowski C**. (2017) Development of a novel questionnaire for the TCM pattern diagnosis of stress. *Journal of Acupuncture and Meridian Studies* Doi: 10.1016/j.jams.2017.06.002
4. Lee HW, Lee MS, Kim TH, Alraek T, **Zaslowski C**, Kim JW, Moon DG Cochrane Urology draft protocol - Ginseng versus placebo for erectile dysfunction (2017)



DOI: 10.1002/14651858.CD012654

5. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) The effects of a structured mindfulness program on the development of empathy in healthcare students. *NursingPlus Open* Volume 3, 2017, Pages 1–5.
6. **Shuai Zheng**, Christine Kim, Sara Lal, **Peter Meier**, David Sibbritt, **Chris Zaslowski**. (2017) Tai Chi and Stress: A Randomised Controlled Trial. *Journal of Clinical Psychology* DOI: 10.1002/jclp.22482
7. Caroline A Smith, **Christopher J. Zaslowski**, Suzanne Cochrane, Xiaoshu Zhu, Zhen Zheng, Bertrand Loyeung, **Peter C Meier**, **Sean Walsh**, Charlie Changli Xue, Anthony L. Zhang, Paul P Fahey, Alan Bensoussan (2017) Reliability of the NICMAN Scale: an instrument to assess the quality of acupuncture administered in clinical trials. *Evidence Based Complementary and Alternative Medicine* doi:10.1155/2017/5694083
8. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. Mindfulness in Physical and Occupational Therapy Education and Practice: A Scoping Review *Physical Therapy Reviews* doi.org/10.1080/10833196.2017.1341594
9. Shohreh Razavy; Shi Ping Zhang; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap\_and **Christopher Zaslowski**; Psychophysical responses in patients receiving a mock laser within context of an acupuncture clinical trial: An Interoceptive perspective; *BMC Complementary and Alternative Medicine* DOI 10.1186/s12906-017-1859-0
10. Shohreh Razavy, Shi Ping Zhang, Ph.D; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap, **Christopher Zaslowski**. Investigation of the phenomenon of Propagated Sensation along the Channels (PSCs) in the upper limb following administration of acupuncture and mock laser *Journal of Acupuncture and Meridian Studies* DOI: 10.1016/j.jams.2017.06.007
11. Lees, T., Nassif, N., Simpson, A., Shad-Kaneez, F., Martiniello-Wilks, R., Lin, Y., Jones, A., **Qu, X.** & Lal, S. 2017, 'Recent advances in molecular biomarkers for diabetes mellitus: a systematic review.', *Biomarkers*, pp. 1-13.
12. Ong, M., Peng, J., Jin, X. & **Qu, X.** 2017, 'Chinese Herbal Medicine for the Optimal Management of Polycystic Ovary Syndrome.', *Am J Chin Med*, vol. 45, no. 3, pp. 405-422.
13. **Zheng, S**, Kim, C, **Lal, S**, **Meier, P**, Sibbritt, D & **Zaslowski, C** 2018, 'The Effects of Twelve Weeks of Tai Chi Practice on Anxiety in Stressed But Healthy People Compared to Exercise and Wait-List Groups-A Randomized Controlled Trial.', *Journal of Clinical Psychology*, vol. 74, no. 1, pp. 83-92. (IF 2.330).
14. Dean, S., **Walsh, S.**, Williams, C., **Zaslowski, C.**, Morgan, A., & Levett-Jones, T. 2018, 'The mystery shopper student learning experience in undergraduate health education: A case study', *Nurse Education Today*, vol. 70, no. 2018, pp. 69-70. (IF 2.53; quartile 1, 6/133)

15. Oh, J.E., **Walsh, S., & Zaslowski, C.J.**, 2018, 'A 10 year comparison update: A survey of soci- demographics and practice characteristics of members of the Australian Acupuncture and Chinese Medicine Association', *Australian Journal of Acupuncture and Chinese Medicine*, vol. 12, no. 1, pp. 19-25. (IF unknown; quartile 4, 90/103)
16. Choi, Y.B., Cobbin, D. & **Walsh, S.** 2018, 'Does Modern Research Concerning Chinese Medicine Acupoints Relate to Original Prescriptions? If Not, Why Not?', *Medical Acupuncture*. <https://doi.org/10.1089/acu.2018.1300>
17. Razavy, S., Gadau, M., Zhang, S.P., Wang, F.C., Bangrazi, S., Berle, C., Li, T., **Li, W.H., Zaslowski, C.** 2018, 'Anxiety related to De Qi psychophysical responses as measured by MASS: A sub-study embedded in a multisite randomised clinical trial', *Complementary Therapies in Medicine*, vol. 39, pp. 24-35. doi: 10.1016/j.ctim.2018.05.009. Epub 2018 May 22 (IF 1.49; quartile 1, 9/103)
18. Popplewell M, Reizes J, **Zaslowski C.** 'Appropriate Statistics for Determining Chance-Removed Interpractitioner Agreement', *Journal of Alternative Complementary Medicine* 2018 May 31. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
19. Loyeung B, Lee J, **Michael C, Zaslowski C.** 2018, 'An experimental study in distinguishing an authentic herbal substance from sham herbal substances', *Complementary Therapies in Medicine*. 2018 Aug;39:92-96. doi: 10.1016/j.ctim.2018.04.005. Epub 2018 Apr 11. (IF 1.54; quartile 1, 9/103)
20. Popplewell M, Reizes J, **Zaslowski C.** 2018 'Consensus in Traditional Chinese Medical Diagnosis in Open Populations', *Journal of Alternative and Complementary Medicine*. 2018 Mar 1. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
21. Xiao H, **Zaslowski C**, Vardy J, Oh B. 2018 'Treatment of Sciatica Following Uterine Cancer with Acupuncture: A Case Report', *Medicines (Basel)*, vol. 5, no. 1, pii: E6. doi: 10.3390/medicines5010006 (IF unknown)
22. Yu, XF, **Zaslowski C** and Lim DCE. (2018) Vitamin D on glycaemia control in type 2 diabetes patients: a systematic review of randomised clinical Trials. *Journal of the Australian Traditional Medicine Society*, vol. 13, no. 2, pp. 82-88. (IF unknown; quartile 4, 98/103)
23. Popplewell M, Reizes J, **Zaslowski C.** 2018, 'A Novel Approach to Describing Traditional Chinese Medical Patterns: The Traditional Chinese Medical Diagnostic Descriptor', *Journal of Alternative and Complementary Medicine* <https://doi.org/10.1089/acm.2018.0065> 2018. (IF 1.498)
24. **McCambridge AB, Zaslowski, C. & Bradnam, V.** 2018 'The effect of verum and sham acupuncture on corticomotor excitability in healthy adults', *Clinical Neurophysiology*, vol. 129, s1, pp. e119. DOI: 10.1097/WNR.0000000000001159
25. Oh B, Eade T, Kneebone A, Hruby G, Lamoury G, Pavlakis N, Clarke S, **Zaslowski C**, Marr I, Costa D, Back M. 2018, 'Acupuncture in Oncology: The Effectiveness of Acupuncture May Not Depend on Needle Retention Duration', *Integrative Cancer Therapies*, vol. 17, no. 2, pp. 458-66. doi:

10.1177/1534735417734912 (IF 2.65; quartile 1, 11/103)

26. Oh B, Yeung A, Klein P, Larkey L, Ee C, **Zaslowski C**, Knobf T, Payne P, Stener-Victorin E, Lee R, Choi W, Chun M, Bonucci M, Lang HD, Pavlakis N, Boyle F, Clarke S, Back M, Yang P, Wei Y, Guo X, Weng CD, Irwin MR, Elfiky AA, Rosenthal D. 2018 'Accreditation Standard Guideline Initiative for Tai Chi and Qigong Instructors and Training Institutions', *Medicines (Basel)*. Vol. 5, no. 2, pii: E51. doi: 10.3390/medicines502005
27. **Ong M**, Cheng J, Jin X, Lao W, Johnson M, Tan Y, **Qu X**. 2018 'Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of cytochrome P450 17A1 expression in primary murine theca cells.' *J Ethnopharmacol*, vol. 229, pp. 97-103. doi: 10.1016/j.jep.2018.09.006.
28. Chen H, McGowan EM, Ren N, Lal S, Nassif N, Shad-Kaneez F, **Qu X**, Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. *Biomark Insights*. 2018 Jul 5;13:1177271918785130. doi: 10.1177/1177271918785130.
29. Reyna Zeballos, J.L. & **Meier, P** 2018, 'A Practical Model for Implementing Digital Media Assessments in Tertiary Science Education', **American Journal of Educational Research**, vol. 6, no. 1, pp. 27-31.
30. Reyna Zeballos, J.L., Hanham, J & **Meier, P** 2018, 'The Internet explosion, digital media principles and implications to communicate effectively in the digital space', *E-Learning and Digital Media*, vol. 15, no. 1, pp. 36-52.
31. Reyna Zeballos, J.L. & **Meier, P.**, Hanham, J 2018, 'A Framework for Digital Media Literacies for Teaching and Learning in Higher Education', **E-Learning and Digital Media**, vol. 15, no. 4.
32. Reyna Zeballos, J.L. & **Meier, P** 2018, 'Using the Learner-Generated Digital Media (LGDM) Framework in Tertiary Science Education: A Pilot Study', **Education Sciences**, vol. 8, no. 3, pp. 1-23.

As to strategic fit, the CM course has been taught within the Faculty of Science since 1994. The course has several research methods subjects within the curriculum and has a reasonable group of HDR students undertaking clinical and experimental projects across a variety of areas. We specialise in neuroscience (trans-magnetic cortical stimulation for example) and clinical aspects of acupuncture. We have a positive outcome for a multisite clinical trial publication coming out this year for tennis elbow pain and several publications already for 2019.

The CM group are at odds to understand how the decision was made by SMG concerning these three areas.

IR-1.3.

---

**From:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>

**Sent:** Monday, 15 July 2019 4:56 PM

**To:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>

**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As you know, the management of the Faculty of Science at UTS has recently been undertaking a review of the Traditional Chinese Medicine program. The review considered a range of information about the program, including staffing profiles, courses and teaching, student load, financial position within the faculty, course viability analyses, accreditation, benchmarking QILT, research training, research activity and productivity, external engagement, and TCM at other universities. Chinese Medicine staff had two opportunities to respond to the draft document, and their comments were received, considered and incorporated into the review where appropriate.

As part of the review, the Science Senior Management Group were then asked to support one of two options as a recommendation to the Provost:

- Discontinuation of the program at UTS
- Build up the program

The Senior Management Group acknowledged the length of time the program has run, the high quality of the students, the excellent QILT outcomes, and their respect of their colleagues. However, based on the program's poor financial viability, research productivity, and strategic fit within Science, the outcome of the discussion was a majority vote to phase out/discontinue the program.

Whilst no final decision is made prior to the formal process in accordance with the UTS Award Course Approval Policy and Procedures, I wish to provide as much transparency as possible and will continue to communicate with staff, students and other stakeholders as we are able. We will provide a further update after the Faculty Board meeting to be held later in July.

The university acknowledges the uncertainty staff are currently dealing with. Staff are encouraged to utilise support as needed via UTS Human Resources, our partner being Raelene La Ferla, and/or our UTS Employee Assistance Program support provider, PeopleSense (1300 307 912). Note, we are also looking at providing individual support to you and your colleagues during this process and I will be in touch with more details on this soon.

Thank you once again for your contributions and professionalism through this review process.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

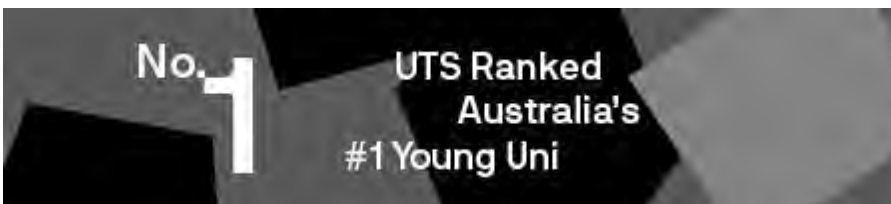
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Xianqin Qu](#)  
**To:** [Christopher Zaslowski](#)  
**Subject:** RE: Background to meeting with Dean at noon  
**Date:** Thursday, December 6, 2018 10:28:50 AM

---

Hi, Chris,

I would like you to share my publications and external research funding income. IR-1.2.

Xianqin

Publications:

1. Chen H, Eileen M McGowan EM, Ren N, Lal S, Nassif N, Fatima Shad-Kaneez F, Qu X and Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. Biomarker Insights. 2018, Volume 13: 1–8
2. Ong M, J Cheng, Lao M, Tan Y Jonson M, Qu X. Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of [Cytochrome P450 17A1 expression](#) in primary murine theca cells. Journal of ethnopharmacology. 2019, 229: 97-103
3. Tan Y, Kim J, Cheng J, Ong M, Lao W, Qu X. Green tea polyphenols ameliorate non-alcoholic fatty liver disease through upregulating AMPK activation in high fat fed Zucker fatty rats. World J Gastroenterol 2017; 23: 3805-3814
4. Lees T, Nassif N, Simpson A, Shad-Kaneez F, Martiniello-Wilks R, Lin Y, Jones A, Qu X, Lal S. [Recent advances in molecular biomarkers for diabetes mellitus: a systematic review.](#) Biomarkers 2017 Nov; 22:604-613. doi: 10.1080/1354750X.2017.1279216
5. Kamal M, Shakil S, Nawaz MS, Yu QS, Tweedie D, Tan T, Qu X, Greig NH. (2017) Inhibition of Butyrylcholinesterase with Fluorobenzylcymserine, an experimental Alzheimer’s drug candidate: validation of enzoinformatics results by classical and innovative enzyme kinetic analyses. CNS & Neurological Disorders - Drug Targets. **2017**, Vol. 16, No. 3:1-8.
6. Teng B, Jie Peng J, Ong M, Qu X. Successful Pregnancy after Treatment with Chinese Herbal Medicine in a 43-Year-Old Woman with Diminished Ovarian Reserve and Multiple Uterus Fibrosis: A Case Report. *Medicines* 2017, 4, 7 doi:10.3390/medicines4010007.
7. Ong M, Peng J, Jin X, Qu X. (2017) Targeting Insulin Resistance to Treat the Underlying Basis of Polycystic Ovary Syndrome with Chinese Herbal Medicine. Am. J Chin. Med. 2017, 45: 405–422

External research funding income:

1. Collaborative research grant from Suzhou Red Cross Hospital, Jiangsu Province, China (\$15,000, 2016)
2. Collaborative research grant from Second Affiliated Hospital of Wenzhou Medical University (\$25,000, 2017-2018)
3. Department of Industry, Innovation and Science and Corncord Health Group for project “Effects and Mechanisms of *Antrodia Cinnamomea* Extract for Non-alcoholic Fatty Liver Disease, POCS and Cancer” (\$80,000, 2018)
4. Collaborative research for clinical trial on Chinese herbal medicine for type 2 diabetes from Tasly Pharmaceuticals, China (\$425,000, 2018-2020)
5. Phase II for Department of Industry, Innovation and Science and Corncord Health Group for

project (\$100,000, 2019)

---

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>

**Sent:** Thursday, 6 December 2018 9:51 AM

**To:** Sean Walsh <Sean.Walsh@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Carolyn Michael <Carolyn.Michael@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Weihong Li <Weihong.Li-1@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>

**Subject:** Background to meeting with Dean at noon

Dear all

Just to give you some background to the meeting today (12-1pm) regarding the review of the course. I have not been given an agenda but I guess the Dean will want to explore the four options he is planning to put together and get your perspectives on these. These are 1) Stay in Science and make changes (financial??) to the course 2) transfer to faculty of Health if they accept us 3) transfer students to another program in Sydney eg WSU 4) teach out the course. (these options were told to me verbally but nothing in writing)

The reasons behind the review are 1) financial cost of the course 2) research 3) fit within the faculty (again told to me verbally). I responded to the Dean via email specifically on these points last week (see below). Bill consulted the Provost and a decision was made to delay the "the submission of the options paper to the end of February. This allows for consultation with staff to occur between December and February."

As you know I submitted the 2018 Chinese medicine status report to him as well and this has slowed the review process. I also submitted five letters of support from Chinese community and professional organisations. We will have an intake of domestic students next year (but not sure about international of which there are 14 that have applied to join the program next year).

Please feel free to raise any points of discussion during the meeting and I will see you in the Dean's boardroom at 12 noon.

Thanks Chris

### **Email sent to the Dean**

#### **Financial feasibility**

Under Section 43 of the Health Practitioner Regulation National Law (NSW) the UTS Chinese medicine program is accredited by an external accreditation committee established by the Chinese Medicine Board of Australia. This required the UTS program to be assessed

according to the national accreditation standards. The program was subsequently assessed and accredited in 2017 with one condition and four monitoring conditions, by far the least of any of any of the other five accredited programs in Australia. One aspect of accreditation is that student clinical training is required to meet several of the accreditation standards. The curriculum was designed to embed a clinical component in every semester. This has led to increased costs for some of the clinical subjects especially the final year 12 credit point subjects Clinical Practice 1 (99630) and Clinical Practice 2 (99631). These subjects however are offset by service fees generated from the clinical activities (approx. \$220,000/yr gross). Furthermore an analysis of the teaching costs spreadsheet has shown incorrect staffing assumptions (the costs of a staff member on long service leave in addition to the casual replacement costs were included in several subjects), an error of approximately \$100,000.

### **Research**

While a small discipline in number in comparison to the other larger three disciplines in SoLS, the CM discipline staff has over the last two years (2017-2018) produced 25 peer reviewed publications (See listing) including one randomised clinical trial. I believe as a discipline we are meeting our workload research outcomes.

### **Fit within the Faculty**

The CM program has been within the Faculty of Science for the last 24 years. At that time the CM staff chose the Faculty of Science since the focus was on developing evidence based medicine and upskilling staff with research qualifications. I believe to this extent this has been done. We apply an evidence based approach to research (experimental, clinical trials, surveys, systematic literature reviews) and the program includes two subjects specifically on evidence based approaches to research (Evaluating TCM: Theory, Practice & Research 1 and 2 9999614 and 99615). The discipline as a whole embraces the scientific method to explain how acupuncture and Chinese medicine affects physiological processes in the human body and evaluates the clinical efficacy using randomised clinical trials. The CM program includes four biomedical subjects shared with Medical Science and Pre-Medicine major students. We also teach a core subject for the Pre-Medicine and Pharmaceutical major students (Clinical Features of Disease 99584).

### **Publications (2017-2018)**

1. **Zheng, S**, Kim, C, Lal, S, **Meier, P**, Sibbritt, D & **Zaslowski, C** 2018, 'The Effects of Twelve Weeks of Tai Chi Practice on Anxiety in Stressed But Healthy People Compared to Exercise and Wait-List Groups-A Randomized Controlled Trial.', *Journal of Clinical Psychology*, vol. 74, no. 1, pp. 83-92. (IF 2.330).
2. Choi T-Y, Lee MS, Kim JI, **Zaslowski C** (2017) Moxibustion for the treatment of osteoarthritis: An updated systematic review and meta-analysis. *Maturitas* 100:33-48 Jun 2017 (IF 2.9)
3. McCambridge AB, **Zaslowski C** and Bradnam LV. The effect of verum and sham acupuncture on corticomotor excitability in healthy adults *Clinical Neurophysiology* 129 (2018) e66–e141. (IF 3.614) doi:10.1016/j.clinph.2018.04.301 (IF 3.6)
4. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) The effects of a structured mindfulness program on the development of empathy in healthcare



students. *NursingPlus Open* Volume 3, 2017, Pages 1–5. (IF 2.11)

5. Shohreh Razavy; Shi Ping Zhang; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap and **Christopher Zaslowski**; (2017) Psychophysical responses in patients receiving a mock laser within context of an acupuncture clinical trial: An Interoceptive perspective; *BMC Complementary and Alternative Medicine* DOI 10.1186/s12906-017-1859-0 (IF 2.10)
6. Oh B, Eade T, Kneebone A, Hruby G, Lamoury G, Pavlakis N, Clarke S, **Zaslowski C**, Marr I, Costa D, Back M. Acupuncture in Oncology: The Effectiveness of Acupuncture May Not Depend on Needle Retention Duration. *Integr Cancer Ther*. 2018 Jun;17(2):458-466. doi: 10.1177/1534735417734912 (IF 2.65; quartile 1, 11/103)
7. Sue Dean, **Sean Walsh**, Claire Williams, **Chris Zaslowski**, Adam Morgan, Tracy Levett-Jones. The mystery shopper student learning experience in undergraduate health education: A case study. *Nurse Education Today* 70 (2018) 69–76. (IF 2.53; quartile 1, 6/133)
8. Popplewell M, Reizes J, **Zaslowski C**. Appropriate Statistics for Determining Chance-Removed Interpractitioner Agreement. *J Altern Complement Med*. 2018 May 31. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
9. Lee HW, Lee MS, Kim TH, Alraek T, **Zaslowski C**, Kim JW, Moon DG Cochrane Urology draft protocol - Ginseng versus placebo for erectile dysfunction (2017) DOI: 10.1002/14651858.CD012654
10. Caroline A Smith, **Christopher J. Zaslowski**, Suzanne Cochrane, Xiaoshu Zhu, Zhen Zheng, **Bertrand Loyeung**, **Peter C Meier**, **Sean Walsh**, Charlie Changli Xue, Anthony L. Zhang, Paul P Fahey, Alan Bensoussan (2017) Reliability of the NICMAN Scale: an instrument to assess the quality of acupuncture administered in clinical trials. *Evidence Based Complementary and Alternative Medicine* doi:10.1155/2017/5694083 (IF 1.93)
11. **Loyeung B**, Lee J, **Michaeil C**, **Zaslowski C**. An experimental study in distinguishing an authentic herbal substance from sham herbal substances. *Complement Ther Med*. 2018 Aug;39:92-96. doi: 10.1016/j.ctim.2018.04.005. Epub 2018 Apr 11. (IF 1.54; quartile 1, 9/103)
12. Popplewell M, Reizes J, **Zaslowski C**. Consensus in Traditional Chinese Medical Diagnosis in Open Populations. *J Altern Complement Med*. 2018 Mar 1. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
13. **Zheng S**, Kim C, **Meier P**, Sibbritt D and **Zaslowski, C**. (2017) Development of a novel questionnaire for the TCM pattern diagnosis of stress. *Journal of Acupuncture and Meridian Studies* Doi: 10.1016/j.jams.2017.06.002 (IF 1.02)

14. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) Mindfulness in Physical and Occupational Therapy Education and Practice: A Scoping Review *Physical Therapy Reviews* doi.org/10.1080/10833196.2017.1341594
15. Shohreh Razavy, Shi Ping Zhang, Ph.D; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap, **Christopher Zaslowski**. Investigation of the phenomenon of Propagated Sensation along the Channels (PSCs) in the upper limb following administration of acupuncture and mock laser (2017) *Journal of Acupuncture and Meridian Studies* DOI: 10.1016/j.jams.2017.06.007 (IF 1.02)
16. Oh B, Yeung A, Klein P, Larkey L, Ee C, **Zaslowski C**, Knobf T, Payne P, Stener-Victorin E, Lee R, Choi W, Chun M, Bonucci M, Lang HD, Pavlakis N, Boyle F, Clarke S, Back M, Yang P, Wei Y, Guo X, Weng CD, Irwin MR, Elfiky AA, Rosenthal D. Accreditation Standard Guideline Initiative for Tai Chi and Qigong Instructors and Training Institutions. *Medicines (Basel)*. 2018 Jun 8;5(2). pii: E51. doi: 10.3390/medicines5020051 (IF unknown)
17. **Eldson DS**, Spanswick S, **Zaslowski C**, **Meier PC**. (2017) Protocol: Testing the relevance of acupuncture theory in the treatment of myofascial pain in the upper trapezius muscle. *Journal of Acupuncture and Meridian Studies* (2017), doi: 10.1016/j.jams.2016.11.007. (IF 1.02)
18. Xiao H, **Zaslowski C**, Vardy J, Oh B. Treatment of Sciatica Following Uterine Cancer with Acupuncture: A Case Report. *Medicines (Basel)*. 2018 Jan 15;5(1). pii: E6. doi: 10.3390/medicines5010006 (IF unknown)
19. Julia E. Oh, **Sean Walsh** and **Chris Zaslowski** (2018) A 10 year comparison and update: A survey of the socio-demographics and practice characteristics of members of the Australian Acupuncture and Chinese Medicine Association Ltd. *Australian Journal of Acupuncture and Chinese Medicine*, 12 (10), 19-25. (IF unknown; quartile 4, 90/103)
20. Razavy S, Gadau M, Zhang SP, Wang FC, Bangrazi S, Berle C, Li T, **Li WH, Zaslowski C**. Anxiety related to De Qi psychophysical responses as measured by MASS: A sub-study embedded in a multisite randomised clinical trial. *Complement Ther Med*. 2018 Aug;39:24-35. doi: 10.1016/j.ctim.2018.05.009. Epub 2018 May 22 (IF 1.49; quartile 1, 9/103)
21. Yu, XF, **Zaslowski C** and Lim DCE. (2018) Vitamin D on glycaemia control in type 2 diabetes patients: a systematic review of randomised clinical Trials. *Journal of the Australian Traditional Medicine Society*, 13 (2), p. 82-88. (IF unknown; quartile 4, 98/103)
22. Choi, Y.B., Cobbin, D. & **Walsh, S**. 2018, 'Does Modern Research Concerning Chinese Medicine Acupoints Relate to Original Prescriptions? If Not, Why Not?', *Medical*

Acupuncture. <https://doi.org/10.1089/acu.2018.1300>

23. Popplewell M, Reizes J, **Zaslowski C**. 2018, 'A Novel Approach to Describing Traditional Chinese Medical Patterns: The Traditional Chinese Medical Diagnostic Descriptor', *Journal of Alternative and Complementary Medicine* <https://doi.org/10.1089/acm.2018.0065> 2018. (IF 1.498)

24. McCambridge AB, **Zaslowski C**, Bradnam LV. Investigating the mechanisms of acupuncture on neural excitability in healthy adults\_Neuroreport. 2018 Nov 1. doi: 10.1097/WNR.0000000000001159 (IF 1.26)

25. **Weihong Li** Experience and discussion on Chinese medicine teaching and training (English language as an example) for foreign students.; *Hebei Journal of Traditional Chinese Medicine*, June 2017, Vol 39, No.6;

In addition Ass Prof Qu has contributed to four publications as a member of the Chronic Diseases team during this period.

26. **Lees, T., Nassif, N., Simpson, A.**, Shad-Kaneez, F., **Martiniello-Wilks, R., Lin, Y., Jones, A., Qu, X. & Lal, S.** 2017, 'Recent advances in molecular biomarkers for diabetes mellitus: a systematic review.', *Biomarkers*, pp. 1-13.

27. Ong, M., Peng, J., Jin, X. & **Qu, X.** 2017, 'Chinese Herbal Medicine for the Optimal Management of Polycystic Ovary Syndrome.', *Am J Chin Med*, vol. 45, no. 3, pp. 405-422.

28. **Ong M**, Cheng J, Jin X, Lao W, Johnson M, Tan Y, **Qu X**. 2018 'Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of cytochrome P450 17A1 expression in primary murine theca cells.' *J Ethnopharmacol*, vol. 229, pp. 97-103. doi: 10.1016/j.jep.2018.09.006.

29. Chen H, McGowan EM, Ren N, Lal S, Nassif N, Shad-Kaneez F, **Qu X**, Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. *Biomark Insights*. 2018 Jul 5;13:1177271918785130. doi: 10.1177/1177271918785130.

**From:** [Mary Garvey](#)  
**To:** [Christopher Zaslawski](#)  
**Cc:** [Sean Walsh](#); [Shuai Zheng](#)  
**Subject:** Re: Background to meeting with Dean at noon  
**Date:** Thursday, December 6, 2018 10:42:44 AM

---

Dear Chris,

Could not resist looking in to see if there was an agenda or any details about the meeting today.

My feeling is that:

1: UTS must decide whether or not it wants to keep its nationally accredited health practitioner program.

Simple yes or no.

Yes leaves options 1 and 2.

No leaves options 3 and 4.

2. No - no further discussion required. (Students can transfer themselves to other programs, and as I understand it UTS is obliged to teach out the remainder of its discontinued programs.)

3. Yes - the Faculty must come up with something more concrete than 'fit', and wobbly financial figures if we are to achieve a better fit and / or financials.

If you don't mind I'll contact you tomorrow?

I promised I would contact you anyway in December so we could meet to talk about <sup>s.2.1.3.</sup>   


If anything more urgent after meeting, phone or WeChat is fine.

Good luck and best wishes,  
Mary

Dr Mary Garvey, PhD  
Senior Lecturer  
UTS | Science | SoLS | CM | CB04.06.330  
mary.garvey@uts.edu.au | 61 2 95147851

Co-author, Chief Editor English: *Traditional Chinese Medicine Basic Theory*, 2018, World Publishing Corporation, Shanghai

Chief Editor English: *Anecdotes of Traditional Chinese Medicine: A Bilingual Extracurricular Reader for Traditional Chinese Medicine*, 2016, Shanghai Science and Technology Publishers;  
Re-released 2018, World Scientific Publishing, Singapore <http://bit.ly/anec-tcm>

Author: *A Clinical Guide to the Body in Chinese Medicine: History and Contemporary Practice*, 2015, Paradigm Publications, <<http://www.redwingbooks.com/sku/BodChiMed-E>>.

---

**From:** Christopher Zaslowski

**Sent:** Thursday, 6 December 2018 9:51:02 AM

**To:** Sean Walsh; Nancy Morgan; Shuai Zheng; Carolyn Michael; Mary Garvey; Xianqin Qu; Dale Elsdon; Weihong Li; Chunlin Zhou; Huiling Yao

**Subject:** Background to meeting with Dean at noon

Dear all

Just to give you some background to the meeting today (12-1pm) regarding the review of the course. I have not been given an agenda but I guess the Dean will want to explore the four options he is planning to put together and get your perspectives on these. These are 1) Stay in Science and make changes (financial??) to the course 2) transfer to faculty of Health if they accept us 3) transfer students to another program in Sydney eg WSU 4) teach out the course. (these options were told to me verbally but nothing in writing)

The reasons behind the review are 1) financial cost of the course 2) research 3) fit within the faculty (again told to me verbally). I responded to the Dean via email specifically on these points last week (see below). Bill consulted the Provost and a decision was made to delay the "the submission of the options paper to the end of February. This allows for consultation with staff to occur between December and February."

As you know I submitted the 2018 Chinese medicine status report to him as well and this has slowed the review process. I also submitted five letters of support from Chinese community and professional organisations. We will have an intake of domestic students next year (but not sure about international of which there are 14 that have applied to join the program next year).

Please feel free to raise any points of discussion during the meeting and I will see you in the Dean's boardroom at 12 noon.

Thanks Chris

### **Email sent to the Dean**

#### **Financial feasibility**

Under Section 43 of the Health Practitioner Regulation National Law (NSW) the UTS Chinese medicine program is accredited by an external accreditation committee established by the Chinese Medicine Board of Australia. This required the UTS program to be assessed according to the national accreditation standards. The program was subsequently assessed and accredited in 2017 with one condition and four monitoring conditions, by far the least of any of the other five accredited programs in Australia. One aspect of accreditation is that student clinical training is required to meet several of the accreditation standards. The curriculum was designed to embed a clinical component in every semester. This has led to increased costs for some of the clinical subjects especially the final year 12 credit point subjects Clinical Practice 1 (99630) and Clinical Practice 2 (99631). These subjects however are offset by service fees generated from the clinical activities (approx. \$220,000/yr gross). Furthermore an analysis of the teaching costs spreadsheet has shown incorrect staffing assumptions (the costs of a staff member on long service leave in addition to the casual

replacement costs were included in several subjects), an error of approximately \$100,000.

### Research

While a small discipline in number in comparison to the other larger three disciplines in SoLS, the CM discipline staff has over the last two years (2017-2018) produced 25 peer reviewed publications (See listing) including one randomised clinical trial. I believe as a discipline we are meeting our workload research outcomes.

### Fit within the Faculty

The CM program has been within the Faculty of Science for the last 24 years. At that time the CM staff chose the Faculty of Science since the focus was on developing evidence based medicine and upskilling staff with research qualifications. I believe to this extent this has been done. We apply an evidence based approach to research (experimental, clinical trials, surveys, systematic literature reviews) and the program includes two subjects specifically on evidence based approaches to research (Evaluating TCM: Theory, Practice & Research 1 and 2 9999614 and 99615). The discipline as a whole embraces the scientific method to explain how acupuncture and Chinese medicine affects physiological processes in the human body and evaluates the clinical efficacy using randomised clinical trials. The CM program includes four biomedical subjects shared with Medical Science and Pre-Medicine major students. We also teach a core subject for the Pre-Medicine and Pharmaceutical major students (Clinical Features of Disease 99584).

### Publications (2017-2018)

1. **Zheng, S**, Kim, C, Lal, S, **Meier, P**, Sibbritt, D & **Zaslowski, C** 2018, 'The Effects of Twelve Weeks of Tai Chi Practice on Anxiety in Stressed But Healthy People Compared to Exercise and Wait-List Groups-A Randomized Controlled Trial.', *Journal of Clinical Psychology*, vol. 74, no. 1, pp. 83-92. (IF 2.330).
2. Choi T-Y, Lee MS, Kim JI, **Zaslowski C** (2017) Moxibustion for the treatment of osteoarthritis: An updated systematic review and meta-analysis. *Maturitas* 100:33-48 Jun 2017 (IF 2.9)
3. McCambridge AB, **Zaslowski C** and Bradnam LV. The effect of verum and sham acupuncture on corticomotor excitability in healthy adults *Clinical Neurophysiology* 129 (2018) e66–e141. (IF 3.614) doi:10.1016/j.clinph.2018.04.301 (IF 3.6)
4. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) The effects of a structured mindfulness program on the development of empathy in healthcare students. *NursingPlus Open* Volume 3, 2017, Pages 1–5. (IF 2.11)
5. Shohreh Razavy; Shi Ping Zhang; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap and **Christopher Zaslowski**; (2017) Psychophysical responses in patients receiving a mock laser within context of an acupuncture clinical trial: An Interoceptive perspective; *BMC Complementary and Alternative Medicine* DOI 10.1186/s12906-017-1859-0 (IF 2.10)
6. Oh B, Eade T, Kneebone A, Hruby G, Lamoury G, Pavlakis N, Clarke S, **Zaslowski C**, Marr I, Costa D, Back M. Acupuncture in Oncology: The Effectiveness of Acupuncture May Not Depend on Needle Retention Duration. *Integr Cancer Ther*. 2018 Jun;17(2):458-466. doi:

10.1177/1534735417734912 (IF 2.65; quartile 1, 11/103)

7. Sue Dean, **Sean Walsh**, Claire Williams, **Chris Zaslowski**, Adam Morgan, Tracy Levett-Jones. The mystery shopper student learning experience in undergraduate health education: A case study. *Nurse Education Today* 70 (2018) 69–76. (IF 2.53; quartile 1, 6/133)
8. Popplewell M, Reizes J, **Zaslowski C**. Appropriate Statistics for Determining Chance-Removed Interpractitioner Agreement. *J Altern Complement Med*. 2018 May 31. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
9. Lee HW, Lee MS, Kim TH, Alraek T, **Zaslowski C**, Kim JW, Moon DG Cochrane Urology draft protocol - Ginseng versus placebo for erectile dysfunction (2017) DOI: 10.1002/14651858.CD012654
10. Caroline A Smith, **Christopher J. Zaslowski**, Suzanne Cochrane, Xiaoshu Zhu, Zhen Zheng, **Bertrand Loyeung**, **Peter C Meier**, **Sean Walsh**, Charlie Changli Xue, Anthony L. Zhang, Paul P Fahey, Alan Bensoussan (2017) Reliability of the NICMAN Scale: an instrument to assess the quality of acupuncture administered in clinical trials. *Evidence Based Complementary and Alternative Medicine* doi:10.1155/2017/5694083 (IF 1.93)
11. **Loyeung B**, Lee J, **Michaeil C**, **Zaslowski C**. An experimental study in distinguishing an authentic herbal substance from sham herbal substances. *Complement Ther Med*. 2018 Aug;39:92-96. doi: 10.1016/j.ctim.2018.04.005. Epub 2018 Apr 11. (IF 1.54; quartile 1, 9/103)
12. Popplewell M, Reizes J, **Zaslowski C**. Consensus in Traditional Chinese Medical Diagnosis in Open Populations. *J Altern Complement Med*. 2018 Mar 1. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
13. **Zheng S**, Kim C, **Meier P**, Sibbritt D and **Zaslowski, C**. (2017) Development of a novel questionnaire for the TCM pattern diagnosis of stress. *Journal of Acupuncture and Meridian Studies* Doi: 10.1016/j.jams.2017.06.002 (IF 1.02)
14. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) Mindfulness in Physical and Occupational Therapy Education and Practice: A Scoping Review *Physical Therapy Reviews* doi.org/10.1080/10833196.2017.1341594
15. Shohreh Razavy, Shi Ping Zhang, Ph.D; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap, **Christopher Zaslowski**. Investigation of the phenomenon of Propagated Sensation along the Channels (PSCs) in the upper limb following administration of acupuncture and mock laser (2017) *Journal of Acupuncture and Meridian Studies* DOI: 10.1016/j.jams.2017.06.007 (IF 1.02)
16. Oh B, Yeung A, Klein P, Larkey L, Ee C, **Zaslowski C**, Knobf T, Payne P, Stener-Victorin E, Lee R, Choi W, Chun M, Bonucci M, Lang HD, Pavlakis N, Boyle F, Clarke S, Back M, Yang P, Wei Y, Guo

X, Weng CD, Irwin MR, Elfiky AA, Rosenthal D. Accreditation Standard Guideline Initiative for Tai Chi and Qigong Instructors and Training Institutions. *Medicines (Basel)*. 2018 Jun 8;5(2). pii: E51. doi: 10.3390/medicines5020051 (IF unknown)

17. **Eldson DS**, Spanswick S, **Zaslowski C**, **Meier PC**. (2017) Protocol: Testing the relevance of acupuncture theory in the treatment of myofascial pain in the upper trapezius muscle. *Journal of Acupuncture and Meridian Studies* (2017), doi: 10.1016/j.jams.2016.11.007. (IF 1.02)
18. Xiao H, **Zaslowski C**, Vardy J, Oh B. Treatment of Sciatica Following Uterine Cancer with Acupuncture: A Case Report. *Medicines (Basel)*. 2018 Jan 15;5(1). pii: E6. doi: 10.3390/medicines5010006 (IF unknown)
19. Julia E. Oh, **Sean Walsh** and **Chris Zaslowski** (2018) A 10 year comparison and update: A survey of the socio-demographics and practice characteristics of members of the Australian Acupuncture and Chinese Medicine Association Ltd. *Australian Journal of Acupuncture and Chinese Medicine*, 12 (10), 19-25. (IF unknown; quartile 4, 90/103)
20. Razavy S, Gadau M, Zhang SP, Wang FC, Bangrazi S, Berle C, Li T, **Li WH**, **Zaslowski C**. Anxiety related to De Qi psychophysical responses as measured by MASS: A sub-study embedded in a multisite randomised clinical trial. *Complement Ther Med*. 2018 Aug;39:24-35. doi: 10.1016/j.ctim.2018.05.009. Epub 2018 May 22 (IF 1.49; quartile 1, 9/103)
21. Yu, XF, **Zaslowski C** and Lim DCE. (2018) Vitamin D on glycaemia control in type 2 diabetes patients: a systematic review of randomised clinical Trials. *Journal of the Australian Traditional Medicine Society*, 13 (2), p. 82-88. (IF unknown; quartile 4, 98/103)
22. Choi, Y.B., Cobbin, D. & **Walsh, S**. 2018, 'Does Modern Research Concerning Chinese Medicine Acupoints Relate to Original Prescriptions? If Not, Why Not?', *Medical Acupuncture*. <https://doi.org/10.1089/acu.2018.1300>
23. Popplewell M, Reizes J, **Zaslowski C**. 2018, 'A Novel Approach to Describing Traditional Chinese Medical Patterns: The Traditional Chinese Medical Diagnostic Descriptor', *Journal of Alternative and Complementary Medicine* <https://doi.org/10.1089/acm.2018.0065> 2018. (IF 1.498)
24. McCambridge AB, **Zaslowski C**, Bradnam LV. Investigating the mechanisms of acupuncture on neural excitability in healthy adults. *Neuroreport*. 2018 Nov 1. doi: 10.1097/WNR.0000000000001159 (IF 1.26)
25. **Weihong Li** Experience and discussion on Chinese medicine teaching and training (English language as an example) for foreign students.; *Hebei Journal of Traditional Chinese Medicine*, June 2017, Vol 39, No.6;

In addition Ass Prof Qu has contributed to four publications as a member of the Chronic Diseases team during this period.

26. **Lees, T., Nassif, N., Simpson, A.,** Shad-Kaneez, F., **Martiniello-Wilks, R., Lin, Y., Jones, A., Qu,**



- X.** & **Lal, S.** 2017, 'Recent advances in molecular biomarkers for diabetes mellitus: a systematic review.', *Biomarkers*, pp. 1-13.
27. Ong, M., Peng, J., Jin, X. & **Qu, X.** 2017, 'Chinese Herbal Medicine for the Optimal Management of Polycystic Ovary Syndrome.', *Am J Chin Med*, vol. 45, no. 3, pp. 405-422.
28. **Ong M**, Cheng J, Jin X, Lao W, Johnson M, Tan Y, **Qu X.** 2018 'Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of cytochrome P450 17A1 expression in primary murine theca cells.' *J Ethnopharmacol*, vol. 229, pp. 97-103. doi: 10.1016/j.jep.2018.09.006.
29. Chen H, McGowan EM, Ren N, Lal S, Nassif N, Shad-Kaneez F, **Qu X**, Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. *Biomark Insights*. 2018 Jul 5;13:1177271918785130. doi: 10.1177/1177271918785130.

**From:** [Fiona Thomas](#)  
**To:** [Andrea Leigh](#); [Lesley Healy](#); [Raelene La Ferla](#); [William Gladstone](#)  
**Cc:** [Greg Welsh](#); [Frank Young](#)  
**Subject:** Re: Chinese Medicine  
**Date:** Friday, November 23, 2018 8:45:02 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[image008.png](#)  
[image009.png](#)

---

Yes ofcourse

Get [Outlook for Android](#)

---

**From:** William Gladstone  
**Sent:** Friday, November 23, 2018 8:43:26 AM  
**To:** Fiona Thomas; Andrea Leigh; Lesley Healy; Raelene La Ferla  
**Cc:** Greg Welsh; Frank Young  
**Subject:** RE: Chinese Medicine

Hi Fiona

Thanks, can I forward your email to Margaret Connolly to share with the Provost?

Cheers  
Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)






---

**From:** Fiona Thomas

**Sent:** Friday, 23 November 2018 8:34 AM

**To:** William Gladstone <William.Gladstone@uts.edu.au>; Andrea Leigh <Andrea.Leigh@uts.edu.au>; Lesley Healy <Lesley.Healy@uts.edu.au>; Raelene La Ferla <Raelene.LaFerla@uts.edu.au>

**Cc:** Greg Welsh <Greg.Welsh@uts.edu.au>; Frank Young <Frank.Young@uts.edu.au>

**Subject:** RE: Chinese Medicine

Hi Bill,

Regarding your question yesterday in relation to potential industrial implications arising from suspending enrolments for 2019. I have had a chat with Frank about this.

Under the Managing Change clause in the Enterprise Agreement one of the examples of a change requiring consultation prior to a decision being made includes *a reduction in students to a program that is likely to give rise to a reduction in staffing.*

We believe the CM program fits this category given one of the options being explored by UTS is to close the program.

*Scenario one – suspend enrolments 2019 – no intake*

If by 'suspend' we mean that there is no option at a later stage to accept students into a 2019 program (ie following consultation and a decision regarding the future of the program), then we risk the perception that the university has made a decision to close the program prior to consultation. If the staff and unions were to run this argument in an industrial context there would be merit to the argument and it is unlikely that UTS would win.

In terms of risk, this is really not a preferred option and also not consistent with the faculty's efforts to be transparent. It also has the potential for bad publicity and reputational damage.

*Scenario two – suspension with option to approve enrolments at a later stage*

If by "suspend" we mean that this scenario allows a suspension pending decision, with the option of approving a 2019 intake if the decision is to continue the program, is there a deadline on the suspension? and is that deadline a reasonable timeframe for the university to make a considered decision? If it is not then again the perception may be that we have pre-determined an outcome

*Scenario three – no suspension, applications accepted*

I believe this is the option that Peter is recommending to allow a considered consultation and decision making process. It is the lowest risk option in terms of industrial risk, change management and implementation.

Could you forward the draft options paper when you have drafted it so that we can determine what level of engagement we need to undertake with the union during this upcoming consultation.

Fi

**Fiona Thomas**

Manager, Organisational Change and Delivery,  
Human Resource Unit

T. +61 (02) 9514 1073

Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

[uts.edu.au](http://uts.edu.au)



UTS acknowledges the Gadigal People of the Eora Nation and the Boorooberongal People of the Dharug Nation upon whose ancestral lands our campuses now stand. We would also like to pay respect to the Elders both past and present, acknowledging them as the traditional custodians of knowledge for these lands.

---

**From:** William Gladstone

**Sent:** Friday, November 23, 2018 7:52 AM

**To:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Lesley

Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Cc:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Subject:** FW: Chinese Medicine

Dear all

Please see the email below from Peter Meier re the TCM options paper process. I will reply and address each of his points as far as I can.

Re the timeline, we have not been able to meet some of the milestones for this week, in particular the following:

	<b>Met with TCM team (include Xianqin Qu)</b>	<b>Outline high level timeline.</b>	<b>BG / AL</b>	<b>16 Nov 18</b>	
	Develop an Options Paper on the future of Traditional Chinese Medicine and provide to Provost for comment		BG	23 Nov 18	In progress
	Discuss the support staff in TCM may need during this process, with an emphasis on immediate needs	HRU to organise (Ray)	HRU / CZ / BG / AL	23 Nov 18	

I am meeting with the TCM team next Tuesday 27 Nov. I won't be able to finish the draft options paper and provide it to the Provost by today. And, we (ie Rae and I) will meet with Chris after the TCM team meeting to discuss support.

Thanks  
Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)





---

**From:** Peter Meier  
**Sent:** Thursday, 22 November 2018 2:13 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** RE: Chinese Medicine

Hi Bill,

I attach a copy of some figures request by Attila back in September FYI.

In light of the conversation we had, I am also enquiring in respect of the offers for 2019. Given the timeline you have outlined for a decision to be made by SEM in January after adequate consultation with TCM staff, there is an issue with current offers. As you know open day is on the 15th of December and we need to prepare. If TCM is to be discontinued with no intake for 2019, we would need to begin informing students on open day as they should have an opportunity to choose other options. There are also approximately 70 offers currently in play and those students would need to be contacted and informed that their course choice is no longer available as advertised and that they will need to seek other options. If there are students coming through InSearch or who deferred from previous years they will also need to be informed. Given the Faculty is facing a downturn in offers and enrolment numbers for 2019, it would appear that turning down 70 offers at this point to be less than prudent, given those numbers will not be absorbed by other courses in the current climate. As I also mentioned in our meeting a loss of student and staff numbers does not represent a cost saving in the way a loss of staff only might present.

My concern with the process at this point is that it is a little vague, especially in regards to allowing TCM to respond or input into the paper before it goes to SEM, especially in regards to the range of options such as including making budget savings and staying in the faculty; moving to health which has a different cost base to science and a similar band funding meaning that in the provosts model the TCM course may be financially viable in Health; changing the course structure to make it more viable or have a UG/Master 3+2 option; as well as other options to be explored. It will require time and discussion with staff and we need to outline a process. The last change management process involved multiple consultations and multiple re-workings of the documentation. If any option other than discontinuation is to be genuinely considered, then a disruption in the enrolment numbers and

income of the course would adversely affect any future changes.

The exclusion of TCM from the early round offers and involvement of HR, rightly or wrongly signals that the decision may have already been predetermined, especially as rumours of a TCM demise have been promulgated by various staff in the school for almost 18 months and this perception will need to be managed with staff. I also wonder at what point if any will current students be consulted as they could be considered stakeholders along with TCM staff.

I would suggest at this moment in time it would be best to proceed with a 2019 enrolment as normal and thereby fulfil our advertised commitments to incoming students. Moving to a quick kill order is not going to result in any short term budgetary benefit and I think that TCM staff and students should be given an appropriate time to consider and feedback into the options paper. Speaking for myself, I would like input into the paper before it goes to SEM or alternately if appropriate, provide a separate response to SEM that they should consider as part of their decision making process.

Peter

-----  
 Peter C Meier  
 Associate Dean (Teaching and Learning)  
 Faculty of Science

---

**From:** Doreen Borg **On Behalf Of** William Gladstone  
**Sent:** Monday, 19 November 2018 4:20 PM  
**To:** Bill Booth <[Bill.Booth@uts.edu.au](mailto:Bill.Booth@uts.edu.au)>; Alaina Ammit <[Alaina.Ammit@uts.edu.au](mailto:Alaina.Ammit@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Anthony Dooley <[Anthony.Dooley@uts.edu.au](mailto:Anthony.Dooley@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; Graham Nicholson <[Graham.Nicholson@uts.edu.au](mailto:Graham.Nicholson@uts.edu.au)>; Helen Hume <[Helen.Hume@uts.edu.au](mailto:Helen.Hume@uts.edu.au)>; Liz Harry <[Elizabeth.Harry@uts.edu.au](mailto:Elizabeth.Harry@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>; Peter Ralph <[Peter.Ralph@uts.edu.au](mailto:Peter.Ralph@uts.edu.au)>; William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** Chinese Medicine

Dear SMG,

The Provost has asked me to draft an options paper regarding the future of Chinese Medicine at UTS. This has arisen from the results of the recent Course Viability Analysis, research performance, and disciplinary fit in the future Faculty of Science.

I will be drafting the options paper and then consulting with the Chinese Medicine discipline group on this draft, after which the final paper will be sent to the Senior Executive Management (SEM) for consideration. The aim is to have this first consultation phase completed by the end of this year and for SEM to make a decision on the preferred option, ideally in January.

Once a decision on the preferred option has been made, there will be further consultation about how best to proceed with that option. Together with Andy, I will be working with HR on this to ensure that the appropriate level of consultation is undertaken and people are supported during a potentially uncertain time. I have briefed the incoming Dean, Dianne Jolley, about this.

It is important that I inform you about this now in case you are approached by someone, in which case, you can explain the process I've outlined above. However, unless approached, please treat this information as confidential at this stage.

Best regards

Bill

**Professor William Gladstone GAICD**

Interim Dean

**Faculty of Science**

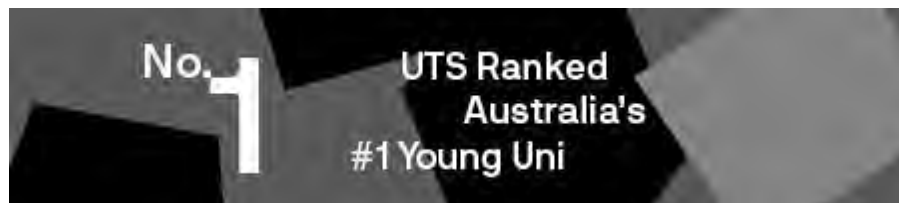
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)





**From:** [Greg Welsh](#)  
**To:** [Fiona Thomas](#); [William Gladstone](#); [Andrea Leigh](#); [Lesley Healy](#); [Raelene La Ferla](#)  
**Cc:** [Frank Young](#)  
**Subject:** RE: Chinese Medicine  
**Date:** Friday, November 23, 2018 10:48:05 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[image008.png](#)  
[image009.png](#)

---

I support Fiona and Frank's assessment of the scenarios, but (and apologies, this might be abundantly clear to everyone already) do want to point out that Scenario three is also not without its own negatives, if the eventual decision is to close the course, ie

- \* incoming students might argue that it was unethical of the university to accept them into a course that the university was actively considering closing
- \* an additional year of teach out (with attendant financial costs)

Best wishes  
Greg

---

**From:** Fiona Thomas  
**Sent:** Friday, 23 November 2018 8:34 AM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Cc:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>; Frank Young <[Frank.Young@uts.edu.au](mailto:Frank.Young@uts.edu.au)>  
**Subject:** RE: Chinese Medicine

Hi Bill,

Regarding your question yesterday in relation to potential industrial implications arising from suspending enrolments for 2019. I have had a chat with Frank about this.

Under the Managing Change clause in the Enterprise Agreement one of the examples of a change requiring consultation prior to a decision being made includes *a reduction in students to a program that is likely to give rise to a reduction in staffing.*

We believe the CM program fits this category given one of the options being explored by UTS is to close the program.

*Scenario one – suspend enrolments 2019 – no intake*

If by 'suspend' we mean that there is no option at a later stage to accept students into a 2019 program (ie following consultation and a decision regarding the future of the program), then we risk

the perception that the university has made a decision to close the program prior to consultation. If the staff and unions were to run this argument in an industrial context there would be merit to the argument and it is unlikely that UTS would win.

In terms of risk, this is really not a preferred option and also not consistent with the faculty's efforts to be transparent. It also has the potential for bad publicity and reputational damage.

*Scenario two – suspension with option to approve enrolments at a later stage*

If by "suspend" we mean that this scenario allows a suspension pending decision, with the option of approving a 2019 intake if the decision is to continue the program, is there a deadline on the suspension? and is that deadline a reasonable timeframe for the university to make a considered decision? If it is not then again the perception may be that we have pre-determined an outcome

*Scenario three – no suspension, applications accepted*

I believe this is the option that Peter is recommending to allow a considered consultation and decision making process. It is the lowest risk option in terms of industrial risk, change management and implementation.

Could you forward the draft options paper when you have drafted it so that we can determine what level of engagement we need to undertake with the union during this upcoming consultation.

Fi

**Fiona Thomas**

Manager, Organisational Change and Delivery,  
Human Resource Unit

T. +61 (02) 9514 1073

Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

[uts.edu.au](http://uts.edu.au)



UTS acknowledges the Gadigal People of the Eora Nation and the Boorooberongal People of the Dharug Nation upon whose ancestral lands our campuses now stand. We would also like to pay respect to the Elders both past and present, acknowledging them as the traditional custodians of knowledge for these lands.

**From:** William Gladstone  
**Sent:** Friday, November 23, 2018 7:52 AM  
**To:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Cc:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Subject:** FW: Chinese Medicine

Dear all

Please see the email below from Peter Meier re the TCM options paper process. I will reply and address each of his points as far as I can.

Re the timeline, we have not been able to meet some of the milestones for this week, in particular the following:

	<b>Met with TCM team (include Xianqin Qu)</b>	<b>Outline high level timeline.</b>	<b>BG / AL</b>	<b>16 Nov 18</b>	
	Develop an Options Paper on the future of Traditional Chinese Medicine and provide to Provost for comment		BG	23 Nov 18	In progress
	Discuss the support staff in TCM may need during this process, with an emphasis on immediate needs	HRU to organise (Ray)	HRU / CZ / BG / AL	23 Nov 18	

I am meeting with the TCM team next Tuesday 27 Nov. I won't be able to finish the draft options paper and provide it to the Provost by today. And, we (ie Rae and I) will meet with Chris after the TCM team meeting to discuss support.

Thanks  
 Bill

**Professor William Gladstone GAICD**  
 Interim Dean

**Faculty of Science**  
 University of Technology Sydney  
 T. +61 (02) 9514 8272  
 M. +61 (0) s.2.1.3.  
 PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)




---

**From:** Peter Meier  
**Sent:** Thursday, 22 November 2018 2:13 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** RE: Chinese Medicine

Hi Bill,

I attach a copy of some figures request by Attila back in September FYI.

In light of the conversation we had, I am also enquiring in respect of the offers for 2019. Given the timeline you have outlined for a decision to be made by SEM in January after adequate consultation with TCM staff, there is an issue with current offers. As you know open day is on the 15th of December and we need to prepare. If TCM is to be discontinued with no intake for 2019, we would need to begin informing students on open day as they should have an opportunity to choose other options. There are also approximately 70 offers currently in play and those students would need to be contacted and informed that their course choice is no longer available as advertised and that they will need to seek other options. If there are students coming through InSearch or who deferred from previous years they will also need to be informed. Given the Faculty is facing a downturn in offers and enrolment numbers fro 2019, it would appear that turning down 70 offers at this point to be less than prudent, given those numbers will not be absorbed by other courses in the current climate. As I also mentioned in our meeting a loss of student and staff numbers does not represent a cost saving in the way a loss of staff only might present.

My concern with the process at this point is that it is a little vague, especially in regards to allowing TCM to respond or input into the paper before in goes to SEM, especially in regards to the range of options such as including making budget savings and staying in the faculty; moving to health which has a different cost base to science and a similar band funding meaning that in the provosts model the TCM course may be financially viable in Health; changing the course structure to make it more viable or have a UG/Master 3+2 option; as well as other options to be explored. It will require time

and discussion with staff and we need to outline a process. The last change management process involved multiple consultations and multiple re-workings of the documentation. If any option other than discontinuation is to be genuinely considered, then a disruption in the enrolment numbers and income of the course would adversely affect any future changes.

The exclusion of TCM from the early round offers and involvement of HR, rightly or wrongly signals that the decision may have already been predetermined, especially as rumours of a TCM demise have been promulgated by various staff in the school for almost 18 months and this perception will need to be managed with staff. I also wonder at what point if any will current students be consulted as they could be considered stakeholders along with TCM staff.

I would suggest at this moment in time it would be best to proceed with a 2019 enrolment as normal and thereby fulfil our advertised commitments to incoming students. Moving to a quick kill order is not going to result in any short term budgetary benefit and I think that TCM staff and students should be given an appropriate time to consider and feedback into the options paper. Speaking for myself, I would like input into the paper before it goes to SEM or alternately if appropriate, provide a separate response to SEM that they should consider as part of their decision making process.

Peter

-----  
 Peter C Meier  
 Associate Dean (Teaching and Learning)  
 Faculty of Science

---

**From:** Doreen Borg **On Behalf Of** William Gladstone  
**Sent:** Monday, 19 November 2018 4:20 PM  
**To:** Bill Booth <[Bill.Booth@uts.edu.au](mailto:Bill.Booth@uts.edu.au)>; Alaina Ammit <[Alaina.Ammit@uts.edu.au](mailto:Alaina.Ammit@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Anthony Dooley <[Anthony.Dooley@uts.edu.au](mailto:Anthony.Dooley@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; Graham Nicholson <[Graham.Nicholson@uts.edu.au](mailto:Graham.Nicholson@uts.edu.au)>; Helen Hume <[Helen.Hume@uts.edu.au](mailto:Helen.Hume@uts.edu.au)>; Liz Harry <[Elizabeth.Harry@uts.edu.au](mailto:Elizabeth.Harry@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>; Peter Ralph <[Peter.Ralph@uts.edu.au](mailto:Peter.Ralph@uts.edu.au)>; William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** Chinese Medicine

Dear SMG,

The Provost has asked me to draft an options paper regarding the future of Chinese Medicine at UTS. This has arisen from the results of the recent Course Viability Analysis, research performance, and disciplinary fit in the future Faculty of Science.

I will be drafting the options paper and then consulting with the Chinese Medicine discipline group on this draft, after which the final paper will be sent to the Senior Executive Management (SEM) for

consideration. The aim is to have this first consultation phase completed by the end of this year and for SEM to make a decision on the preferred option, ideally in January.

Once a decision on the preferred option has been made, there will be further consultation about how best to proceed with that option. Together with Andy, I will be working with HR on this to ensure that the appropriate level of consultation is undertaken and people are supported during a potentially uncertain time. I have briefed the incoming Dean, Dianne Jolley, about this.

It is important that I inform you about this now in case you are approached by someone, in which case, you can explain the process I've outlined above. However, unless approached, please treat this information as confidential at this stage.

Best regards

Bill

**Professor William Gladstone GAICD**

Interim Dean

**Faculty of Science**

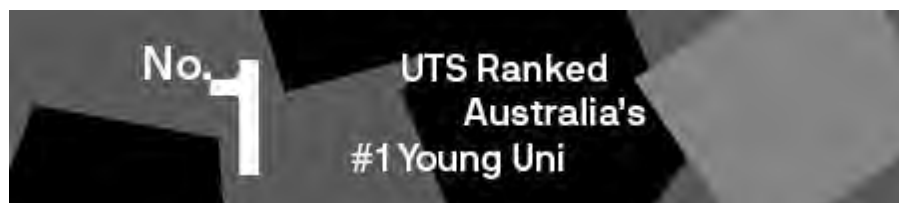
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** IR-1.3.  
**To:**  
**Cc:** Raelene La Ferla; William Gladstone; Peter Meier  
**Subject:** RE: Chinese medicine course - no intake for 2020  
**Date:** Thursday, May 9, 2019 11:19:35 AM

---

Dear all

I am following up on R-1.3. email on Monday evening regarding the 2020 intake. Unfortunately I am at IR-1.3. I was not aware that this was occurring without a decision on the viability of the CM program being made. Since R-1.3. email I have queried one of my colleagues here with me (casual lecturer) and he has told me all the CM students are aware of the status of the course and other UTS staff (technical) members has informally told him the "course is going". I think this is doing irreparable damage to the UTS course reputation (which had an increase in numbers this year) which has the best reputation in Australia. I also requested via Andy prior to s 2.1 3. that there should be some exploration of options (transfer to health and opportunity to meet with Dean, recosting of course within a reasonable time period etc). I also understand that the Health Strategy is being reinvigorated so this is an opportunity to explore such options. Chinese medicine has been registered within the National Regulation and Accreditation Scheme (NRAS) with 14 other health professions since 2012 and CM staff members have contributed to several regulatory bodies.

A response to this email would be much appreciated.

IR-1.3.

---

**From:** IR-1 3.  
**Sent:** Monday, 6 May 2019 11:46 PM  
**To:** IR-1.3.  
**Cc:** Raelene La Ferla <Raelene.LaFerla@uts.edu.au>; William Gladstone <William.Gladstone@uts.edu.au>; Peter Meier <Peter.Meier@uts.edu.au>  
**Subject:** Re: Chinese medicine course - no intake for 2020  
**Importance:** High

Dear IR-1.3.

IR-1.3. and I were politely confronted by students after class this evening, wanting answers to information they had received that UTS executive have told Science faculty not to intake students for 2020. The students heard that both domestic and international intakes have ceased from 2020.

Needless to say, I was mortified, put in an incredible difficult situation, and left aghast at a situation that I was less than prepared to confront alone without support from UTS, or at least from faculty executive... and certainly when operating in a void of information.

I do not wish to be in such an unsupported situation again - this is not correct and needs addressing. It is time for transparency - and certainly clear detailing of whatever transition arrangements/redeployment have been discussed for individual staff, the program and students.

Best wishes,

IR-1.3.





**From:** [William Gladstone](#)  
**To:** [Dean of Science TCM](#)  
**Subject:** RE: Chinese Medicine meeting (29/5) and communication to students  
**Date:** Thursday, June 13, 2019 9:58:00 AM  
**Attachments:** [image008.png](#)  
[image009.png](#)  
[image010.png](#)  
[image011.png](#)  
[image012.png](#)  
[image013.png](#)  
[image014.png](#)  
[image015.png](#)  
[image016.png](#)  
[image017.png](#)  
[image018.png](#)  
[image019.png](#)

---

Hi Kate

I don't know. I have amended the report and sent it to Dianne. I'll let you know as soon as I hear back.

Cheers  
Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

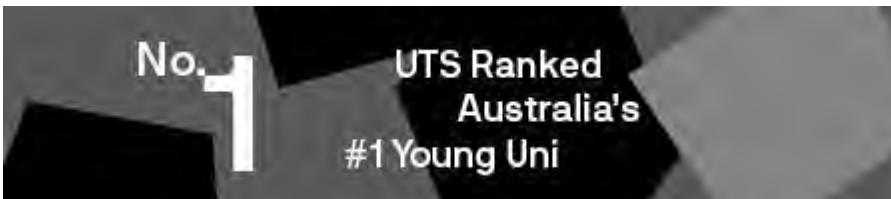
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>  
**Sent:** Thursday, 13 June 2019 9:52 AM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>  
**Subject:** FW: Chinese Medicine meeting (29/5) and communication to students

Hi Bill,

Just checking if the revised Status report has gone to Andrew yet, and if so, has it also gone to CM staff?

If it should be sent from this address (which would be good in terms of consistency I think), could I confirm the final distribution list with you before sending?

Thanks!  
Kate

---

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Monday, 10 June 2019 1:36 PM  
**To:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>  
**Cc:** William Gladstone <William.Gladstone@uts.edu.au>  
**Subject:** RE: Chinese Medicine meeting (29/5) and communication to students

Dear Dianne

Thanks for the copy of the PPT and the summarised minutes. It is much appreciated. Unfortunately it was sent to inappropriate persons identified in the last mass email (IR-12. [REDACTED]

[REDACTED] ) as these people are not Chinese medicine, have left employment at UTS or are guest lecturers for 1 or 2 lectures. If this could be rectified for any further mass emails it would be helpful and dampen anxiety and rumours circulating in the profession.

I have responded to Bill with comments to the final draft options paper and note

1. 205 UG students (with an additional 15 on leave of absence) enrolled in the two programs as of census Autumn semester 2019
2. 28 academic papers published (including one clinical trial and another to be published later this year) by the CM discipline in 2017-2018.
3. 6000 patient contacts in 2018 in the clinic which generated \$224,000
4. At least 18 HDR students undertaking research projects.
5. International collaboration with organisations such as WHO, ISO, several Korean and Chinese research organisations and universities.
6. National collaboration and work with national and state regulatory bodies, professional bodies and industry partners.

We are happy to make any required course changes (restructure for financial considerations) as suggested by Ass Dean T/L (Peter Meier) in the response options document submitted with Deputy

Dean's paper and hope you can support us in our endeavours.  
With thanks Chris

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>

**Sent:** Thursday, 6 June 2019 5:08 PM

**To:** <sup>IR-1.2.</sup> [REDACTED]; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Victoria Choi Bouavirone Choy <[Bobbie.Choi@uts.edu.au](mailto:Bobbie.Choi@uts.edu.au)>; <[Victoria.Choi@uts.edu.au](mailto:Victoria.Choi@uts.edu.au)>; Karen Bilton <[Karen.Bilton@uts.edu.au](mailto:Karen.Bilton@uts.edu.au)>; <[Karen.Bilton@uts.edu.au](mailto:Karen.Bilton@uts.edu.au)>; <sup>R-1.2.</sup> [REDACTED]

[REDACTED]; Heiji Cho <[Heiji.Cho-1@uts.edu.au](mailto:Heiji.Cho-1@uts.edu.au)>; Shail Lal <[Shailendra.Lal@uts.edu.au](mailto:Shailendra.Lal@uts.edu.au)>; Taryn Chalmers <[Taryn.Chalmers@uts.edu.au](mailto:Taryn.Chalmers@uts.edu.au)>; Shamona Maharaj <[Shamona.Maharaj@uts.edu.au](mailto:Shamona.Maharaj@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michael <[Carolyn.Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>

**Cc:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** Chinese Medicine meeting (29/5) and communication to students

Dear Chinese Medicine colleagues,

I'd like to acknowledge the contribution of Chinese Medicine staff to the revision of the draft Status Report and additional information provided since the update meeting I held with staff on 29 May.

The main points discussed at the update meeting on 29 May were;

- I opened the meeting and thanked everyone for their time.
- The deck (attached) was presented, explaining the process to date, options and next steps.
- Professor Suzanne Chambers (Dean, Faculty of Health) confirmed that Chinese Medicine would not transfer into the Faculty of Health based on non-alignment with their Faculty strategy.
- It was confirmed that the draft Status Report was given to the Provost in the third week of March, clearly communicated to him as a draft and subject to review by the Chinese Medicine Discipline Group before finalisation.
- Staff raised the perceived damage to the UTS reputation from the suspension of the undergraduate intake for the Traditional Chinese Medicine courses in 2020, and the impacts to students, research outcomes and the community if the discipline was to be discontinued at UTS.
- Input to the final version of the Status Report is due by June 5.

- Following consideration of the received input, the final Status Report will be submitted to the Provost early next week, and also provided to Chinese Medicine staff.

The presentation from the session is attached for your reference.

In addition, please be aware that I wrote to all undergraduate students in Traditional Chinese Medicine courses and graduate research students supervised by Chinese Medicine staff on June 5 to provide them with an update. The update informed them that a range of options are currently being considered in relation to the future study of Chinese Medicine at UTS and that UTS has suspended the intake of students into the undergraduate courses in 2020 while we consider the options. We have let students know that we remain committed to them completing their studies and entering into the workforce as professionals. We also confirmed that consultation with students and other stakeholders will be undertaken during this process.

Thank you once again for your contributions and professionalism through this review process.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

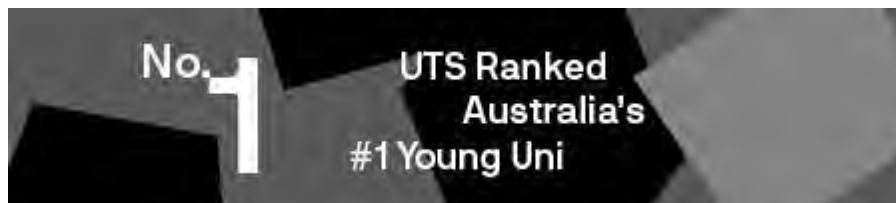
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Dean of Science TCM](#)  
**To:** [Emma King](#); [Bouvairone Choy](#); [Peter Meier](#); [Christopher Zaslowski](#); [Carolyn Michael](#); [Huiling Yao](#); [Weihong Li](#); [Dale Elsdon](#); [Shuai Zheng](#); [Mary Garvey](#); [Chunlin Zhou](#); [Nancy Morgan](#); [Sean Walsh](#); [Xianqin Qu](#); [Stella Valenzuela](#)  
**Cc:** [William Gladstone](#); [Raelene La Ferla](#)  
**Subject:** Chinese Medicine Status Report  
**Date:** Friday, June 14, 2019 4:58:30 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[CM status report final June2019.pdf](#)

---

Dear colleagues,

As promised, please see attached the final version of the Chinese Medicine Status Report prepared by Bill Gladstone. This report has undergone discipline consultation, and staff feedback has been considered and incorporated where appropriate. An additional document prepared by Peter Meier that reviews the options has also been compiled and has been added to the Status Report as an appendix.

I provided a hard copy of the Report to the Provost in person this afternoon. The Provost has asked that a further addendum be generated, synthesising the options suggested within the final version of the Report and a recommendation from SMG and myself. This will be progressed as a priority.

Thank you for your professionalism in engaging with the consultation process to date. I will be in contact once the Provost has had time to consider the submission and I am able to update you further.

Best regards,  
Dianne Jolley

**Professor Dianne Jolley**

Dean  
Faculty of Science  
University of Technology Sydney  
15 Broadway, ULTIMO NSW 2007  
W: [uts.edu.au](http://uts.edu.au)



**From:** [Dean of Science TCM](#)  
**To:** [Christopher Zaslowski](#)  
**Cc:** [William Gladstone](#); [Shuai Zheng](#); [Peter Meier](#)  
**Bcc:** [Dianne Jolley](#); [Theo Magoulas](#); [Lesley Healy](#); [Raelene La Ferla](#)  
**Subject:** RE: CM at UTS  
**Date:** Thursday, July 11, 2019 5:22:00 PM

---

Hi Chris,

Thank you for your email. My understanding is that we need to notify the Chinese Medicine Board if there has been a decision to change the program of study. Given that no decision has been made by the university and the curriculum has not changed I don't think we have overlooked any obligations.

I will follow-up to confirm.

Thank you again.

Best regards,  
 Di

---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 3:27 PM  
**To:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** FW: CM at UTS

Dear Dianne and Bill

I just received this email from the Chair of the accreditation committee regarding the online petition (now up to 8,283 persons). Under the national law the university is required to inform the Accreditation Committee of the Chinese Medicine Board of any changes to the curriculum or initial accreditation conditions. I imagine this would include the course going under review but more importantly the closure of course enrolments for next year. How should I respond? I also have a conflict of interest as I have just been reappointed to this committee and am not in position to respond.

Thanks Chris §.2.1.3.

**From:** Meeuwis Boelen <[IR-15](mailto:IR-15)>  
**Sent:** Thursday, 11 July 2019 1:56 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** CM at UTS

Hi Chris,

Don't let it spoil <sup>s.2.1.3.</sup> [REDACTED] but are you aware of this?

<https://www.change.org/p/chinese-medicine-please-save-our-chinese-medicine-clinic-course-at-uts>

Looking forward to catch up in November,  
Meeuwis

Meeuwis Boelen, PhD  
(AHPRA) Chair Chinese Medicine Accreditation Committee  
(AHPRA) Member Podiatry Accreditation Committee  
+61 <sup>s.2.1.3.</sup> [REDACTED]

**From:** [Theo Magoulas](#)  
**To:** [Dean of Science TCM](#); [Greg Welsh](#)  
**Cc:** [Dianne Jolley](#)  
**Subject:** RE: CM at UTS - Consultation / Legal question  
**Date:** Thursday, July 11, 2019 4:41:25 PM

---

Dear Dianne and Greg,

It looks to me that UTS does not have to notify the Chinese Medicine Board under the Health Practitioner Regulation National Law (NSW) until it has decided to change the program of study.

It appears in respect of accreditation that the Chinese Medicine Board only have the authority to monitor approved programs of study in accordance with section 50 copied below:

“50 Accreditation authority to monitor approved programs of study

(1) The accreditation authority that accredited an approved program of study must monitor the program and the education provider that provides the program to ensure the authority continues to be satisfied the program and provider meet an approved accreditation standard for the health profession.

(2) If the accreditation authority reasonably believes the program of study and education provider no longer meet an approved accreditation standard for the health profession, the accreditation authority must--

(a) decide to--

(i) impose the conditions on the accreditation that the accreditation authority considers necessary to ensure the program of study will meet the standard within a reasonable time; or

(ii) revoke the accreditation of the program of study; and

(b) give the National Board that approved the accredited program of study written notice of the accreditation authority's decision.”

The legislation is not clear on how an education provider notifies the accreditation authority or when it should notify the accreditation authority.

Regards

Theo

Theo Magoulas  
University Solicitor  
UTS - Legal Services  
University of Technology Sydney  
Level 18, Building 1, Broadway Campus  
(PO Box 123)  
BROADWAY NSW 2007, Australia



---

phone: +61 (2) 9514 9753; fax: +61 (2) 9514 1288  
email: [Theo.Magoulas@uts.edu.au](mailto:Theo.Magoulas@uts.edu.au)

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 3:53 PM  
**To:** Theo Magoulas <[Theo.Magoulas@uts.edu.au](mailto:Theo.Magoulas@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Cc:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Subject:** CM at UTS - Consultation / Legal question

Hi Theo,

Please see email below, just forwarded by the Head of TCM.

At what point of the process, if any, are we required to inform the Accreditation Committee of the Chinese Medicine Board?

No decision will be made until mid-September (at the earliest) and the curriculum has not changed however, it would be good to understand any upcoming obligations.

Hi Greg,

Once we receive feedback from Theo, I might ask you to review my drafted email response.

Kind rgds,  
Kate

---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 3:27 PM  
**To:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** FW: CM at UTS

Dear Dianne and Bill

I just received this email from the Chair of the accreditation committee regarding the online petition (now up to 8,283 persons). Under the national law the university is required to inform the Accreditation Committee of the Chinese Medicine Board of any changes to the curriculum or initial accreditation conditions. I imagine this would include the course going under review but more importantly the closure of course enrolments for next year. How should I respond? I also have a conflict of interest as I have just been reappointed to this committee and am not in position to respond.

Thanks Chris §.2.1.3.

**From:** Meeuwis Boelen <R-15>

**Sent:** Thursday, 11 July 2019 1:56 PM

**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

**Subject:** CM at UTS

Hi Chris,

Don't let it spoil <sup>s.2.1.3.</sup> [REDACTED], but are you aware of this?

<https://www.change.org/p/chinese-medicine-please-save-our-chinese-medicine-clinic-course-at-uts>

Looking forward to catch up in November,  
Meeuwis

Meeuwis Boelen, PhD

(AHPRA) Chair Chinese Medicine Accreditation Committee

(AHPRA) Member Podiatry Accreditation Committee

+61 <sup>s.2.1.3.</sup> [REDACTED]

**From:** IR-1.3  
**To:**  
**Subject:** Re: CM Discipline meeting tomorrow cancelled  
**Date:** Monday, November 26, 2018 5:33:58 PM

---

Hi Chris,

This is not a well thought out process and far from best practice without consideration to well-being and future planning - however, it is consistent with the previous happenings (officially and otherwise) with whatever agenda is at play and further to the lack of consultation. Given the nature of the discussions, more people should have been consulted alot sooner.

I am pleased I did not end up cancelling IR-1.2 tomorrow, that was also scheduled at the meeting time -

Best wishes,

R-1.3

---

**From:** Christopher Zaslowski  
**Sent:** Monday, 26 November 2018 4:19:01 PM  
**To:** Dale Elsdon; Carolyn Michael; Nancy Morgan; Shuai Zheng; Weihong Li; Sean Walsh; Xianqin Qu  
**Subject:** CM Discipline meeting tomorrow cancelled

Dear all

The meeting tomorrow with the Dean has been cancelled and will be rescheduled the following week. He needs to consult the Provost regarding the timeline.

Cheers  
Chris

## Status of Traditional Chinese Medicine in the UTS Faculty of Science

### Background

In 1994 Traditional Chinese Medicine moved from Acupuncture Colleges (Australia) to UTS, and in 1995 moved to the Faculty of Science. The courses initially taught included a 3.5 year undergraduate degree in acupuncture and a 2-year Masters by coursework program in Chinese herbal medicine. In 2000 the acupuncture and Chinese herbal medicine programs were combined to form a 4-year undergraduate course that covered both acupuncture and Chinese herbal medicine. Two undergraduate courses are currently offered: Bachelor of Health Science in Traditional Chinese Medicine, and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years). Staff and students have provided a public-facing Traditional Chinese Medicine Clinic at UTS since 1994 that also acts as a teaching facility for students in all years of the undergraduate courses.

The discipline of Traditional Chinese Medicine was re-named Chinese Medicine in 2015 with the formation of the new School of Life Sciences, and it is currently a Discipline Group in the School of Life Sciences with a Discipline Group leader (Associate Professor Chris Zaslowski). As a Discipline Group Leader, Associate Professor Zaslowski is a member of the School Executive. The courses taught by staff in the Chinese Medicine Discipline Group are called 'Traditional Chinese Medicine' and so for consistency throughout this paper the combination of staff, teaching, research, and the clinic operations will collectively be referred to as ~~Traditional Chinese Medicine (TCM)~~.

Elsewhere at UTS, research and research training in aspects of traditional Chinese medicine occur in the Faculty of Health in the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM). The Centre also does projects in a range of other complementary therapies. The collective group of researchers from CM group and ARCCIM were assessed in the 2019 ERA National Report under the FOR code of Complementary and Alternative Medicine as 4 (above world average). Within universities in NSW, traditional Chinese medicine exists only at Western Sydney University (WSU - Bachelor of Traditional Chinese Medicine) in the School of Science and Health. While nationally the RMIT university also offers a five year combined program (Bachelor of Health Science and Bachelor of Applied Science - Chinese Medicine).

Currently, Chinese medicine is a registered health profession under the Health Practitioner Regulation National Law (the National Law) as in force in each state and territory and the National Registration and Accreditation Scheme (the National Scheme) supported by the Australian Health Practitioner Regulation Agency (AHPRA). Chinese medicine has been regulated since 2012 and the course is currently accredited with the Chinese Medicine Board of Australia.

More recently the Australian Government has recognised the value of CM to the Australian environment and the signed Australia-China Trade agreement (Free Trade Agreement between the Government of Australia and the Government of the People's Republic of China, 2015) incorporated specific statements and requirements into the World Trade agreement.

2. Each Party, where possible, will encourage the relevant bodies in its territory to develop, where possible, mutually acceptable standards and criteria for licensing and certification, and to provide recommendations to the Committee on Trade in Services on mutual recognition with

**Commented [CZ1]:** I would prefer the term Chinese medicine as the course, and practitioners utilise evidence based decision making. TCM is a term coined in China in the 1970s and many universities in China do not use the term anymore.

**Commented [WG2R1]:** I have amended to CM except where the text specifically refers to the courses or subjects (because they have TCM in their names).

**Formatted:** Highlight

**Commented [WG3]:** Included in the research section; however, CM research from FoS represented only 16% of the submission to ERA

**Commented [WG4]:** This is covered later in the document

**Formatted:** Highlight

**Commented [WG5]:** This is covered later in the document

**Formatted:** Highlight

**Commented [WG6]:** Not relevant to UTS consideration of CM at UTS.

respect to service sectors mutually agreed by the Parties, including engineering and Traditional Chinese Medicine.

ARTICLE 8.15: QUALIFICATIONS RECOGNITION COOPERATION

This report will inform thinking and decisions about options for the future of Traditional Chinese Medicine at UTS. It is a response to several strategic pressures: the results of the 2018 UTS Course Viability Analysis and internal Faculty financial analysis (provided later in this report); the strategic imperative (via UTS 2027) for UTS and the Faculty of Science to evolve from being research-active to research-intensive and the potential for Traditional Chinese Medicine to contribute to this; the need for continual improvement in the Faculty's overall financial position and efficiency of its operations; and consideration of the disciplinary fit of Traditional Chinese Medicine (with courses that graduate complementary health professionals) with the Faculty of Science.

#### Staff

In 2018 there were 21 staff employed as: 9 continuing academics; 3 fixed-term academics; 7 casual academics; and 2 casual professional staff. These staff represent 12.6 FTE. The 12.6 FTE includes Associate Professor Xianqin Qu (who teaches in the TCM courses but is a member of the Medical Science Discipline Group in the School of Life Sciences) and Associate Professor Peter Meier (Associate Dean (Teaching and Learning), with a substantive appointment in the TCM discipline).

The 12 academic staff employed in fixed-term or continuing academic positions represented academic staff levels A (Associate Lecturer) to D (Associate Professor) and Clinical Educator, who had been employed for periods from <sup>IR-1.2</sup> (Figure 1). These staff included <sup>IR-1.2</sup>

R-1.2

In 2018 nineteen of the 24 TCM-specific subjects required casual academics to assist with teaching. Twenty-seven different individuals were employed as casuals for a total of 500 hours and a total cost (including oncosts) of <sup>IR-2.1.5</sup>.

Average TCM staff workloads in 2018 (for the nine continuing and three fixed-term academics) reported in the Faculty's workload calculators were: 60% teaching, 19% research, and 21% management/engagement. By comparison, the average workloads across all other academics in the Faculty of Science were: 22% teaching, 58% research, and 20% management/engagement. The distribution of workload across the three categories for TCM staff differs from the average workload profile of the rest of the Faculty of Science because of: 42% of TCM academics were employed as teaching only (i.e. the fixed-term academics and the clinical educators); two staff performed leadership roles (Meier, Zaslowski); and there were no research intensive academic staff.

**Commented [CZ7]:** How will the options be offered? Will the CM discipline see the options??

**Commented [WG8R7]:** Please prepare a doc of your responses to the options (that were presented by Dianne at meeting on 29 May) and it will be attached, along with any other documents you wish, to the revised status report that will be submitted to the Provost.

**Commented [CZ9]:** Registered Health Practitioners rather than complimentary health professionals

**Commented [WG10R9]:** changed

**Commented [CZ11]:** I only calculated 9.6 FTE. Was <sup>IR-2.1.3</sup> included in this as <sup>IR-2.1.3</sup>

. In real terms neither were teaching in to the program and casual/ staff were utilised to cover their teaching. This makes the staff look inflated.

**Commented [WG12R11]:** Based on data provided by HR. <sup>IR-2.1</sup> status not relevant to size of staff group.

**Formatted:** Font: 11 pt

**Formatted:** Font: 11 pt, Not Italic

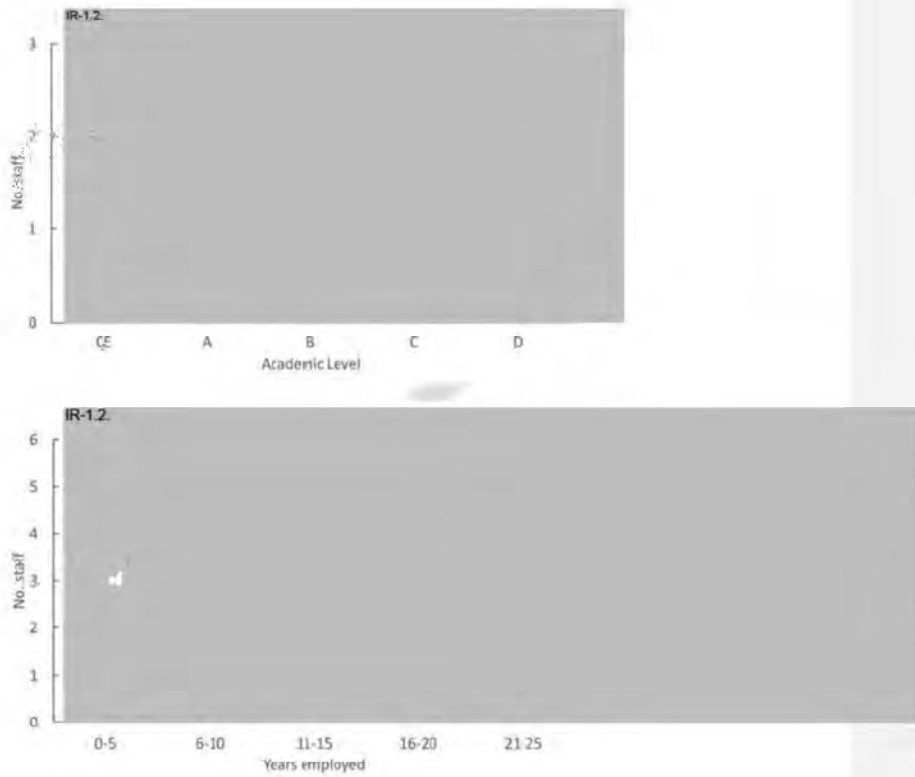


Figure 1. Profile of academic staff (fixed-term and continuing) employed in the TCM discipline at the end of January 2019: (a) academic level (CE Clinical Educator; A Associate Lecturer; B Lecturer; C Senior Lecturer; D Associate Professor); (b) years employed at UTS.

### Courses and Teaching

The following courses are offered:

- Bachelor of Health Science in Traditional Chinese Medicine (4-years)
- Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years)

Throughout the 4-year Bachelor of Health Science in Traditional Chinese Medicine course TCM students complete 30 subjects representing 192 credit points (Table 1 Table 4). These subjects represent 24 TCM-specific subjects, 5 non-TCM subjects offered by the Faculty of Science, and 1 non-TCM subject offered by the Faculty of Health. The 4-year course is prescribed i.e. there are no elective subjects.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Three TCM subjects were taken by students enrolled in other courses during 2018: Chinese Medicine Foundations 1 (3.5 EFTSL), Clinical Practice 1 (0.5 EFTSL), and Clinical Features of Disease (2.9 EFTSL).

The five non-TCM subjects offered by the Faculty of Science and taken by TCM students include: (i) Human Anatomy and Physiology, a first-year core subject for all students enrolled in a course in the life sciences stream, (ii) Physiological Systems, a core subject in the Bachelor of Medical Science, Bachelor of Biomedical Engineering, and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science, Infection and Immunity majors), (iii) Human Pathophysiology, a core subject in the Bachelor of Medical Science and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science majors); (iv) Neuroscience, a core subject in the Bachelor of Medical Science; and (v) Clinical Features of Disease, a core subject in the Pre-Medicine major in the Bachelor of Advanced Science.

The TCM subjects are delivered via a variety of modes including lectures, practicals, clinic, workshop or tutorial. Currently, no TCM subjects are delivered in the Summer session. The clinic-based training (in the TCM Clinic), commences in Autumn session of first-year in both courses. The number of clinic-based teaching hours increases in each year of the courses, delivered across eight clinical subjects. Students complete a total of 1000 clinical hours throughout their course.

Commented [CZ13]: This has now been reduced to 975 hours

Commented [WG14R13]: Changed to 945 to reflect actual teaching hours provided.

As part of their clinical education TCM students can elect to do a six-week clinical placement in a hospital in China (affiliated with the Chengdu University of Chinese Medicine) or South Korea (affiliated with Dong Eui University). These arrangements are supported by MoUs with both institutions. This opportunity is taken-up by 50-75% of final-year students. The overseas placements are self-funded by each student, although some financial assistance is provided through UTS Build and Colombo Plan (for students meeting the age requirement).

In comparison with other courses in the Faculty of Science, the majority (24/30 subjects i.e. 80%) of subjects in the TCM course are TCM-discipline subjects. This level of specificity is required to meet the external accreditation requirements because the majority of outcomes required for accreditation are specific to TCM practice. The large component of clinical teaching also provides a relevant learning experience that distinguishes the UTS TCM course from other courses. While this level of specificity provides a unique and intensive, discipline-based teaching experience it results in the teaching being resource intensive, and also leads to inefficiencies when the number of enrolled students is low and there are few opportunities to offer subjects that are also of interest and relevant to non-TCM students in, for example, biomedical or medical science courses. The clinical training however is an excellent example of authentic learning with assessment also being conducted under real life circumstances.

Commented [CZ15]: Currently we offer several subjects as electives. These are  
1. Chinese Medicine Foundations 1  
2. Clinical Features of Disease

Commented [WG16R15]: Included in revised report.

Commented [WG17]: Included above after sentence on total clinic hours

For ~~other courses~~ the School of Life Sciences uses a model of co-taught subjects and sharing of resources to optimise efficiency, whilst maintaining differentiation among courses. As a result, most courses have 20-30% unique subjects. These other courses also have greater enrolments, which further increases the efficiency of teaching.

DRAFT



Table 1. Structure of the Bachelor of Health Science in Traditional Chinese Medicine. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject and <sup>2</sup> Faculty of Science non-TCM subjects.

First Year	Credit points	Subject code
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease <sup>2</sup>	6	99584
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Clinic Level 6	6	99647
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Evaluating TCM: Theory, Practice and Research 2	6	91615
Clinical Practice 2 (TCM)	12	99631

**Commented [SZ18]:** This should not be considered a non-TCM science subject, but rather this subject is a CM coordinated subject which was originally designed to meet AHPRA accreditation and registration requirements. Non CM Science students in particular the advanced science pre-medicine stream are enrolled into this subject recently as it was incorporated into their program. Since all costs for this subject are directly debited from CM accounts, CM team is taking costs on behalf of other science teaching.

**Commented [WG19R18]:** Table revised to show this as a CM subject

Table 2. Structure of the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies combined degree. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject, <sup>2</sup> Faculty of Science non-TCM subjects, and <sup>3</sup> Faculty of Arts and Social Sciences subjects.

First Year	Credit points	Subject code
<b>Autumn Session</b>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<b>Spring Session</b>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<b>Autumn Session</b>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<b>Spring Session</b>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<b>Autumn Session</b>		
Chinese Language and Culture 1 <sup>3</sup>	8	91701
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<b>Spring Session</b>		
Medical Classics and the History of Chinese Medicine	6	91510
Clinical Practicum (Therapy and Diagnosis)	6	91611
Chinese Language and Culture 2 <sup>3</sup>	8	97102
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<b>Autumn Session</b>		
Clinical Features of Disease <sup>2</sup>	6	99584
Chinese Language and Culture 3 <sup>3</sup>	8	97103
Foundations in International Studies <sup>3</sup>	8	976001
<b>Spring Session</b>		
Chinese Language and Culture 4 <sup>3</sup>	8	97104
Contemporary China <sup>1</sup>	8	976111
Clinic Level 6	6	99647
<b>Fifth Year</b>		
<b>Autumn Session</b>		
In-country Study 1: China <sup>3</sup>	24	977110
<b>Spring Session</b>		
In-country Study 2: China <sup>3</sup>	24	978110
<b>Sixth Year</b>		
<b>Autumn Session</b>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<b>Spring Session</b>		
Professional Issues in Traditional Chinese Medicine	6	91613
Clinical Practice 2 (TCM)	6	99631
Evaluating TCM: Theory, Practice and Research 2	6	91615

Throughout the 6-year Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies students complete 38 subjects (Table 2), including 24 TCM subjects, 5 non-TCM subjects offered by the Faculty of Science, 1 non-TCM subject offered by the Faculty of Health, and 8 subjects offered by the Faculty of Arts and Social Science. The combined degree is structured so that students complete the majority of the TCM subjects in years 1-3, a mix of TCM and international studies subjects in year 4, a year of in-country study in China in year 5, and the remainder of the TCM course in year 6.

Formatted: Font: Not Italic

#### Student Load

At the ~~March 27<sup>th</sup> 2019~~ ~~August 2018~~ there were 176 enrolled students in TCM courses, representing 165 students in the Bachelor of Health Science in Traditional Chinese Medicine and 11 students in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies. The total taught EFTSL was 129.1, including 123.4 Commonwealth supported places and 5.7 international fee-paying places<sup>3</sup>.

Commented [CZ20]: According to SAU data received this week we have 240 students in total.

Formatted: Superscript

Commented [CZ21]: 223 according to SAU data

Commented [CZ22]: 17 according to SAU data

The total number of commencing students in the TCM courses has declined annually from the peak of 79 in 2015 (Table 3) and the taught EFTSL represented by all TCM students has declined from 167.3 in 2015 to 128 in 2018 (Table 4).

Commented [WG23]: The student load data used here is complete for 2018 after the census dates. The 2018 data was also the basis for the financial analysis.

Commented [CZ24]: It actually went up in 2019- not down. According to the current figures from SAU we have 65 in the first year of the CM program and 3 in the double degree totalling 68.

Commented [WG25R24]: The table has been updated to show the latest commencing numbers.

Table 3. Number of commencing students between 2014 and 2019 in the Bachelor of Health Science in Traditional Chinese Medicine (B Health Sc TCM) and Bachelor of Health Science in Traditional Chinese Medicine / Bachelor of Arts in International Studies (B Health S TCM + B AIS).

	2014	2015	2016	2017	2018	2019
B Health Sc TCM	50	74	64	59	48	65
B Health Sc TCM + B AIS	4	5	10	3	7	21
Total	54	79	74	62	55	86

Commented [SZ26]: We also originally had 15 international students seeking to enrol in 2019, however due to this review process many students have opted not to study with UTS. This is a major damage to UTS with agents and the international student base.

Formatted: Font: 11 pt

Formatted: Font: 11 pt. Not Italic

Commented [CZ27]: These need to be adjusted to reflect the current numbers.

Commented [WG28R27]: The numbers in the table are whole year (after both census dates) and so there is not a final data set for 2019 yet. I will add a sentence to reflect this.

Formatted: Font: 11 pt

Formatted: Font: 11 pt. Not Italic

Table 4. Total taught EFTSL of TCM students in subjects owned by the Faculty of Arts and Social Sciences (FASS), Faculty of Health (Health), Faculty of Science that are not TCM subjects (Science (non-TCM)), and in TCM subjects (TCM), for the Bachelor of Health Science in Traditional Chinese Medicine and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

	2014	2015	2016	2017	2018
FASS	2.2	2.5	0.5	0.7	1.7
Health	5.6	4.0	5.0	7.1	4.1
Science (non-TCM)	19.7	22.4	18.0	15.4	15.1
TCM	127.5	138.4	135.2	121.0	107.1
Total	155.0	167.3	158.7	144.2	128.0

<sup>3</sup> These numbers differ slightly from the numbers in Table 4 because of rounding of numbers in each row contributing to the total.

Formatted: Font: Not Italic

**Financial Position: Faculty-level Analysis**

The Faculty's financial analysis of TCM is shown in Table 5. The financial analysis includes taught load income (Commonwealth Supported Places, and international fee-paying), income from TCM clinic, direct expenses (salary and NSI), and indirect expenses (UTS overheads, and Faculty-allocated overheads). §2.15.

Formatted: Font: 11 pt  
Formatted: Font: 11 pt, Not Italic

[Redacted]

Of the 29 subjects delivered by the Faculty of Science in the TCM course, 21 subjects (72%) are classified as Cluster 3, 7 subjects (24%) are classified as Cluster 7 and one subject (3%) is classified as Cluster 8.

The UTS overhead costs were based on the information used in the 2018 Course Viability Analysis. The Faculty-based overheads were attributed based on staff FTE. The largest cost items were direct costs (salaries and NSI, estimated to be \$<sup>2.1.5</sup>) UTS central overhead costs (\$<sup>2.1.5</sup>) and the Faculty overhead costs. §2.15.

[Redacted] The net financial position was an estimated deficit of \$1.483M at the end of 2018. §2.15.

Commented [WG29]: Not included because this is shown in the table.

**Course Viability Analysis**

The first Course Viability Analysis (CVA) was done in 2018 as a part of the Business Model Strategy. The intention was for the CVA to support informed decisions on the closure, subsidisation or retention of undergraduate and postgraduate courses. The CVA approach was to fully match non-research net costs to teaching revenues for all UTS courses using data for 2017, and to incorporate indicators of quality alongside the financial indicators.

§2.15. [Redacted]

Commented [CZ30]: Cant read appendix 1

Commented [WG31R30]: A higher resolution figure now used.

[Redacted]

§ 2.15.

The CVA also assessed five indicators of course quality that covered student performance, student experience and graduate feedback. The five indicators were: success rate, retention rate, student satisfaction with quality, graduate satisfaction with course, and graduate satisfaction with teaching. An index was calculated for each indicator, which was the reported result divided by the national average (i.e. a course that performed better than the national average would have an index value >1). Each indicator was weighted as a measure of its relative importance. The weighted indexes for the five indicators were summed to produce a Course Quality Index. A Course Quality Index >1 is a positive result relative to the national average, and an Index of <1 is a negative result. Each course was assessed for its net profitability (described in the previous paragraph) and Course Quality Index by plotting on XY axes (Figure 2/ Figure 2).

The performance of the two TCM courses combined in the CVA is shown in Figure 2/ Figure 2. The position of the TCM courses at the bottom left of the graph indicates a large negative net profit margin and an overall Course Quality Index below the national average benchmark (shown as 1 on the graph).

**Commented [WG32]:** Not included, it is known from the CVA model and report.

**Commented [CZ33]:** Several staff eg Dr Shuai Zheng and this year Dr Sean Walsh do cross teach into other programs including Science subjects.

**Commented [WG34R33]:** Text revised

**Commented [CZ35]:** What year were they drawn from?

**Commented [WG36R35]:** 2017 data for UTS and national benchmarks from the Student Experience Survey and the Graduate Outcomes Survey. I have added a sentence to explain this in the paragraph following Fig 2.

**Formatted:** Font: 11 pt

**Formatted:** Font: 11 pt, Not Italic

**Formatted:** Font: 11 pt

**Formatted:** Font: 11 pt, Not Italic

Table 5. Financial analysis of TCM based on student load income at the August 2018 census (provided by J Maddalena, Faculty Finance partner).

<u>Income</u>	<u>EFTSL</u>	<u>Income \$ Source</u>
<b>Commonwealth Supported Places</b>	\$ 2.15	
TCM Subjects taught within TCM Courses		2018 August Census
TCM Subjects taught within Non-TCM Courses		2018 August Census
Non-TCM Subjects taught within TCM Courses		2018 August Census
<b>International Fee Paying (and Other)</b>		
TCM Subjects taught within TCM Courses		2018 August Census
TCM Subjects taught within Non-TCM Courses		2018 August Census
Non-TCM Subjects taught within TCM Courses		2018 August Census
<b>Total Taught EFTSL/Income</b>		
<b>Total Enrolled Student Headcount</b>		2018 August Census
<b>Expenses</b>		<b>Source</b>
TCM Academic Salary Expenses (Operating)		2019 Budget
Acupuncture Casual Academic Costs		2019 Budget
Chinese Medicine Casual Academic Costs		2019 Budget
<b>Total Staff FTE/Costs</b>		
Operating NSI 0226049		2018 Actuals
Operating NSI 0226086		2018 Actuals
Operating NSI 0226392		2018 Actuals
<b>Total Salary &amp; NSI Expenses</b>		
Income (Clinical Services & Fees)		2018 Actuals
<b>Net Direct Expenses</b>		
Indirect Faculty Costs (by FTE)		2019 FTE applied to 2018 Budget Model
Indirect Faculty Costs (by EFTSL)		2018 EFTSL applied to 2018 Budget Model
<b>Total Indirect Faculty Costs</b>		
Indirect Central Overhead Costs		2018 Taught Load applied Provost's CVA Estimate
<b>Total Indirect Costs</b>		
<b>Net Result at UTS Level</b>		<b>(1,483,718)</b>



Figure 2. Graphical summary of the results of the Course Viability Analysis for courses in the Faculty of Science with an enrolled student load >50 EFTSL. The calculation and interpretation of the net profit margin and quality index are explained in the text. B Health Science is the combined result for the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

The TCM courses had a Course Quality Index of 0.84. This overall below average result was driven by below average results for the Graduate Satisfaction with Course (0.807) and Graduate Satisfaction with Teaching (0.535), and the higher weightings for these indexes (25%) compared to the other indexes. The other indexes were close to, or at, national average values: Success Rate (1.011, 15% weighting), Retention Rate (1.042, 15% weighting), and Student Satisfaction with Quality (0.969, 20% weighting).

**Commented [SZ37]:** This graph is skewed and missing data, such as the B Science in Analytics, B Biomedical Physics? As such this is not a correct representation of the CM program in Science.

**Commented [WG38R37]:** The results for the CVA were grouped by size of course. The results in this graph are for courses with >50 EFTSL. The results for the other courses you mention are shown on different graphs in the CVA report. The complete financial results for the Faculty's courses are shown in Table 1.

**Commented [SZ39]:** According to 2017 Course Performance Report results, CM has the highest overall satisfaction results for all science degrees. This includes responses from domestic and international students

**Commented [WG40R39]:** The results reported in this paragraph are for the CVA analysis. The CPR results are discussed in the following section on Internal Accreditation. The 2017 CPR shows that the course with the highest overall score in the Faculty of Science was B Medical Science/BA International Studies (4.56). The overall score for B Health Sci TCM was 2.24.

**Accreditation: Internal**

Courses at UTS are approved for periods of five years via the Award Course Approval and Reaccreditation Policy and the Award Course Approval and Reaccreditation Procedures. The depth and extent of the approval process depend on the previous performance of the course, and courses with a record of good performance require a 'short reaccreditation' process. The UTS Courses Accreditation Committee recommended (after a Short Reaccreditation process during 2016) that the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies be re-accredited for 2017-2021. This recommendation was approved by Academic Board in July 2016.

The UTS Curriculum Performance Report reviews all UTS courses and subjects against a set of benchmarks determined by the Provost and Deputy Vice-Chancellor (Education & Students). The indicators (determined for courses and subjects) used in the CPR are designed to link course performance with UTS KPIs. The CPR provides an assessment of the performance of courses and subjects relative to the indicators and highlights areas requiring action to address issues that have been identified.

The Bachelor of Health Science in Traditional Chinese Medicine was included on the Outstanding Courses List for 'consecutive excellent ratings and improving over two or more years' in the 2014 and 2015 Curriculum Performance Reports.

The Bachelor of Health Science in Traditional Chinese Medicine received an overall rating of Green each year in its annual Course Performance Reports for 2015-17. Specific indicators that were also Green each year included: UAC preferences 1-3 to total preferences; student load; success rate; and attrition rate. Average salary of graduates was Green in 2017 and 2015. There have been no consistent issues (indicated by a Red rating) over these three years, with timetabled hours/EFTSL flagged as Red in 2017 and 2015.

The Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies received Green assessments annually in the Course Performance Reports for 2015-17 for Success Rate, and for two of three years for UAC preferences 1-3 to total preferences. No indicator was flagged with a Red warning in every year, however SFS for student satisfaction was flagged Red in 2015 and 2016 (and was Green in 2017). Student Load and Attrition moved from Red to Green over 2015 to 2017.

All TCM subjects have been learning.futures certified, and XX% of TCM subjects have been peer-reviewed (awaiting data from Peter Meier).

**Accreditation: External**

The TCM courses are accredited externally by the Australian Health Practitioner Regulation Agency (AHPRA). Graduates are eligible for professional ~~membership~~ registration as a health practitioner with the Chinese Medicine Board of Australia (CMBA) within AHPRA, (<http://www.handbook.uts.edu.au/courses/c10164.html>). Graduates are ~~accredited~~ registered to practice at a Chinese herbal medicine, dispensing and acupuncture practice, and eligible for membership with the relevant professional associations (<https://www.uts.edu.au/future-students/find-a-course/bachelor-health-science-traditional-chinese-medicine>).

**Commented [CZ41]:** Why are there so contrasting metrics between the Curriculum Performance Report and the preceding CVA model?

**Commented [WG42R41]:** The CVA used a different metrics (ie externally gathered) to quantify quality, and also applied weightings to the different indexes to indicate their relative importance.

**Commented [WG43]:** Peter has provided the information that all Science-owned TCM subjects have been peer reviewed.

**Commented [SZ44]:** UTS CM program is one the few programs in all of Australia that has no conditions. This sets UTS CM program as the gold standard according to external government accreditation. This is the same government agency which controls the registration of Medical doctors, Pharmacists and dentists.

**Commented [WG45R44]:** I have not seen any documentation to corroborate this statement re the conditions.



The external accreditation requires that students achieve a number of outcomes, and the majority of these are specific to the discipline and practice of TCM. The structure of the TCM course reflects, in large part, these requirements. The two TCM courses were accredited by AHPRA in December 2017 with one condition and 4 monitoring conditions. The responses to these conditions were reported in November 2018 and the accreditation committee's decision ~~removed the one condition and four monitoring conditions, will be released in March~~. The Accreditation Committee does not accredit courses for a defined period of time, instead undertaking monitoring (via requested reports) of the education provider (i.e. UTS) and the course<sup>2</sup>.

#### Benchmarking: QILT

In the Quality Indicators of Learning and Teaching (QILT) TCM is classified in the Health Services and Support study area. The other UTS courses included within this study area are: Bachelor of Health Science; Bachelor of Human Movement; and Bachelor of Sport and Exercise Science. In the Student Experience Survey 2016 and 2017 (Table 6), UTS courses in Health Services and Support were close to the national average in all areas of Student Experience, exceeded the national average in two areas of Graduate Satisfaction (Overall Satisfaction, Teaching Scale), and below the national average in full-time employment. The combination of TCM and other UTS courses covered by this study area means that it is not possible to directly report the QILT results for the TCM courses.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not italic

Table 6. Summary of the Student Experience Survey 2016 and 2017 outcomes for the Health Services and Support area (undergraduate) at UTS and compared to the national average (Source: www.qilt.edu.au).

		UTS	National av
Student Experience	Overall quality of educational experience	77.9%	80.6%
	Teaching quality	81.8%	82.8%
	Learner engagement	64.7%	64.5%
	Learning resources	84.5%	84.1%
	Student support	70.0%	73.0%
	Skills development	83.2%	81.5%
Graduate Satisfaction	Overall satisfaction	85.5%	80.3%
	Teaching scale	71.0%	65.7%
	Skills scale	80.6%	82.8%
Graduate Employment	Full-time employment	64.1%	72.1%
	Overall employment	88.0%	89.8%
	Full-time study	49.3%	23.4%

<sup>2</sup> Australian Health Practitioner Regulation Agency / Chinese Medicine Board of Australia (2017) Chinese Medicine accreditation process (Australian Health Practitioner Regulation Agency, Melbourne).

### Research Training

Of the 12 continuing or fixed-term academic staff in TCM, four are supervising HDR students as principal supervisor, six are not acting as a principal supervisor of a HDR student, and <sup>§2.1.2</sup> current HDR students.

At the end of 2018 there were 27 (headcount) HDR students enrolled in TCM-related MSc (research) or PhD projects. These HDR students consisted of <sup>§2.1.2</sup> and <sup>§2.1.5</sup>

There have been no HDR commencement in 2019 so far.

The annual number of TCM HDR students completing has been: 4 in 2015, 1 in 2016, 1 in 2017, and 3 in 2018.

### Research<sup>3</sup>

TCM undertakes research, mainly human clinical research but also some profession focused research. This is undertaken by four fulltime academic staff and the 28 HDR students. Currently there are nine randomised clinical trials (RCTs) being developed, conducted or reported in peer reviewed journals. These are acupuncture and tennis elbow pain, Chinese herbal medicine and insomnia, acupuncture and cancer pain, acupuncture and mental stress in university students, acupuncture and hot flushes in breast cancer patients, vitamin D in reducing DM risks and acupuncture and osteoarthritic knee pain and male potency following radical prostatectomy and qigong and well-being. In the past, TCM has undertaken RCTs for taiji and stress, acupuncture and hepatitis C, acupuncture and post-traumatic stress disorder and acupuncture and male subfertility.

TCM staff and HDR students are also undertaking experimental human studies including transcranial magnetic stimulation, pain challengers e.g. pressure pain threshold and thermal thermography. TCM staff and students undertake survey research projects such as referral between medical, allied health and TCM practitioners, adverse event profile of Chinese herbal medicine, clinical outcomes implementation for acupuncture and Chinese medicine and the use of the Chinese herb qingdai for eczema. Other projects are evaluating the safety of moxa smoke, clinical reasoning, professional communication, acupuncture needling sensations, radial and carotid artery tonometry, Parkinson's disease symptomology, a delphi study on osteoarthritic knee pain, transcriptome analysis of Chinese herbs on human squamous cancer cell line and a critical classical medical literature review.

Finally there are several educational projects on student empathy and enablement, collaborative learning experiences, technologies and civic virtues, linguistic analysis of Chinese medicine clinical interaction and student visualization in education. In total there are 33 research projects currently being undertaken by TCM academic staff and HDR students.

TCM researchers (in total) attracted external research grant income of \$10,000-\$64,000 p.a. between 2014 and 2018, representing <1% of the total external research income awarded to the Faculty of Science (Table 7/7). None of this external grant income was classified as Category 1 grant income. This annual grant income was awarded to one TCM academic in 2014 and 2015, three TCM academics in 2016, six TCM academics in 2017, and two TCM academics in 2018. Over this

<sup>3</sup> The first three paragraphs describing the research being done in TCM were provided by C Zaslawski.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

same time period TCM academic staff represented 2.3-4.9% of total academic staff in the Faculty of Science.

Table 7. Total external research grant income awarded to researchers in TCM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-18.

	TCM	FoS	TCM % FoS	% TCM staff
2014	\$10,000	\$11,123,023	0.09%	3.0
2015	\$10,000	\$13,347,000	0.07%	2.9
2016	\$65,000	\$16,244,000	0.40%	2.3
2017	\$39,495	\$16,666,505	0.24%	4.9
2018	\$64,064	\$19,492,936	0.33%	NA

**Commented [CZ46]:** Xiangqin QU has reported that she gained \$79,999 in 2018 (SZ15) and a clinical trial project \$425,000 (WG47R46) and \$10,000 has been paid to UTS (see 2016 Dec report).

**Commented [WG47R46]:** The figures are correct and have been double-checked by Lisa Merry. The figures in the table show the actual income received, which can differ from the amount awarded in the grant. While the Innovations Connection grant was for \$80,000, at the end of 2018 \$64,131 had been received for that project in total (\$20,000 in 2017 and \$44,131 in 2018).

The total annual weighted publication points of TCM researchers varied between 0.70 and 5.27 (Table 8), representing 0.3-2.1% of the total for the Faculty of Science.

Table 8. Total weighted publication points for researchers in TCM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-17 (2018 publication data not yet finalized).

	TCM	FoS	TCM % FoS	% TCM staff
2014	3.29	227.66	1.4	3.0
2015	0.70	238.35	0.3	2.9
2016	3.04	273.41	1.1	2.3
2017	5.27	249.86	2.1	4.9

**Formatted:** Font: 11 pt

**Formatted:** Font: 11 pt, Not Italic

**Commented [CZ48]:** Is this fair as collaborative research is especially important in clinical trials and supported. I would also expect a column of raw CM publications as reported in the status reports given to 17 and 2018.

**Commented [WG49R48]:** Data on numbers of raw publications has been included.

**Commented [SZ50]:** For this calculation to be valid, FoS staff weighting must also be considered and demonstrated as collaborative publications within FoS are also common and affect the data presented.

Elsewhere at UTS, the Faculty of Health hosts the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM) (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine>). The Centre's web page notes that complementary and alternative medicine includes acupuncture, herbal medicines, and massage (all of which form part of the TCM curriculum) as well as other therapies. Both ARCCIM and TCM undertake research that tests the efficacy of traditional Chinese medicine approaches, such as acupuncture. ARCCIM supervises PhD students but does not teach undergraduate or postgraduate courses. The ARCCIM web pages (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine/research/research-0-26>) list only one project that involves a collaboration with a TCM staff member ('Chinese medicine practitioner knowledge, experience and attitudes towards professional registration in New South Wales', collaborators include TCM academic Carolyn Michael). Overall, there has been limited collaboration between TCM and ARCCIM represented by: co-supervision (by ARCCIM staff) of some TCM PhD students, and five co-authored publications since 2014.

**Commented [SZ51]:** According to the 2018 ERA report, UTS has scored a 4 (above world standard) in complementary and alternative medicine

**Commented [WG52R51]:** TCM research represented 16% of this result.

## External Engagement

### TCM Clinic

The TCM Clinic is open to the public (at a reduced cost) for acupuncture, Chinese herbal medicine, and remedial massage (Figure 3). The TCM Clinic also operates as an intern clinic for final-year students, who are supervised by qualified TCM staff. Final-year Intern students complete 750 hours of contact clinical hours and administer 300 individual treatments (<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/about-us/year-4-intern-clinic>). In 2017 there were 6019 patient visits to the TCM Clinic, and in 2018 there were 5999 visits (representing 4920 acupuncture, 777 herbal therapies, and 294 massage visits). Gross Income during 2018 from the clinic activities was \$224,739.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

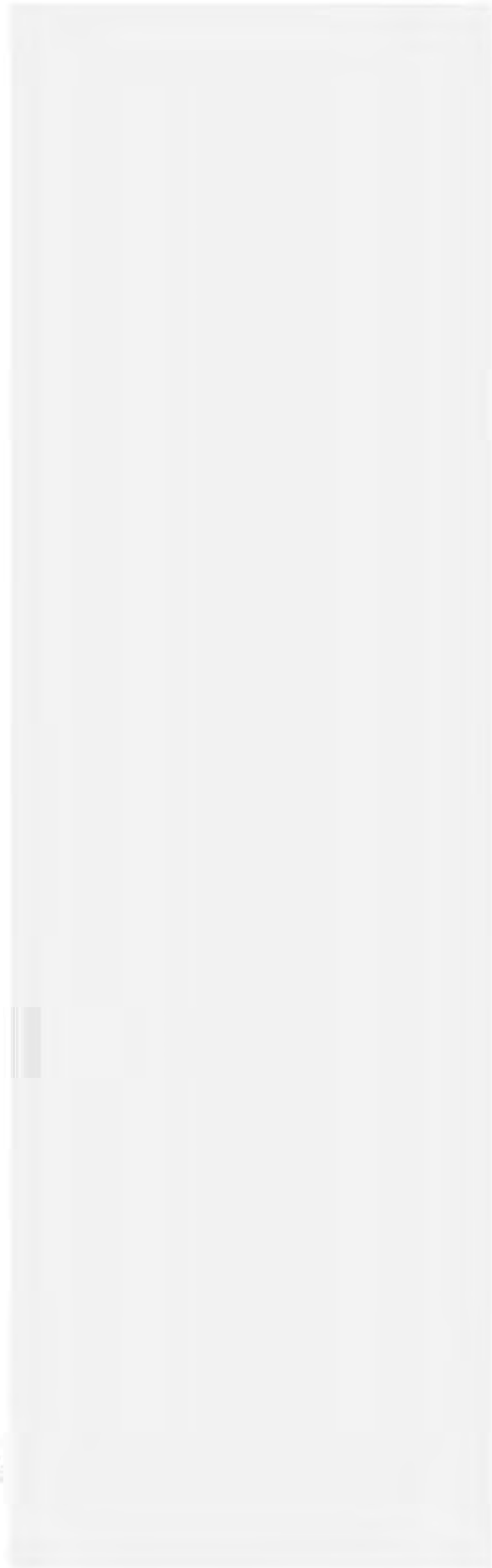


Figure 3. Entrance to the Traditional Chinese Medicine Clinic on level 2 of Building 4 (corner of Harris and Thomas Streets).

### Concord Hospital

During 2018 final-year TCM students provided 300 acupuncture treatments at Concord Hospital to cancer survivors as a community service (i.e. no fee was charged). This program, voluntary for students, has been running since 2016. It occurs within the oncology/haematology outpatients clinic at Concord Hospital and treats cancer survivor patients for pain either associated with their cancer treatment or independent of their cancer status (e.g. lower back pain). The program occurs for 20-30 weeks, the students are supervised, and patients are recruited through the Cancer Survivor Centre at Concord Hospital.

DRAFT



International partnerships

UTS has active MoUs with the following organisations for TCM:

- Dong-Eui University (Republic of Korea), for outbound teaching
- Shaolin Temple (China), for research
- Healthpac Centre for Excellence in Integrative Medicine Pty Ltd (Australia) for research
- Chengdu University of Traditional Chinese Medicine (China), for outbound teaching and research
- Korea Institute of Oriental Medicine (KIOM) (Republic of Korea), for research and teaching

Stakeholder organisations

Staff in UTS TCM interact with a number of external stakeholder organisations including:

- World Health Organisation (WHO) (policy and publication development)
- Standards Australia via ISO Technical Committee (ISO/TC 249 Traditional Chinese Medicine) (standard development)
- Concord Hospital Cancer Survivor Centre (community activity)
- Australian Acupuncture and Chinese Medicine Association
- Chinese Medicine and Acupuncture Society of Australia
- Chinese Medicine Board of Australia (committee membership)
- Chinese Medicine Council of New South Wales (Council membership and
- Australian Natural Therapists Association
- World Federation of Acupuncture and Moxibustion Societies (Directorship)
- World Federation of Chinese Medicine Societies
- TFSQA course accreditation committees (committee membership)
- New Zealand Qualifications Authority
- Australian Vice Chancellor Committee (committee membership)
- Can Revive Cancer (support organisation (Sydney) (community activity)
- Australian Health Practitioner Registration Agency
- Beijing University of Chinese Medicine (China)
- Tsukuba University of Technology (Japan)
- Chinese Academy of Chinese Medical Sciences (China)
- Shanghai University of Chinese Medicine (China)
- Hong Kong Baptist University
- Henan University of Chinese Medicine (China)
- Australian Chinese Medical Association (community activity)

Other

The CM team also convened an international research conference at UTS in 2012 titled “Scientific Acupuncture and Meridian Symposium” that attracted international significance and over 100 attendees

**Commented [CZ53]:**

**Commented [WG54R53]:** The additional relationships have been included.

**Formatted:** Font: Not Bold

**Formatted:** Font: 11 pt

**Formatted:** Font: Not Bold

**Formatted:** Font: Not Bold

**Formatted:** Font: 11 pt, Not Bold

**Formatted:** Font: 11 pt, Not Bold, Font color: Auto, English (Australia)

**Formatted:** Font color: Auto, English (Australia)

**Formatted:** Font color: Auto, English (Australia)

**Formatted:** Font: (Default) +Body (Calibri)

**Formatted:** Font: (Default) +Body (Calibri)

**Formatted:** Font: (Default) +Body (Calibri)

**Formatted:** Font: (Default) +Body (Calibri)

**Formatted:** Font: (Default) +Body (Calibri)

**Commented [SZ55]:** Shaolin Temple, China

**Commented [SZ56]:** Philanthropic engagements: CM academics have often shared their expertise for community philanthropic events. For example Dr Shuai Zheng has been involved with providing health talks for Cancer Survivors.

**Commented [WG57R56]:** Included

**Commented [SZ58]:** AHPRA  
UTS and SITCM are the only locations which are able to run AHPRA Clinical VIVA assessments. UTS CM are engaged to assess clinical competency and present reports and recommendations for international and domestic practitioners wishing to apply for national registration

**Commented [WG59R58]:** Included

### TCM at other Universities

Courses in TCM are offered at 2 other universities:

- Western Sydney University, School of Science and Health: Bachelor of Traditional Chinese Medicine (4 years), which is accredited by the Chinese Medicine Board of Australia; and Master of Chinese Medicine (1.5 years full time, 3 years part-time) with the choice of a Clinical Stream or Research Stream
- RMIT, School of Health and Biomedical Sciences: Bachelor of Health Science/Bachelor of Applied Science (Chinese Medicine) (5 years) which is accredited by the Chinese Medicine Board of Australia; Master of Applied Science (Acupuncture) (3 years part-time); and Master of Applied Science (Chinese Herbal Medicine) (3 years part-time).

WSU offers a TCM Clinic as part of UniClinic. At RMIT students in the final two years of their course work treat patients in the Chinese Medicine Clinic that is part of the Health Science Clinic at University Hill in Bundoora. Research in TCM at RMIT, and additional education related to TCM, occur through the WHO Collaborating Centre for Traditional Medicine, and the Chinese Medicine Confucius Institute.

Courses in TCM are also offered by two private providers in Sydney:

- Sydney Institute of Traditional Chinese Medicine: Bachelor of Traditional Chinese Medicine (4 years) (approved by the Chinese Medicine Board of Australia); Diploma of Bachelor of Traditional Chinese Medicine Remedial Massage (1 year)
- Endeavour College of Natural Health: Bachelor of Health Science – Acupuncture (4 years) (not recognised by Chinese Medicine Board of Australia).

**Commented [SZ60]:** Unaccredited degree

**Commented [WG61R60]:** included

**Commented [SZ62]:** This should say diploma only. Additionally this is not relevant to this paper as only accredited Bachelor programs are comparable to the UTS CM program

**Commented [WG63R62]:** Bachelor has been deleted. This course has been retained here because the information is about other 'courses'.

Appendix 1  
s.2.1.2 and s.2.1.5.





**From:** [William Gladstone](#)  
**To:** [Christopher Zaslowski](#)  
**Cc:** [Andrea Leigh](#)  
**Subject:** RE: CM meeting Tuesday 27 Nov  
**Date:** Monday, November 26, 2018 3:59:35 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)

---

Thanks Chris

Regards

Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**

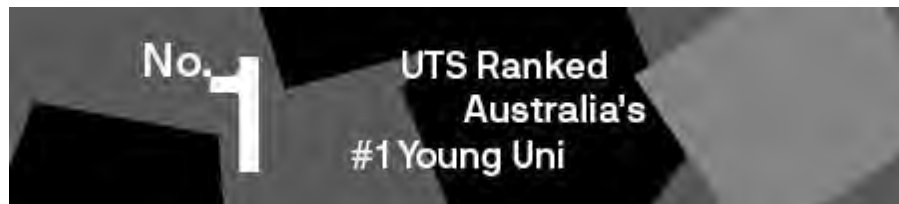
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski  
**Sent:** Monday, 26 November 2018 3:59 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** RE: CM meeting Tuesday 27 Nov

Thanks Bill. Yes I will await the outcome of the meeting. I agree the timeframe is too short. I will email the CM staff member to cancel tomorrow and will meet you and Raelene at 2.15 tomorrow.

Thanks Chris

---

**From:** William Gladstone  
**Sent:** Monday, 26 November 2018 3:54 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** CM meeting Tuesday 27 Nov

Dear Chris

I apologies for the later notice - I would like to postpone tomorrow's meeting with the Chinese Medicine Discipline Group until next week.

The reason is that I have been considering the feedback and questions from you over several emails, and the importance of providing a sufficient and suitable period of consultation with staff and other stakeholders. As a result I need to review the initial timeline for the development of the options paper with the Provost, and ensure there is sufficient time for staff to review the draft options, provide feedback and other information, and for these to be considered over an appropriate period of time. I have a meeting with the Provost on Thursday to discuss this. I will be in touch with you immediately after that to schedule the meeting with the staff.


I would still like to go ahead with the meeting with you and Raelene La Ferla (HRU) tomorrow at 2:15 to discuss the support available for CM staff.

Can you please advise the CM staff about the change to tomorrow's meeting, and apologise for the short notice.

Thanks very much

Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) <sup>s.2.1.3.</sup>   
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)

## Status of Chinese Medicine in the UTS Faculty of Science

### Background

In 1994 Traditional Chinese Medicine moved from Acupuncture Colleges (Australia) to UTS, and in 1995 moved to the Faculty of Science. The courses initially taught included a 3.5 year undergraduate degree in acupuncture and a 2-year Masters by coursework program in Chinese herbal medicine. In 2000 the acupuncture and Chinese herbal medicine programs were combined to form a 4-year undergraduate course that covered both acupuncture and Chinese herbal medicine. Two undergraduate courses are currently offered: Bachelor of Health Science in Traditional Chinese Medicine, and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years). Staff and students have provided a public-facing Traditional Chinese Medicine Clinic at UTS since 1994 that also acts as a teaching facility for students in all years of the undergraduate courses.

The discipline of Traditional Chinese Medicine was re-named Chinese Medicine in 2015 with the formation of the new School of Life Sciences, and it is currently a Discipline Group in the School of Life Sciences with a Discipline Group leader (Associate Professor Chris Zaslowski). As a Discipline Group Leader, Associate Professor Zaslowski is a member of the School Executive. While the courses taught by staff in the Chinese Medicine Discipline Group are called 'Traditional Chinese Medicine' for consistency throughout this paper the combination of staff, teaching, research, and the clinic operations will collectively be referred to as Chinese Medicine (CM).

Elsewhere at UTS, research and research training in aspects of traditional Chinese medicine occur in the Faculty of Health in the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM). The Centre also does projects in a range of other complementary therapies. Within universities in NSW, traditional Chinese medicine exists only at Western Sydney University (WSU) in the School of Science and Health.

This report will inform thinking and decisions about options for the future of CM at UTS. It is a response to several strategic pressures: the results of the 2018 UTS Course Viability Analysis and internal Faculty financial analysis (provided later in this report); the strategic imperative (via UTS 2027) for UTS and the Faculty of Science to evolve from being research-active to research-intensive and the potential for CM to contribute to this; the need for continual improvement in the Faculty's overall financial position and efficiency of its operations; and consideration of the disciplinary fit of CM (with courses that graduate registered health practitioners) within the Faculty of Science.

### Staff

In 2018 there were 21 staff employed as: 9 continuing academics (7 academics and 2 clinical supervisors); 3 fixed-term academics; 7 casual academics; and 2 casual professional staff. These staff represent 12.6 FTE. The 12.6 FTE includes Associate Professor Xianqin Qu (who teaches in the CM courses but is a member of the Medical Science Discipline Group in the School of Life Sciences) and Associate Professor Peter Meier (Associate Dean (Teaching and Learning), with a minor appointment in the CM discipline, <sup>R-1.2</sup>), One of the nine continuing academics for the

**Commented [GS1]:** Not mentioned here is that a couple of the staff also teach into other programs in science (Sean/Shuai) and into other faculties (Sean for Health/FIDI)

**Commented [WG2R1]:** A statement has been added to cover this.

**Deleted:** two

**Commented [WG3]:** OK.

**Deleted:** substantive

**Commented [WG4]:** The term 'substantive' is correct, the data re number of teaching hours will be included.

year <sup>s2.1.3</sup> [redacted] resulting in an increase of casual hours to cover teaching and clinical responsibilities.

**Commented [WG5]:** Addressed in the final version.

The 12 academic staff employed in fixed-term or continuing academic positions represented academic staff levels A (Associate Lecturer) to D (Associate Professor) and Clinical Educator, who had been employed for periods <sup>IR-1.2</sup> [redacted]. These staff included <sup>IR-1.2</sup> [redacted].

**Deleted:** Figure 1

**Formatted:** Font: 11 pt

**Formatted:** Font: 11 pt, Not Italic

**Commented [WG6]:** No, incorrect use of 'either'

R-1.2. [redacted]

In 2018 nineteen of the 24 CM-specific subjects required casual academics to assist with teaching. Twenty-seven different individuals were employed as casuals for a total of 500 hours and a total cost (including oncosts) of <sup>s2.1.5</sup> [redacted].

Average CM staff workloads in 2018 (for the nine continuing and three fixed-term academics) reported in the Faculty's workload calculators were: 60% teaching, 19% research, and 21% management/engagement. By comparison, the average workloads across all other academics in the Faculty of Science were: 22% teaching, 58% research, and 20% management/engagement. The distribution of workload across the three categories for CM staff differs from the average workload profile of the rest of the Faculty of Science because of: 42% of CM academics were employed as teaching only (i.e. the fixed-term academics and the clinical educators); two staff performed leadership roles (Meier, Zaslowski); and there were no research intensive academic staff.

DRAFT

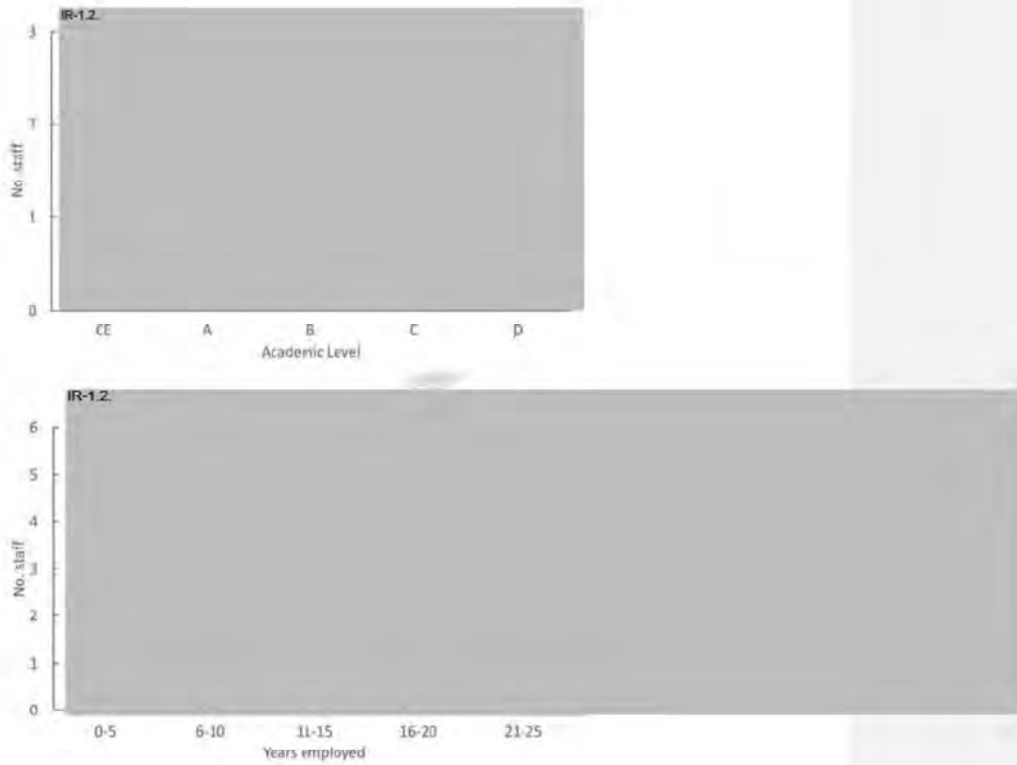


Figure 1. Profile of academic staff (fixed-term and continuing) employed in the CM discipline at the end of January 2019: (a) academic level (CE Clinical Educator; A Associate Lecturer; B Lecturer; C Senior Lecturer; D Associate Professor); (b) years employed at UTS.

### Courses and Teaching

The following courses are offered:

- Bachelor of Health Science in Traditional Chinese Medicine (4-years)
- Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years)

Throughout the 4-year Bachelor of Health Science in Traditional Chinese Medicine course CM students complete 30 subjects representing 192 credit points (Table 1). These subjects represent 24 CM-specific subjects, 5 non-CM subjects offered by the Faculty of Science, and 1 non-CM subject offered by the Faculty of Health. The 4-year course is prescribed i.e. there are no elective subjects.

Three CM subjects were taken by students enrolled in other courses during 2018: Chinese Medicine Foundations 1 (3.5 EFTSL), Clinical Practice 1 (0.5 EFTSL), and Clinical Features of Disease (2.9 EFTSL).

The five non-CM subjects offered by the Faculty of Science and taken by CM students include: (i) Human Anatomy and Physiology, a first-year core subject for all students enrolled in a course in the life sciences stream, (ii) Physiological Systems, a core subject in the Bachelor of Medical Science, Bachelor of Biomedical Engineering, and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science, Infection and Immunity majors), (iii) Human Pathophysiology, a core subject in the Bachelor of Medical Science and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science majors); (iv) Neuroscience, a core subject in the Bachelor of Medical Science; and (v) Clinical Features of Disease, a core subject in the Pre-Medicine major in the Bachelor of Advanced Science.

The CM subjects are delivered via a variety of modes including lectures, practicals, clinic, workshop or tutorial. Currently, no CM subjects are delivered in the Summer session. The clinic-based training (in the CM Clinic), commences in Autumn session of first-year in both courses. The number of clinic-based teaching hours increases in each year of the courses, delivered across eight clinical subjects. Students complete a total of 945 clinical hours throughout their course and a minimum number of patient treatments. The clinical training is an example of authentic learning and assessments are conducted under real-life circumstances.

As part of their clinical education CM students can elect to do a six-week clinical placement in a hospital in China (affiliated with the Chengdu University of Chinese Medicine) or South Korea (affiliated with Dong Eui University). These arrangements are supported by MoUs with both institutions. This opportunity is taken-up by 50-75% of final-year students. The overseas placements are self-funded by each student, although some financial assistance is provided through UTS Build and Colombo Plan (for students meeting the age requirement).

In comparison with other courses in the Faculty of Science, the majority (24/30 subjects i.e. 80%) of subjects in the CM course are CM-discipline subjects. This level of specificity is required to meet the external accreditation requirements because the majority of outcomes required for accreditation are specific to CM practice. The large component of clinical teaching also provides a relevant learning experience that distinguishes the UTS CM course from other courses. While this level of specificity provides a unique and intensive, discipline-based teaching experience it results in the teaching being resource intensive, and also leads to inefficiencies when the average number of enrolled students is low and there are few opportunities to offer subjects that are also of interest and relevant to non-CM students in, for example, biomedical or medical science courses. Two CM subjects are offered as electives for non-CM students: 99665 Chinese Medicine Foundations (3.5 EFTSL of non-CM students in 2018) and 99584 Clinical Features of Disease (2.9 EFTSL of non-CM

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 1

students in 2018). There is also the option that the two research subjects (91614 and 91615) which focus on statistical testing and clinical research design could be offered to other courses.

For other courses the School of Life Sciences uses a model of co-taught subjects and sharing of resources to optimise efficiency, whilst maintaining differentiation among courses. As a result, most courses have 20-30% unique subjects. These other courses also have greater enrolments, which further increases the efficiency of teaching. This is an option outlined in more detail in the CM response paper attached to this options paper.

**Commented [GS7]:** The is potential for this to be expanded into the TCM programs, reducing the need for a separate course.

**Commented [WG8R7]:** This comment and the following sentences are addressed via the reference to the CM options paper.

DRAFT

Table 1. Structure of the Bachelor of Health Science in Traditional Chinese Medicine. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject and <sup>2</sup> Faculty of Science non-TCM subjects.

First Year	Credit points	Subject code
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease	6	99584
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Clinic Level 6	6	99647
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Evaluating TCM: Theory, Practice and Research 2	6	91615
Clinical Practice 2 (TCM)	12	99631



Table 2. Structure of the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies combined degree. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject, <sup>2</sup> Faculty of Science non-TCM subjects, and <sup>3</sup> Faculty of Arts and Social Sciences subjects.

First Year	Credit points	Subject code
<b>Autumn Session</b>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<b>Spring Session</b>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<b>Autumn Session</b>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<b>Spring Session</b>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<b>Autumn Session</b>		
Chinese Language and Culture 1 <sup>3</sup>	8	91701
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<b>Spring Session</b>		
Medical Classics and the History of Chinese Medicine	6	91510
Clinical Practicum (Therapy and Diagnosis)	6	91611
Chinese Language and Culture 2 <sup>3</sup>	8	97102
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<b>Autumn Session</b>		
Clinical Features of Disease	6	99584
Chinese Language and Culture 3 <sup>3</sup>	8	97103
Foundations in International Studies <sup>3</sup>	8	976001
<b>Spring Session</b>		
Chinese Language and Culture 4 <sup>3</sup>	8	97104
Contemporary China <sup>1</sup>	8	976111
Clinic Level 6	6	99647
<b>Fifth Year</b>		
<b>Autumn Session</b>		
In-country Study 1: China <sup>3</sup>	24	977110
<b>Spring Session</b>		
In-country Study 2: China <sup>3</sup>	24	978110
<b>Sixth Year</b>		
<b>Autumn Session</b>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<b>Spring Session</b>		
Professional Issues in Traditional Chinese Medicine	6	91613
Clinical Practice 2 (TCM)	6	99631
Evaluating TCM: Theory, Practice and Research 2	6	91615

Throughout the 6-year Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies students complete 38 subjects (Table 2), including 24 TCM subjects, 5 non-TCM subjects offered by the Faculty of Science, 1 non-TCM subject offered by the Faculty of Health, and 8 subjects offered by the Faculty of Arts and Social Science. The combined degree is structured so that students complete the majority of the TCM subjects in years 1-3, a mix of TCM and international studies subjects in year 4, a year of in-country study in China in year 5, and the remainder of the TCM course in year 6.

Formatted: Font: Not Italic

Deleted: Table 2

#### Student Load

At the August 2018 census there were 176 enrolled students in TCM courses, representing 165 students in the Bachelor of Health Science in Traditional Chinese Medicine and 13 students in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies. The total taught EFTSL was 129.1, including 123.4 Commonwealth supported places and 5.7 international fee-paying places<sup>1</sup>.

**Commented [C29]:** Data from SAU today (5<sup>th</sup> June) indicates that we have 189 students enrolled in the single bachelor program and 14 enrolled in the international program for 2019 totaling 205 students. In addition we have 15 additional students on leave of absence, which would increase the student number enrolled in the two course to 220

**Commented [WG10R9]:** Included as a footnote.

Deleted: declined annually

Deleted: the

**Commented [WG11]:** 72 corrected to 73, no change to the rest of the sentence.

Deleted: 2

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 3

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 4

The total number of commencing students in the TCM courses has oscillated from a peak of 79 in 2015 to 55 in 2018, with the numbers again increasing to 73 in 2019 (Table 3). The taught EFTSL represented by all TCM students declined from 167.3 in 2015 to 128 in 2018 (Table 4), and this is expected to show an increase in 2019 following the increased number of commencing students.

Table 3. Number of commencing students between 2014 and 2019 in the Bachelor of Health Science in Traditional Chinese Medicine (B Health Sc TCM) and Bachelor of Health Science in Traditional Chinese Medicine / Bachelor of Arts in International Studies (B Health S TCM + B AIS). The numbers of 2019 commencing students were based on data from 17 May 2019.

	2014	2015	2016	2017	2018	2019
B Health Sc TCM	50	74	64	59	48	70
B Health Sc TCM + B AIS	4	5	10	3	7	3
Total	54	79	74	62	55	73

Table 4. Total taught EFTSL of TCM students in subjects owned by the Faculty of Arts and Social Sciences (FASS), Faculty of Health (Health), Faculty of Science that are not TCM subjects (Science (non-TCM)), and in TCM subjects (TCM), for the Bachelor of Health Science in Traditional Chinese Medicine and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

	2014	2015	2016	2017	2018
FASS	2.2	2.5	0.5	0.7	1.7
Health	5.6	4.0	5.0	7.1	4.1
Science (non-TCM)	19.7	22.4	18.0	15.4	15.1
TCM	127.5	138.4	135.2	121.0	107.1
Total	155.0	167.3	158.7	144.2	128.0

<sup>1</sup> These numbers differ slightly from the numbers in Table A because of rounding of numbers in each row contributing to the total.

Deleted: Table 4

Formatted: Font: Not Italic

**Financial Position: Faculty-level Analysis**

The Faculty's financial analysis of CM is shown in Table 5.<sup>§2.15</sup>  
The financial analysis includes taught load income (Commonwealth Supported Places, and international fee-paying), income from TCM clinic, direct expenses (salary and NSI), and indirect expenses (UTS overheads, and Faculty-allocated overheads).<sup>§2.15</sup>

- Formatted: Font: 11 pt
- Deleted: Table 5
- Formatted: Font: 11 pt, Not Italic
- Commented [WG12]: This has been included, in a different position.

§2.15

The UTS overhead costs were based on the information used in the 2018 Course Viability Analysis. The Faculty-based overheads were attributed based on staff FTE. The largest cost items were direct costs (salaries and NSI, estimated to be \$<sup>§2.15</sup>) and UTS central overhead costs (\$<sup>§2.15</sup>) and faculty costs (\$<sup>§2.15</sup>). The net financial position was an estimated deficit of \$1.483M at the end of 2018.<sup>§2.15</sup>

- Commented [WG13]: Sentence added.
- Commented [WG14]: Text amended to refer to 'indirect costs' of UTS central overheads and Faculty overheads.

§2.15

- Commented [WG15]: Not included.

**Course Viability Analysis**

The first Course Viability Analysis (CVA) was done in 2018 as a part of the Business Model Strategy. The intention was for the CVA to support informed decisions on the closure, subsidisation or retention of undergraduate and postgraduate courses. The CVA approach was to fully match non-research net costs to teaching revenues for all UTS courses using data for 2017, and to incorporate indicators of quality alongside the financial indicators.

§2.15

§2.15

§2.15

s.2.15.

The CVA also assessed five indicators of course quality that covered student performance, student experience and graduate feedback. The five indicators were: success rate, retention rate, student satisfaction with quality, graduate satisfaction with course, and graduate satisfaction with teaching. An index was calculated for each indicator, which was the reported result divided by the national average (i.e. a course that performed better than the national average would have an index value >1). Each indicator was weighted as a measure of its relative importance. The weighted indexes for the five indicators were summed to produce a Course Quality Index. A Course Quality Index >1 is a positive result relative to the national average, and an Index of <1 is a negative result. Each course was assessed for its net profitability (described in the previous paragraph) and Course Quality Index by plotting on XY axes (Figure 2).

The performance of the two TCM courses combined in the CVA is shown in Figure 2. The position of the TCM courses at the bottom left of the graph indicates a large negative net profit margin and an overall Course Quality Index below the national average benchmark (shown as 1 on the graph).

s.2.15.

- Deleted: Figure 2
- Formatted: Font: 11 pt
- Formatted: Font: 11 pt, Not Italic
- Formatted: Font: 11 pt
- Formatted: Font: 11 pt, Not Italic
- Deleted: Figure 2

DRAFT

Table 5. Financial analysis of CM based on student load income at the August 2018 census (provided by J Maddalena, Faculty Finance partner).

<u>Income</u>	<u>EFTSL</u>	<u>Income \$ Source</u>
<b><u>Commonwealth Supported Places</u></b>	5,215	
TCM Subjects taught within TCM Courses		2018 August Census
TCM Subjects taught within Non-TCM Courses		2018 August Census
Non-TCM Subjects taught within TCM Courses		2018 August Census
<b><u>International Fee Paying (and Other)</u></b>		
TCM Subjects taught within TCM Courses		2018 August Census
TCM Subjects taught within Non-TCM Courses		2018 August Census
Non-TCM Subjects taught within TCM Courses		2018 August Census
<b><u>Total Taught EFTSL/Income</u></b>		
<b><u>Total Enrolled Student Headcount</u></b>		2018 August Census
<b><u>Expenses</u></b>		<b><u>Source</u></b>
TCM Academic Salary Expenses (Operating)		2019 Budget
Acupuncture Casual Academic Costs		2019 Budget
Chinese Medicine Casual Academic Costs		2019 Budget
<b>Total Staff FTE/Costs</b>		
Operating NSI 0226049		2018 Actuals
Operating NSI 0226086		2018 Actuals
Operating NSI 0226392		2018 Actuals
<b>Total Salary &amp; NSI Expenses</b>		
Income (Clinical Services & Fees)		2018 Actuals
<b>Net Direct Expenses</b>		
Indirect Faculty Costs (by FTE)		2019 FTE applied to 2018 Budget Model
Indirect Faculty Costs (by EFTSL)		2018 EFTSL applied to 2018 Budget Model
<b>Total Indirect Faculty Costs</b>		
Indirect Central Overhead Costs		2018 Taught Load applied Provost's CVA Estimate
<b>Total Indirect Costs</b>		
<b>Net Result at UTS Level</b>		<b>(1,483,718)</b>

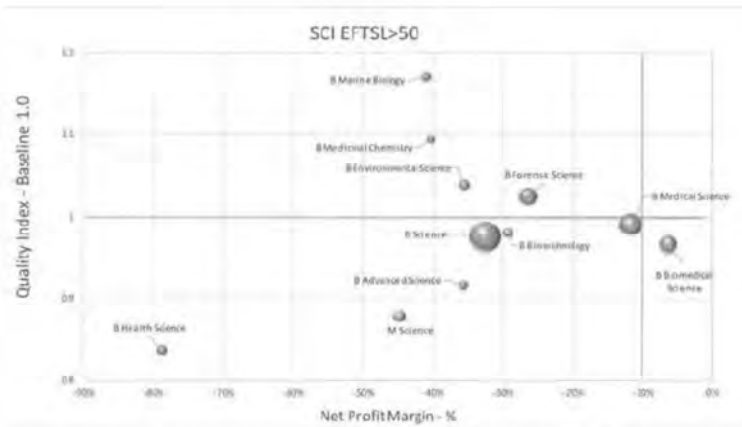


Figure 2. Graphical summary of the results of the Course Viability Analysis for courses in the Faculty of Science with an enrolled student load >50 EFTSL. The calculation and interpretation of the net profit margin and quality index are explained in the text. B Health Science is the combined result for the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

The TCM courses had a Course Quality Index of 0.84. This overall below average result was driven by below average results for the Graduate Satisfaction with Course (0.807) and Graduate Satisfaction with Teaching (0.535), and the higher weightings for these indexes (25%) compared to the other indexes. The other indexes were close to, or at, national average values: Success Rate (1.011, 15% weighting), Retention Rate (1.042, 15% weighting), and Student Satisfaction with Quality (0.969, 20% weighting). Data for the Course Quality Index, for the UTS results and the national benchmarks, were obtained from the Student Experience Survey and the Graduate Outcomes Survey.

It should also be mentioned that the Australian Government in its WTO agreement with China agreed that Chinese medicine "licensing and certification (education) should be supported by relevant bodies.

2. Each Party, where possible, will encourage the relevant bodies in its territory to develop, where possible, mutually acceptable standards and criteria for licensing and certification, and to provide recommendations to the Committee on Trade in Services on mutual recognition with respect to service sectors mutually agreed by the Parties, including engineering and Traditional Chinese Medicine.

ARTICLE 8.15: QUALIFICATIONS RECOGNITION COOPERATION

Commented [WG17]: This is not relevant to this section on CVA. UTS is not a relevant body in this case. It is the responsibility of the accrediting body.

**Accreditation: Internal**

Courses at UTS are approved for periods of five years via the Award Course Approval and Reaccreditation Policy and the Award Course Approval and Reaccreditation Procedures. The depth and extent of the approval process depend on the previous performance of the course, and courses with a record of good performance require a 'short reaccreditation' process. The UTS Courses Accreditation Committee recommended (after a Short Reaccreditation process during 2016) that the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies be re-accredited for 2017-2021. This recommendation was approved by Academic Board in July 2016.

The UTS Curriculum Performance Report reviews all UTS courses and subjects against a set of benchmarks determined by the Provost and Deputy Vice-Chancellor (Education & Students). The indicators (determined for courses and subjects) used in the CPR are designed to link course performance with UTS KPIs. The CPR provides an assessment of the performance of courses and subjects relative to the indicators and highlights areas requiring action to address issues that have been identified.

The Bachelor of Health Science in Traditional Chinese Medicine was included on the Outstanding Courses List for 'consecutive excellent ratings and improving over two or more years' in the 2014 and 2015 Curriculum Performance Reports.

The Bachelor of Health Science in Traditional Chinese Medicine received an overall rating of Green each year in its annual Course Performance Reports for 2015-17. Specific indicators that were also Green each year included: UAC preferences 1-3 to total preferences; student load; success rate; and attrition rate. Average salary of graduates was Green in 2017 and 2015. There have been no consistent issues (indicated by a Red rating) over these three years, with timetabled hours/EFTSL flagged as Red in 2017 and 2015.

The Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies received Green assessments annually in the Course Performance Reports for 2015-17 for Success Rate, and for two of three years for UAC preferences 1-3 to total preferences. No indicator was flagged with a Red warning in every year, however SFS for student satisfaction was flagged Red in 2015 and 2016 (and was Green in 2017). Student Load and Attrition moved from Red to Green over 2015 to 2017.

All TCM subjects have been learning.futures certified, and all Science-owned subjects in the TCM courses have been peer-reviewed.

**Accreditation: External**

The TCM courses are accredited externally by the Australian Health Practitioner Regulation Agency (AHPRA) within the National Registration and Accreditation Scheme (NRAS) for health practitioners. Graduates are eligible for professional registration as a health practitioner with the Chinese Medicine Board of Australia (CMBA) within AHPRA (<http://www.handbook.uts.edu.au/courses/c10164.htm>). Graduates are registered to practice at a Chinese herbal medicine, dispensing and acupuncture practice, and eligible for membership with the

Commented [WG18]: included

relevant professional associations (<https://www.uts.edu.au/future-students/find-a-course/bachelor-health-science-traditional-chinese-medicine>).

The external accreditation requires that students achieve a number of outcomes, and the majority of these are specific to the discipline and practice of CM. The structure of the TCM course reflects, in large part, these requirements. The two TCM courses were accredited by AHPRA in December 2017 with one condition and 4 monitoring conditions. The responses to these conditions were reported in November 2018 and in its response (March 2019) the accreditation committee decided to remove the one condition and four monitoring conditions. The Accreditation Committee does not accredit courses for a defined period of time, instead undertaking monitoring (via requested reports) of the education provider (i.e. UTS) and the course<sup>3</sup>.

#### Benchmarking: QILT

In the Quality Indicators of Learning and Teaching (QILT) TCM is classified in the Health Services and Support study area. The other UTS courses included within this study area are: Bachelor of Health Science; Bachelor of Human Movement; and Bachelor of Sport and Exercise Science. In the Student Experience Survey 2016 and 2017 (Table 6), UTS courses in Health Services and Support were close to the national average in all areas of Student Experience, exceeded the national average in two areas of Graduate Satisfaction (Overall Satisfaction, Teaching Scale), and below the national average in full-time employment. The combination of TCM and other UTS courses covered by this study area means that it is not possible to directly report the QILT results for the TCM courses.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 6

Table 6. Summary of the Student Experience Survey 2016 and 2017 outcomes for the Health Services and Support area (undergraduate) at UTS and compared to the national average (Source: [www.qilt.edu.au](http://www.qilt.edu.au)).

		UTS	National av
Student Experience	Overall quality of educational experience	77.9%	80.6%
	Teaching quality	81.8%	82.8%
	Learner engagement	64.7%	64.5%
	Learning resources	84.5%	84.1%
	Student support	70.0%	73.0%
	Skills development	83.2%	81.5%
Graduate Satisfaction	Overall satisfaction	85.5%	80.3%
	Teaching scale	71.0%	65.7%
	Skills scale	80.6%	82.8%
Graduate Employment	Full-time employment	64.1%	72.1%
	Overall employment	88.0%	89.8%
	Full-time study	49.3%	23.4%

<sup>3</sup> Australian Health Practitioner Regulation Agency / Chinese Medicine Board of Australia (2017) Chinese Medicine accreditation process (Australian Health Practitioner Regulation Agency, Melbourne).



### Research Training

Of the 12 continuing or fixed-term academic staff in CM, four are supervising HDR students as principal supervisor, six are not acting as a principal supervisor of a HDR student, and <sup>s.2.1.2</sup> current HDR students.

At the end of 2018 there were 27 (headcount) HDR students enrolled in CM-related MSc (research) or PhD projects. These HDR students consisted of <sup>s.2.1.2</sup> and <sup>s.2.1.5</sup>

There have been no HDR commencement in 2019 so far.

The annual number of CM HDR students completing has been: 4 in 2015, 1 in 2016, 1 in 2017, and 3 in 2018 <sup>and s.2.1.2</sup>.

### Research<sup>3</sup>

CM undertakes research, mainly human clinical research but also some profession focused research. This is undertaken by four fulltime academic staff and the 28 HDR students. Currently there are nine randomised clinical trials (RCTs) being developed, conducted or reported in peer reviewed journals. These are acupuncture and tennis elbow pain, Chinese herbal medicine and insomnia, acupuncture and cancer pain, acupuncture and mental stress in university students, acupuncture and hot flushes in breast cancer patients, Cluster analysis of prodromal stage in Parkinson's Disease (using lig data), vitamin D in reducing DM risks and acupuncture and osteoarthritic knee pain and male potency following radical prostatectomy and qigong and well-being. In the past, CM has undertaken RCTs for taiji and stress, acupuncture and hepatitis C, acupuncture and post-traumatic stress disorder and acupuncture and male subfertility. Two of the RCTs are in partnership with specialised oncology units at the Royal North Shore Hospital, and another at the Chris O'Brien Lifehouse (RPA Hospital).

CM staff and HDR students are also undertaking experimental human studies including transcranial magnetic stimulation, pain challengers e.g. pressure pain threshold and thermal thermography. CM staff and students undertake survey research projects such as referral between medical, allied health and CM practitioners, adverse event profile of Chinese herbal medicine, clinical outcomes implementation for acupuncture and Chinese medicine and the use of the Chinese herb qingdai for eczema. Other projects are evaluating the safety of moxa smoke, clinical reasoning, professional communication, acupuncture needling sensations, radial and carotid artery tonometry, Parkinson's disease symptomology, a delphi study on osteoarthritic knee pain, transcriptome analysis of Chinese herbs on human squamous cancer cell line and a critical classical medical literature review.

Finally there are several educational projects on student empathy and enablement, collaborative learning experiences, technologies and civic virtues, linguistic analysis of Chinese medicine clinical interaction and student visualization in education. In total there are 33 research projects currently being undertaken by CM academic staff and HDR students.

CM researchers (in total) attracted external research grant income of \$10,000-\$64,000 p.a. between 2014 and 2018, representing <1% of the total external research income awarded to the Faculty of Science (Table 7). None of this external grant income was classified as Category 1 grant income. This

<sup>3</sup> The first three paragraphs describing the research being done in TCM were provided by C Zaslowski.

Commented [GS19]: This is now <sup>s.2.1.2</sup>

Commented [GS20]: This is now <sup>s.2.1.2</sup>

Commented [WG21R20]: Text amended

Commented [WG22]: included

Deleted:

Commented [WG23]: included

Commented [WG24]: included

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 7

annual grant income was awarded to one CM academic in 2014 and 2015, three CM academics in 2016, six CM academics in 2017, and two CM academics in 2018. Over this same time period CM academic staff represented 2.3-4.9% of total academic staff in the Faculty of Science. ~~During this time, one academic~~ <sup>s.2.1.3.</sup>

Commented [WG25]: included

Table 7. Total external research grant income awarded to researchers in CM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-18. For comparison, the income for CM is shown as % total FoS external research grant income (CM % total), and the number of CM staff is shown as % of total number of FoS academic staff.

	CM	FoS	Total	CM % total	CM staff % FoS staff
2014	\$10,000	\$11,123,023	\$11,133,023	0.09%	3.0%
2015	\$10,000	\$13,347,000	\$13,357,000	0.07%	2.9%
2016	\$65,000	\$16,244,000	\$16,309,000	0.4%	2.3%
2017	\$39,495	\$16,666,505	\$16,706,000	0.24%	4.9%
2018	\$64,064	\$19,492,936	\$19,557,000	0.33%	4.5%

The total annual weighted publication points of CM researchers varied between 0.70 and 5.27 (Table 8), representing 0.3-2.1% of the total for the Faculty of Science. The total number of publications varied between 4 and 34, representing 0.8-5.7% of the Faculty's total publications.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 8

Table 8. Total publications and weighted publication points for researchers in Chinese Medicine (CM) and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-17 (2018 publication data not yet finalized). The volumes for Chinese Medicine are shown as a % of the totals for the whole of the Faculty of Science, and the % Faculty academic staff that are in Chinese Medicine are also shown.

Weighted pub points	CM	FoS	Total	CM % total	CM staff % FoS staff
2014	3.29	227.66	230.95	1.4%	3.0%
2015	0.70	238.35	239.05	0.3%	2.9%
2016	3.04	273.41	276.45	1.1%	2.3%
2017	5.27	249.86	255.13	2.1%	4.9%

Commented [CZ26]: 2018??

Commented [WG27R26]: Final 2018 data not available

Total publications	CM	FoS	Total	CM % total	CM staff % FoS staff
2014	9	490	499	1.8%	3.0%
2015	4	528	532	0.8%	2.9%
2016	19	616	635	3.0%	2.3%
2017	34	566	600	5.7%	4.9%

Commented [CZ28]: Can we add in the 2018 publications as these were reasonable as well. I have them tabled as 20 in total (see 2018 CM status report emailed to you previously) with PM four educational papers included

Commented [WG29R28]: As above

Elsewhere at UTS, the Faculty of Health hosts the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM) (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine>). The Centre's web page notes that complementary and alternative medicine includes acupuncture, herbal medicines, and massage (all of which form part of the TCM curriculum) as well as other therapies. Both ARCCIM and CM

undertake research that tests the efficacy of traditional Chinese medicine approaches, such as acupuncture. ARCCIM supervises PhD students but does not teach undergraduate or postgraduate courses. The ARCCIM web pages (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine/research/research-0-26>) list only one project that involves a collaboration with a CM staff member ('Chinese medicine practitioner knowledge, experience and attitudes towards professional registration in New South Wales', collaborators include TCM academic Carolyn Michael). Overall, there has been limited collaboration between CM and ARCCIM represented by: co-supervision (by ARCCIM staff) of some CM PhD students, and five co-authored publications since 2014.

UTS research in Complementary and Alternative Medicine (represented by the research outputs of ARCCIM and the Faculty of Science CM) was assessed in ERA 2018-19 as 4 (above world average). The outputs of the Faculty of Science CM represented 16% of the submission to ERA.

DRAFT

## External Engagement

### TCM Clinic

The TCM Clinic is open to the public (at a reduced cost) for acupuncture, Chinese herbal medicine, and remedial massage (Figure 3). The TCM Clinic also operates as an intern clinic for final-year students, who are supervised by qualified CM staff. Final-year intern students complete 750 hours of contact clinical hours and administer 300 individual treatments (<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/about-us/year-4-intern-clinic>). In 2017 there were 6019 patient visits to the TCM Clinic, and in 2018 there were 5999 visits (representing 4920 acupuncture, 777 herbal therapies, and 294 massage visits). Gross income from the TCM Clinic in 2018 was \$224,239 (Table 5).



Figure 3. Entrance to the Traditional Chinese Medicine Clinic on level 2 of Building 4 (corner of Harris and Thomas Streets).

### Concord Hospital

During 2018 final-year TCM students provided 300 acupuncture treatments at Concord Hospital to cancer survivors as a community service (i.e. no fee was charged). This program, voluntary for students, ran in 2016–2018. It occurred within the oncology/haematology outpatients clinic at Concord Hospital and treated cancer survivor patients for pain either associated with their cancer treatment or independent of their cancer status (e.g. lower back pain). The program occurred for 20–30 weeks, the students were supervised, and patients were recruited through the Cancer Survivor Centre at Concord Hospital.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Figure 3

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Deleted: Table 5

### International partnerships

UTS has active MoUs with the following organisations for CM:

- Dong-Eui University (Republic of Korea), for outbound teaching
- Shaolin Temple (China), for research
- Healthpac Centre for Excellence in Integrative Medicine Pty Ltd (Australia) for research
- Chengdu University of Traditional Chinese Medicine (China), for outbound teaching and research
- Korea Institute of Oriental Medicine (KIOM) (Republic of Korea), for research

### Stakeholder organisations

Staff in CM interact with a number of external stakeholder organisations including:

- World Health Organisation (WHO) (policy and publication development)
- Standards Australia via ISO Technical Committee (ISO/TC 249 Traditional Chinese Medicine) (standards development)
- Concord Hospital Cancer Survivor Centre (community activity)
- Australian Acupuncture and Chinese Medicine Association
- Chinese Medicine and Acupuncture Society of Australia
- Chinese Medicine Board of Australia (committee membership)
- Chinese Medicine Council of New South Wales (Council membership)
- Australian Natural Therapists Association
- World Federation of Acupuncture and Moxibustion Societies (Directorship)
- World Federation of Chinese Medicine Societies
- TESQA course accreditation committees (committee membership)
- New Zealand Qualifications Authority
- Australian Vice Chancellor Committee (committee membership)
- Can Revive Cancer support organisation (Sydney) (community activity)
- Australian Health Practitioner Registration Agency
- Beijing University of Chinese Medicine (China)
- Tsukuba University of Technology (Japan)
- Chinese Academy of Chinese Medical Sciences (China)
- Shanghai University of Chinese Medicine (China)
- Hong Kong Baptist University
- Henan University of Chinese Medicine (China)
- Australian Chinese Medical Association (community activity)


### Other

The CM team also convened an international research conference at UTS in 2012 titled "Scientific Acupuncture and Meridian Symposium" that attracted international significance and over 100 attendees. CM academics have often shared their expertise for community philanthropic events. For example Dr Shuai Zheng has provided health talks for cancer survivors. UTS and the Sydney Institute


of Traditional Chinese Medicine are the only locations able to run AHPRA clinical viva assessments. UTS CM are engaged to assess clinical competency and present reports and recommendations for international and domestic practitioners wishing to apply for national registration.

#### TCM at other Universities


Courses in TCM are offered at 2 other universities:

- Western Sydney University, School of Science and Health: Bachelor of Traditional Chinese Medicine (4 years), which is accredited by the Chinese Medicine Board of Australia; and Master of Chinese Medicine (1.5 years full time, 3 years part-time) with the choice of a Clinical Stream or Research Stream (this is not an accredited degree)
- RMIT  School of Health and Biomedical Sciences: Bachelor of Health Science/Bachelor of Applied Science (Chinese Medicine) (5 years) which is accredited by the Chinese Medicine Board of Australia; Master of Applied Science (Acupuncture) (3 years part-time); and Master of Applied Science (Chinese Herbal Medicine) (3 years part-time).

Commented [WG30]: included

WSU offers a TCM Clinic as part of UniClinic. At RMIT students in the final two years of their course work treat patients in the Chinese Medicine Clinic that is part of the Health Science Clinic at University Hill in Bundoora . Research in TCM at RMIT, and additional education related to TCM, occur through the WHO Collaborating Centre for Traditional Medicine, and the Chinese Medicine Confucius Institute.

Commented [WG31]: included

Courses in TCM are also offered by two private  providers in Sydney:

- Sydney Institute of Traditional Chinese Medicine: Bachelor of Traditional Chinese Medicine (4 years) (approved by the Chinese Medicine Board of Australia); Diploma of Traditional Chinese Medicine Remedial Massage (1 year).
- Endeavour College of Natural Health: Bachelor of Health Science – Acupuncture (4 years) (not recognised by Chinese Medicine Board of Australia).

Commented [WG32]: the VET classification applies only to the Diploma and Certificate level courses

Appendix 1 (on following page): Summary of financial analysis of courses in the Faculty of Science for the 2018 Course Viability Analysis.

DRAFT





**From:** [William Gladstone](#)  
**To:** ["Dianne Jolley"](#)  
**Subject:** RE: CM review  
**Date:** Wednesday, June 12, 2019 3:24:00 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[image008.png](#)  
[image009.png](#)  
[image010.png](#)  
[image011.png](#)  
[image012.png](#)  
[CM options.docx](#)  
[CM status report Final 2019-06-12.docx](#)

---

Hi Di

Here is the final version of the CM report. I have made only a slight change to the version I sent you on Thursday: I have included some additional data provided by Chris Z (that I received on Friday) about the number of hours 2 CM staff teach into other non-CM subjects, and I detached Appendix 2 (the discussion of options prepared by Peter Meier). We agreed that Peter's options discussion would be submitted alongside the report.

So the 2 docs are attached separately.

A comment on 1 aspect of Peter's submission: on page 6 Research Productivity. The TCM Discipline Profile Peter refers to (and is attached in his appendix) is not from the approved Faculty's Discipline Profile document. In the approved document, TCM research is covered by FoR 11 Medical and Health Sciences, and the expected outputs are greater than those shown in Peter's doc.

Regarding Peter's comment that the ERA 2018-19 outcome of 4 (above world average) for UTS research in Complementary and Alternative Medicine represented "joint efforts of the Faculty of Health and Faculty of Science", in fact the CM outputs formed 16% of the submission from UTS that was assessed.

Cheers  
Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

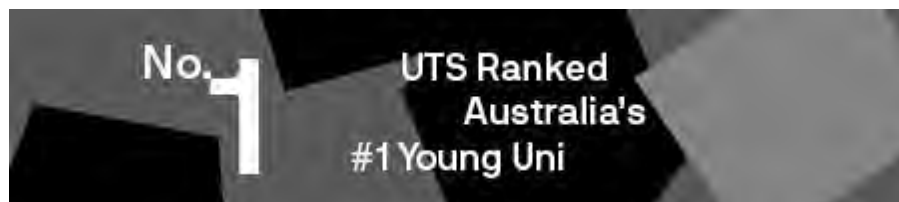
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Dianne Jolley <Dianne.Jolley@uts.edu.au>  
**Sent:** Tuesday, 11 June 2019 8:51 AM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>  
**Subject:** RE: CM review

Good morning Bill,

Hope you had a great long weekend with the family.

This report looks great and ready to go. I agree with all of your responses to Greg's comments on the report. What are your thoughts about Peter's addendum paper?

Kind regards,  
Dianne

**Professor Dianne Jolley**  
Dean  
Faculty of Science  
University of Technology Sydney  
Building 7, Level 7, 15 Broadway, ULTIMO NSW 2007  
Tel: +61 (02) 9514 5412  
E: [dianne.jolley@uts.edu.au](mailto:dianne.jolley@uts.edu.au)  
W: [uts.edu.au](http://uts.edu.au)





---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Sent:** Thursday, 6 June 2019 11:46 AM

**To:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>

**Subject:** CM review

Hi Di

Here are 2 docs:

- the CM Group's responses to the last version of the report, with my responses to their comments and additions
- a clean final version of the report, in which I have included any changes arising from the Group's feedback, and including the Options Paper submitted by Peter Meier as an appendix

Can you please let me know if you agree with my responses, and with the final version of the report.

If you are, I will remove the Draft watermark, and send you that version, which you can send to Andrew, and which I will return to the CM Group (via Chris).

Thanks!

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)

**From:** Dean of Science TCM  
**To:** Greg Welsh  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program  
**Date:** Thursday, July 11, 2019 5:27:00 PM  
**Attachments:** image001.png  
image002.png  
image003.png  
image004.png  
image005.png  
image006.png  
image007.png

Your additional sentence did not go to waste... thanks

**From:** Dean of Science TCM  
**Sent:** Thursday, 11 July 2019 5:27 PM  
**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Cc:** Weihong Li <Weihong.Li-1@uts.edu.au>  
**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Thanks again Chris.

I hope you have seen the email to all CM staff regarding this error. Perhaps there was a misunderstanding on UAC's part that the suspension of enrolments into the program in 2020 was due to the program being cancelled. Regardless, the site is wrong and is misleading, so we have asked that it be removed.

Kind regards,  
Di

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Thursday, 11 July 2019 4:28 PM  
**To:** Dean of Science TCM <dean\_of\_science.TCM@uts.edu.au>  
**Cc:** Weihong Li <Weihong.Li-1@uts.edu.au>  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program

Dear Dianne

Has the course been cancelled or is it just intake for next year? Clarification on this wording would be helpful and allay staff anxieties.  
Thanks Chris (in [s.2.1.3](#).)

**From:** Weihong Li <Weihong.Li-1@uts.edu.au>  
**Sent:** Thursday, 11 July 2019 3:04 PM  
**To:** Dean of Science TCM <dean\_of\_science.TCM@uts.edu.au>; Emma King <Emma.King@uts.edu.au>; Bouavirone Choy <Bobbie.Choy@uts.edu.au>; Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>; Carolyn Michael <Carolyn.Michael@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Stella Valenzuela <Stella.Valenzuela@uts.edu.au>; Peter Meier <Peter.Meier@uts.edu.au>  
**Cc:** William Gladstone <William.Gladstone@uts.edu.au>; Raelene La Ferla <Raelene.LaFerla@uts.edu.au>  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Dear all,

What do you think of this attached file?



Kind Regards!

Weihong

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine  
School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06 326 Email:weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: [s.2.1.3](#)

**From:** Dean of Science TCM  
**Sent:** Tuesday, 9 July 2019 12:36 PM  
**To:** Emma King; Bouavirone Choy; Christopher Zaslowski; Carolyn Michael; Huiling Yao; Weihong Li; Dale Elsdon; Shuai Zheng; Mary Garvey; Chunlin Zhou; Nancy Morgan; Sean Walsh; Xianqin Qu; Stella Valenzuela; Peter Meier; Christopher Zaslowski  
**Cc:** William Gladstone; Raelene La Ferla  
**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As it has been a number of weeks since I last communicated with you about the review of the Traditional Chinese Medicine program at UTS, I want to update you on what has been happening since my last communication. No final decision has yet been made at this stage about the future of the program. Before a final decision is made there are still a number of formal process steps that must be taken including discussions at Faculty and University level. These are scheduled to occur over the next two months.

We aim to have more information available as soon as possible after these meetings, and will be communicating with staff and students before re-enrolments for 2020

commence in mid-October. We acknowledge the uncertainty you are currently experiencing, but we must take the necessary time to consider all relevant information and make the right decision. We will continue to communicate with you as the process continues.

Affected staff will be consulted on how any decision impacts on them. We remain committed to students completing their studies and, when a final decision has been made, UTS will communicate with students to ensure we honour that commitment.

You are welcome to send further enquiries to [dean\\_of.science.TCM@uts.edu.au](mailto:dean_of.science.TCM@uts.edu.au) in the future. We have shared all information available at the moment.

Kind regards,

Dianne Jolley

**Professor Dianne Jolley**

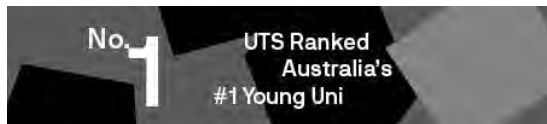
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Dean of Science TCM](#)  
**To:** [Greg Welsh](#)  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program  
**Date:** Monday, July 15, 2019 9:21:00 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[Chinese-Medicine-Board---Terms-of-Reference---Accreditation-Committee-Terms-of-Reference.pdf](#)

---

Hi Greg,  
 Another for discussion/input later today.

Kind rgds,

---

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Friday, 12 July 2019 5:43 PM  
**To:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>  
**Cc:** William Gladstone <William.Gladstone@uts.edu.au>; Peter Meier <Peter.Meier@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program

Dear Dianne

Thanks for your speedy response. As I communicated in an email prior to the Faculty SMG meeting last month, there is immeasurable human impact when initiating the closure of a course that has high respect amongst the local community, student body, international organisations and institutes and the wider Australian health professions. I appreciate your response and hope the UAC information can be remediated before there is too much emotional impact on the students and staff (see Weihong's personal reply to me below).

I just checked the FAQ on the accreditation committee website (<https://www.chinesemedicineboard.gov.au/Accreditation/Accreditation-FAQ.aspx>) and it has the following response to the FAQ "What if we want to change one of our approved programs?"

An education provider that has changed, or plans to change, a program that is on the Board's list of approved programs must notify the Accreditation Committee about the change. Contact the Accreditation Unit for more information.

I believe the decision to suspend domestic and international student admission for 2020 would meet that threshold for notification. We have an annual report the Program Director submits to the AHPRA accreditation committee that requires student intake numbers, progressions and subject failures for each year and this will be need to be submitted at the appropriate time.

I also checked the actual Chinese medicine course accreditation standards as well and found that standard 4.6 relates to course termination.

*"Standard 4.6 Program monitoring, review, updating and termination*

The education provider ensures its Chinese medicine program is regularly monitored, reviewed and updated to ensure compliance with the accreditation standards and that program change, including termination, will be appropriately managed, consistent with the requirements for course accreditation specified in the threshold HES " (Higher Education Standards)

As you are aware the UTS course currently has no conditions and only one monitoring condition.

Please let me know how I should respond to the email from the Chair of the AHPRA accreditation committee as I do need to respond to him in a timely manner. Your guidance would be much appreciated

Cheers

Chris (In <sup>s.2.1.3.</sup> )

---

**From:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>

**Sent:** Thursday, 11 July 2019 4:41 PM

**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Thanks Chris for prompt reply.

I was told by students that it triggered big anger, panic ..... Tears come to my eyes when I am writing to you for some reasons...

**Kind Regards!**

**Weihong**

---

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine  
School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06.326 Email:weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: <sup>s.2.1.3.</sup>

---

**From:** Christopher Zaslowski

**Sent:** Thursday, 11 July 2019 4:29 PM

**To:** Weihong Li

**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Thanks Weihong

I just forwarded a response from me to the wording “course is cancelled”. Thanks for picking that up.

Cheers

Chris

---

**From:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>

**Sent:** Thursday, 11 July 2019 4:25 PM

**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Hello Chris,

Hope this email finds you well.

That is just a screenshot of UTS website that indicates, I believe, no student can transfer/enroll from other institution to UTS TCM course in the mid year (July 2019). It is cancelled.

**Kind Regards!**

**Weihong**

---

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine  
School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06.326 Email:weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: <sup>s.2.1.3.</sup> [REDACTED]

---

**From:** Christopher Zaslowski  
**Sent:** Thursday, 11 July 2019 4:09 PM  
**To:** Weihong Li  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Thanks Weihong but it is too small and I cannot read it.


Sent from my Samsung Galaxy smartphone.

----- Original message -----

**From:** Weihong Li <Weihong.Li-1@uts.edu.au>  
**Date:** 11/07/2019 12:04 (GMT+07:00)  
**To:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>, Emma King <Emma.King@uts.edu.au>, Bouavirone Choy <Bobbie.Choy@uts.edu.au>, Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>, Carolyn Michael <Carolyn.Michael@uts.edu.au>, Huiling Yao <Huiling.Yao@uts.edu.au>, Dale Elsdon <Dale.Elsdon@uts.edu.au>, Shuai Zheng <Shuai.Zheng@uts.edu.au>, Mary Garvey <Mary.Garvey@uts.edu.au>, Chunlin Zhou <Chunlin.Zhou@uts.edu.au>, Nancy Morgan <Nancy.Morgan@uts.edu.au>, Sean Walsh <Sean.Walsh@uts.edu.au>, Xianqin Qu <Xianqin.Qu@uts.edu.au>, Stella Valenzuela <Stella.Valenzuela@uts.edu.au>, Peter Meier <Peter.Meier@uts.edu.au>  
**Cc:** William Gladstone <William.Gladstone@uts.edu.au>, Raelene La Ferla <Raelene.LaFerla@uts.edu.au>  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Dear all,



What do you think of this attached file? 

**Kind Regards!**

**Weihong**

---

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine  
School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06.326 Email:weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: <sup>5213</sup> 

---

**From:** Dean of Science TCM

**Sent:** Tuesday, 9 July 2019 12:36 PM

**To:** Emma King; Bouavirone Choy; Christopher Zaslowski; Carolyn Michael; Huiling Yao; Weihong Li; Dale Elsdon; Shuai Zheng; Mary Garvey; Chunlin Zhou; Nancy Morgan; Sean Walsh; Xianqin Qu; Stella Valenzuela; Peter Meier; Christopher Zaslowski

**Cc:** William Gladstone; Raelene La Ferla

**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As it has been a number of weeks since I last communicated with you about the review of the Traditional Chinese Medicine program at UTS, I want to update you on what has been happening since my last communication. No final decision has yet been made at this stage about the future of the program. Before a final decision is made there are still a number of formal process steps that must be taken including discussions at Faculty and University level. These are scheduled to occur over the next two months.

We aim to have more information available as soon as possible after these meetings, and will be communicating with staff and students before re-enrolments for 2020 commence in mid-October. We acknowledge the uncertainty you are currently experiencing, but we must take the necessary time to consider all relevant information and make the right decision. We will continue to communicate with you as the process continues.

Affected staff will be consulted on how any decision impacts on them. We remain committed to students completing their studies and, when a final decision has been made, UTS will communicate with students to ensure we honour that commitment.

You are welcome to send further enquiries to [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) in the future. We have shared all information available at the moment.

Kind regards,  
Dianne Jolley

**Professor Dianne Jolley**

Dean

Faculty of Science  
University of Technology Sydney  
15 Broadway, ULTIMO NSW 2007  
W: [uts.edu.au](http://uts.edu.au)



**From:** [Theo Magoulas](#)  
**To:** [Dean of Science TCM](#); [Lesley Healy](#); [Raelene La Ferla](#); [Greg Welsh](#)  
**Subject:** RE: CM Staff update – Traditional Chinese Medicine program  
**Date:** Monday, July 15, 2019 5:04:22 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[Chinese-Medicine-Board---Communique---Meeting-of-the-Chinese-Medicine-Board-of-Australia---25-June-2019.DOCX](#)  
[Chinese-Medicine-Board---Accreditation-standards---December-2013.pdf](#)

---

Hi Dianne,

Please find attached the latest communication of the Chinese Medicine Board (CMB).  
I note that Associate Professor Christopher Zaslowski has been appointed to the Chinese Medicine Board Accreditation Committee from 1 September 2019.  
I am not sure if Chris has disclosed this to the Faculty of Science.

I have also attached the Chinese Medicine Board accreditation standards which are aligned with the Higher education standards framework (Threshold Standards) 2011 (threshold HES).

The Higher Education standards and their requirements are what UTS must satisfy and until UTS has made a formal decision regarding the Traditional Chinese Medicine program there is no requirement to make a notification. Also, UTS would notify the Commonwealth before it provides a notice to the CMB.

Once UTS has made a decision of how it would teach out the TCM course then it would provide the notice to the CMB.

As mentioned earlier the CMB Accreditation Committee terms of reference have no formal legal impact on UTS and its decision concerning the TCM program.

Regards  
Theo

Theo Magoulas  
University Solicitor  
UTS - Legal Services  
University of Technology Sydney  
Level 18, Building 1, Broadway Campus  
(PO Box 123)  
BROADWAY NSW 2007, Australia

---

phone: +61 (2) 9514 9753; fax: +61 (2) 9514 1288  
email: [Theo.Magoulas@uts.edu.au](mailto:Theo.Magoulas@uts.edu.au)

---

**From:** Theo Magoulas  
**Sent:** Monday, 15 July 2019 10:48 AM  
**To:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>; Lesley Healy <Lesley.Healy@uts.edu.au>; Raelene La Ferla <Raelene.LaFerla@uts.edu.au>; Greg Welsh <Greg.Welsh@uts.edu.au>  
**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Hi Dianne,

I will look at the terms of reference, however the terms of reference do not apply to UTS. The Chinese Medicine Board terms of reference only apply to how the Chinese Medicine Board would make decisions concerning accreditation. The Chinese Medicine Board would have to formally notify UTS of their concerns and provide UTS with the opportunity to respond.

Regards  
Theo

Theo Magoulas  
University Solicitor  
UTS - Legal Services  
University of Technology Sydney  
Level 18, Building 1, Broadway Campus  
(PO Box 123)  
BROADWAY NSW 2007, Australia

---

phone: +61 (2) 9514 9753; fax: +61 (2) 9514 1288  
email: [Theo.Magoulas@uts.edu.au](mailto:Theo.Magoulas@uts.edu.au)

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Sent:** Monday, 15 July 2019 9:42 AM  
**To:** Theo Magoulas <[Theo.Magoulas@uts.edu.au](mailto:Theo.Magoulas@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program

Hi Theo,

This is a follow-up email regarding the obligation to communicate to the Chinese Medicine Board. Would you mind having a look at this also.

From a communication point of view, could we consider whether a formal communication to the Chinese Medicine Board letting them know we are considering options presents any risk (whether

we are obliged to or not).

Lesley & Rae, I am forwarding to you from the consultation/staff wellbeing perspective. FYI only.

Kind rgds,  
Kate

---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Friday, 12 July 2019 5:43 PM  
**To:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program

Dear Dianne

Thanks for your speedy response. As I communicated in an email prior to the Faculty SMG meeting last month, there is immeasurable human impact when initiating the closure of a course that has high respect amongst the local community, student body, international organisations and institutes and the wider Australian health professions. I appreciate your response and hope the UAC information can be remediated before there is too much emotional impact on the students and staff (see Weihong's personal reply to me below).

I just checked the FAQ on the accreditation committee website (<https://www.chinesemedicineboard.gov.au/Accreditation/Accreditation-FAQ.aspx>) and it has the following response to the FAQ "What if we want to change one of our approved programs?"

An education provider that has changed, or plans to change, a program that is on the Board's list of approved programs must notify the Accreditation Committee about the change. Contact the Accreditation Unit for more information.

I believe the decision to suspend domestic and international student admission for 2020 would meet that threshold for notification. We have an annual report the Program Director submits to the AHPRA accreditation committee that requires student intake numbers, progressions and subject failures for each year and this will be need to be submitted at the appropriate time.

I also checked the actual Chinese medicine course accreditation standards as well and found that standard 4.6 relates to course termination.

*"Standard 4.6 Program monitoring, review, updating and termination*

The education provider ensures its Chinese medicine program is regularly monitored, reviewed and updated to ensure compliance with the accreditation standards and that program change, including termination, will be appropriately managed, consistent with the requirements for course accreditation specified in the threshold HES " (Higher Education Standards)

As you are aware the UTS course currently has no conditions and only one monitoring condition.

Please let me know how I should respond to the email from the Chair of the AHPRA accreditation committee as I do need to respond to him in a timely manner. Your guidance would be much appreciated

Cheers

Chris (In <sup>s.2.1.3.</sup> )

---

**From:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 4:41 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Thanks Chris for prompt reply.

I was told by students that it triggered big anger, panic ..... Tears come to my eyes when I am writing to you for some reasons...

**Kind Regards!**

**Weihong**

---

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine  
School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06.326 Email:weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: <sup>s.2.1.3.</sup>

---

**From:** Christopher Zaslowski  
**Sent:** Thursday, 11 July 2019 4:29 PM  
**To:** Weihong Li  
**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Thanks Weihong  
I just forwarded a response from me to the wording “course is cancelled”. Thanks for picking that up.  
Cheers  
Chris

---

**From:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 4:25 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program

Hello Chris,

Hope this email finds you well.

That is just a screenshot of UTS website that indicates, I believe, no student can transfer/enroll from other institution to UTS TCM course in the mid year (July 2019). It is cancelled.

Kind Regards!

Weihong

---

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine  
School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06.326 Email:weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: <sup>s.2.1.3.</sup> [REDACTED]

---

**From:** Christopher Zaslowski  
**Sent:** Thursday, 11 July 2019 4:09 PM  
**To:** Weihong Li  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program


Thanks Weihong but it is too small and I cannot read it.

Sent from my Samsung Galaxy smartphone.

----- Original message -----

From: Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>  
Date: 11/07/2019 12:04 (GMT+07:00)  
To: Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>, Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>, Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>, Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>, Carolyn Michael <[Carolyn.Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)>, Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>, Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>, Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>, Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>, Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>, Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>, Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>, Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>, Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>, Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
Cc: William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>, Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
Subject: Re: CM Staff update – Traditional Chinese Medicine program

Dear all,

What do you think of this attached file? 

Kind Regards!

Weihong

---

Dr Weihong Li PhD  
Lecturer- UTS College of Traditional Chinese Medicine

School of life sciences  
Faculty of science  
University of Technology Sydney  
Room: CB04.06.326 Email: weihong.li-1@uts.edu.au  
Phone: +61 02 95144096 Mob: <sup>s.2.1.3.</sup> [REDACTED]

---

**From:** Dean of Science TCM

**Sent:** Tuesday, 9 July 2019 12:36 PM

**To:** Emma King; Bouavirone Choy; Christopher Zaslowski; Carolyn Michael; Huiling Yao; Weihong Li; Dale Elsdon; Shuai Zheng; Mary Garvey; Chunlin Zhou; Nancy Morgan; Sean Walsh; Xianqin Qu; Stella Valenzuela; Peter Meier; Christopher Zaslowski

**Cc:** William Gladstone; Raelene La Ferla

**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As it has been a number of weeks since I last communicated with you about the review of the Traditional Chinese Medicine program at UTS, I want to update you on what has been happening since my last communication. No final decision has yet been made at this stage about the future of the program. Before a final decision is made there are still a number of formal process steps that must be taken including discussions at Faculty and University level. These are scheduled to occur over the next two months.

We aim to have more information available as soon as possible after these meetings, and will be communicating with staff and students before re-enrolments for 2020 commence in mid-October. We acknowledge the uncertainty you are currently experiencing, but we must take the necessary time to consider all relevant information and make the right decision. We will continue to communicate with you as the process continues.

Affected staff will be consulted on how any decision impacts on them. We remain committed to students completing their studies and, when a final decision has been made, UTS will communicate with students to ensure we honour that commitment.

You are welcome to send further enquiries to [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) in the future. We have shared all information available at the moment.

Kind regards,

Dianne Jolley

**Professor Dianne Jolley**

Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Kate Higgs](#)  
**To:** [Helen Hume](#)  
**Subject:** RE: CM Staff update – Traditional Chinese Medicine program  
**Date:** Monday, July 15, 2019 5:23:00 PM  
**Attachments:** [image009.png](#)  
[image010.png](#)  
[image011.png](#)  
[image012.png](#)  
[image013.png](#)  
[image014.png](#)  
[image015.png](#)  
[image016.png](#)

---

Thanks Helen.

I asked Greg, Lesley & Rae to review from a communication, consultation and HR point of view.

Kind rgds,

Kate

---

**From:** Helen Hume <[Helen.Hume@uts.edu.au](mailto:Helen.Hume@uts.edu.au)>  
**Sent:** Monday, 15 July 2019 5:18 PM  
**To:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program

Thanks for confirming that you got something out.

Cheers

Helen

**Helen Hume**

Faculty General Manager

**Faculty of Science**

University of Technology Sydney

T. +61 (0)2 9514 1753

M +61(0) [5.2.1.3.](#)

PO Box 123 Broadway NSW 2007 Australia

Executive Assistant: Kairi Kaljo ([Kairi.Kaljo@uts.edu.au](mailto:Kairi.Kaljo@uts.edu.au)) T.+61 (0)2 9514 1768

[science.uts.edu.au](http://science.uts.edu.au)

[uts.edu.au](http://uts.edu.au)



---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Sent:** Monday, 15 July 2019 5:07 PM  
**To:** Fiona Henry <[Fiona.Henry@uts.edu.au](mailto:Fiona.Henry@uts.edu.au)>; Helen Hume <[Helen.Hume@uts.edu.au](mailto:Helen.Hume@uts.edu.au)>; Graham Nicholson <[Graham.Nicholson@uts.edu.au](mailto:Graham.Nicholson@uts.edu.au)>; Doreen Borg <[Doreen.Borg@uts.edu.au](mailto:Doreen.Borg@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>; Willa Huston <[Wilhelmina.Huston@uts.edu.au](mailto:Wilhelmina.Huston@uts.edu.au)>  
**Cc:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** FW: CM Staff update – Traditional Chinese Medicine program

Hi all,

FYI – the following communication has been sent to CM staff;

- confirming where we are in the review process
- that a final decision has not been made
- that support is available to CM staff
- further communication will be provided after Faculty Board (although it may be provided in advance also)

Kind rgds,

Kate

---

**From:** Dean of Science TCM  
**Sent:** Monday, 15 July 2019 4:56 PM  
**To:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As you know, the management of the Faculty of Science at UTS has recently been undertaking a review of the Traditional Chinese Medicine program. The review considered a range of information about the program, including staffing profiles, courses and teaching, student load, financial position within the faculty, course viability analyses, accreditation, benchmarking QILT, research training,

research activity and productivity, external engagement, and TCM at other universities. Chinese Medicine staff had two opportunities to respond to the draft document, and their comments were received, considered and incorporated into the review where appropriate.

As part of the review, the Science Senior Management Group were then asked to support one of two options as a recommendation to the Provost:

- Discontinuation of the program at UTS
- Build up the program

The Senior Management Group acknowledged the length of time the program has run, the high quality of the students, the excellent QILT outcomes, and their respect of their colleagues. However, based on the program's poor financial viability, research productivity, and strategic fit within Science, the outcome of the discussion was a majority vote to phase out/discontinue the program.

Whilst no final decision is made prior to the formal process in accordance with the UTS Award Course Approval Policy and Procedures, I wish to provide as much transparency as possible and will continue to communicate with staff, students and other stakeholders as we are able. We will provide a further update after the Faculty Board meeting to be held later in July.

The university acknowledges the uncertainty staff are currently dealing with. Staff are encouraged to utilise support as needed via UTS Human Resources, our partner being Raelene La Ferla, and/or our UTS Employee Assistance Program support provider, PeopleSense (1300 307 912). Note, we are also looking at providing individual support to you and your colleagues during this process and I will be in touch with more details on this soon.

Thank you once again for your contributions and professionalism through this review process.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Greg Welsh](#)  
**To:** [Dean of Science TCM](#)  
**Subject:** Re: CM Staff update – Traditional Chinese Medicine program  
**Date:** Monday, July 15, 2019 7:03:56 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

Sure thing Kate  
G

Sent from my iPhone

On 15 Jul 2019, at 6:57 pm, Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)> wrote:

Hi Greg,

Just confirming you will share this staff communication with WSU (Amanda Whibley) if/as required.

Thanks,

Kate

---

**From:** Dean of Science TCM  
**Sent:** Monday, 15 July 2019 4:56 PM  
**To:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michael <[Carolyn.Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As you know, the management of the Faculty of Science at UTS has recently been undertaking a review of the Traditional Chinese Medicine program. The review considered a range of information about the program, including staffing profiles, courses and teaching, student load, financial position within the faculty, course viability analyses, accreditation, benchmarking QILT, research training, research activity and productivity, external engagement, and TCM at other universities. Chinese Medicine staff had two opportunities to respond to the draft document, and their comments were received, considered and incorporated into the review where appropriate.

As part of the review, the Science Senior Management Group were then asked to support one of two options as a recommendation to the Provost:

- Discontinuation of the program at UTS

- Build up the program

The Senior Management Group acknowledged the length of time the program has run, the high quality of the students, the excellent QILT outcomes, and their respect of their colleagues. However, based on the program's poor financial viability, research productivity, and strategic fit within Science, the outcome of the discussion was a majority vote to phase out/discontinue the program.

Whilst no final decision is made prior to the formal process in accordance with the UTS Award Course Approval Policy and Procedures, I wish to provide as much transparency as possible and will continue to communicate with staff, students and other stakeholders as we are able. We will provide a further update after the Faculty Board meeting to be held later in July.

The university acknowledges the uncertainty staff are currently dealing with. Staff are encouraged to utilise support as needed via UTS Human Resources, our partner being Raelene La Ferla, and/or our UTS Employee Assistance Program support provider, PeopleSense (1300 307 912). Note, we are also looking at providing individual support to you and your colleagues during this process and I will be in touch with more details on this soon.

Thank you once again for your contributions and professionalism through this review process.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)

<image001.png> <image002.png> <image003.png> <image004.png> <image005.png> <image006.png>

<image007.png>

**From:** [Raelene La Ferla](#)  
**To:** [Christopher Zaslowski](#); [Weihong Li](#); [Emma King](#); [Bouavirone Choy](#); [Carolyn Michaeli](#); [Huiling Yao](#); [Dale Elsdon](#); [Shuai Zheng](#); [Mary Garvey](#); [Chunlin Zhou](#); [Nancy Morgan](#); [Sean Walsh](#); [Xianqin Qu](#); [Stella Valenzuela](#); [Peter Meier](#)  
**Cc:** [William Gladstone](#); [Dean of Science TCM](#)  
**Subject:** RE: CM Staff update – Traditional Chinese Medicine program  
**Date:** Thursday, July 18, 2019 6:33:46 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image008.png](#)  
[image009.png](#)

---

Dear Chris,

As you may know Dianne is away at the moment so I thought I would answer this question in her absence.

After reading your email I referred back to the CM Status Report and to the Addendum to the report, which includes the feedback provided by CM staff during the consultation period 29 May – 6 July. It appears that the points you have raised regarding publications and strategic fit have been incorporated into the Review/Addendum, and that feedback has been received, considered and will inform the decision making process. I will confirm this with Dianne and Bill on their return.

Regarding your point on Financial Viability, I am unfortunately not across this detail and I will also confirm with them that the information you have provided has been taken into consideration in the CM Status Report

I'm <sup>s.2.1.3.</sup> [REDACTED] but back in the office on Monday and happy to answer any further questions you may have.

Kind regards

Rae

**Raelene La Ferla**

Human Resources Partner

**Human Resources Unit (HRU)**

University of Technology Sydney

T. +61 (02) 9514 1075

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)





**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>

**Sent:** Tuesday, 16 July 2019 7:40 PM

**To:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>; Weihong Li <Weihong.Li-1@uts.edu.au>; Emma King <Emma.King@uts.edu.au>; Bouavirone Choy <Bobbie.Choy@uts.edu.au>; Carolyn Michael <Carolyn.Michael@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Stella Valenzuela <Stella.Valenzuela@uts.edu.au>; Peter Meier <Peter.Meier@uts.edu.au>

**Cc:** William Gladstone <William.Gladstone@uts.edu.au>; Raelene La Ferla <Raelene.LaFerla@uts.edu.au>

**Subject:** RE: CM Staff update – Traditional Chinese Medicine program

Dear Dianne

Thank you for the update and the disappointing decision of the Senior Management Group to phase out/discontinue the Chinese medicine program. Has this been communicated to the student body at this point in time? We note that the reasons given for the decision revolve around financial viability, research productivity, and strategic fit.

In regard to financial viability we have consistently raised the issue of the indirect costs associated with the program, <sup>s.2.1.5.</sup> [REDACTED]

[REDACTED] This issue has not been addressed in any communication from yourself or Bill in regards to the equity across the Science programs. In addition the modelling was based on two academics (<sup>R-1.2</sup> [REDACTED] and <sup>s.2.1.3.</sup> [REDACTED])

) teaching into the program. In fact during that period of time we had to cover their teaching responsibilities with casual contracts which resulted in higher than normal costs. I fed back to Bill and John but no changes were made to the financial costs during that period. A realistic costing needs to be done to ensure an accurate picture of funding for the retrospective period.

In relation to research productivity during the years 2017-2018, the CM academics and their HDR students published or received a DOI (and have gone on to publication) for **32 publications** (listed below). These included systematic reviews including one Cochrane Systematic Review, experimental studies, surveys, clinical trials, scale development, laboratory studies and educational papers. I am not sure why these publications were not taken into account when evaluating the research productivity for the group and how an argument can be made about poor research productivity.

1. Choi T-Y, Lee MS, Kim JI, **Zaslowski C** (2017) Moxibustion for the treatment of osteoarthritis: An updated systematic review and meta-analysis. *Maturitas* 100:33-48 Jun 2017
2. **Eldson DS**, Spanswick S, **Zaslowski C**, **Meier PC**. (2017) Protocol: Testing the relevance of acupuncture theory in the treatment of myofascial pain in the upper trapezius muscle. *Journal of Acupuncture and Meridian Studies* (2017), doi: 10.1016/j.jams.11.007.
3. **Zheng S**, Kim C, **Meier P**, Sibbritt D and **Zaslowski, C**. (2017) Development of a novel questionnaire for the TCM pattern diagnosis of stress. *Journal of Acupuncture and Meridian Studies* Doi: 10.1016/j.jams.2017.06.002
4. Lee HW, Lee MS, Kim TH, Alraek T, **Zaslowski C**, Kim JW, Moon DG Cochrane Urology draft protocol - Ginseng versus placebo for erectile dysfunction (2017) DOI: 10.1002/14651858.CD012654
5. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. (2017) The effects of a structured mindfulness program on the development of empathy in healthcare students. *NursingPlus Open* Volume 3, 2017, Pages 1-5.
6. **Shuai Zheng**, Christine Kim, Sara Lal, **Peter Meier**, David Sibbritt, **Chris Zaslowski**. (2017) Tai Chi and Stress: A Randomised Controlled Trial. *Journal of Clinical Psychology* DOI: 10.1002/jclp.22482
7. Caroline A Smith, **Christopher J. Zaslowski**, Suzanne Cochrane, Xiaoshu Zhu, Zhen Zheng, Bertrand Loyeung, **Peter C Meier**, **Sean Walsh**, Charlie Changli Xue, Anthony L. Zhang, Paul P Fahey, Alan Bensoussan (2017) Reliability of the NICMAN Scale: an instrument to assess the quality of acupuncture administered in clinical trials. *Evidence Based Complementary and Alternative Medicine* doi:10.1155/2017/5694083
8. Dean S, Foureur M, **Zaslowski C**, Newton-John T and Yu N. Mindfulness in Physical and Occupational Therapy Education and Practice: A Scoping Review *Physical Therapy Reviews* doi.org/10.1080/10833196.2017.1341594
9. Shohreh Razavy; Shi Ping Zhang; Marcus Gadau; Christine Berle; **Weihong Li**; Fu



- Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap\_and **Christopher Zaslowski**: Psychophysical responses in patients receiving a mock laser within context of an acupuncture clinical trial: An Interoceptive perspective; *BMC Complementary and Alternative Medicine* DOI 10.1186/s12906-017-1859-0
10. Shohreh Razavy, Shi Ping Zhang, Ph.D; Marcus Gadau; Christine Berle; **Weihong Li**; Fu Chun Wang; Sergio Bangrazi; Tie Li; Mahrita Harahap, **Christopher Zaslowski**. Investigation of the phenomenon of Propagated Sensation along the Channels (PSCs) in the upper limb following administration of acupuncture and mock laser *Journal of Acupuncture and Meridian Studies* DOI: 10.1016/j.jams.2017.06.007
  11. Lees, T., Nassif, N., Simpson, A., Shad-Kaneez, F., Martiniello-Wilks, R., Lin, Y., Jones, A., **Qu, X.** & Lal, S. 2017, 'Recent advances in molecular biomarkers for diabetes mellitus: a systematic review.', *Biomarkers*, pp. 1-13.
  12. Ong, M., Peng, J., Jin, X. & **Qu, X.** 2017, 'Chinese Herbal Medicine for the Optimal Management of Polycystic Ovary Syndrome.', *Am J Chin Med*, vol. 45, no. 3, pp. 405-422.
  13. **Zheng, S.**, Kim, C, **Lal, S.**, **Meier, P.**, Sibbritt, D & **Zaslowski, C** 2018, 'The Effects of Twelve Weeks of Tai Chi Practice on Anxiety in Stressed But Healthy People Compared to Exercise and Wait-List Groups-A Randomized Controlled Trial.', *Journal of Clinical Psychology*, vol. 74, no. 1, pp. 83-92. (IF 2.330).
  14. Dean, S., **Walsh, S.**, Williams, C., **Zaslowski, C.**, Morgan, A., & Levett-Jones, T. 2018, 'The mystery shopper student learning experience in undergraduate health education: A case study', *Nurse Education Today*, vol. 70, no. 2018, pp. 69-70. (IF 2.53; quartile 1, 6/133)
  15. Oh, J.E., **Walsh, S.**, & **Zaslowski, C.J.**, 2018, 'A 10 year comparison update: A survey of soci- demographics and practice characteristics of members of the Australian Acupuncture and Chinese Medicine Association', *Australian Journal of Acupuncture and Chinese Medicine*, vol. 12, no. 1, pp. 19-25. (IF unknown; quartile 4, 90/103)
  16. Choi, Y.B., Cobbin, D. & **Walsh, S.** 2018, 'Does Modern Research Concerning Chinese Medicine Acupoints Relate to Original Prescriptions? If Not, Why Not?', *Medical Acupuncture*. <https://doi.org/10.1089/acu.2018.1300>
  17. Razavy, S., Gadau, M., Zhang, S.P., Wang, F.C., Bangrazi, S., Berle, C., Li, T., **Li, W.H.**, **Zaslowski, C.** 2018, 'Anxiety related to De Qi psychophysical responses as measured by MASS: A sub-study embedded in a multisite randomised clinical trial', *Complementary Therapies in Medicine*, vol. 39, pp. 24-35. doi: 10.1016/j.ctim.2018.05.009. Epub 2018 May 22 (IF 1.49; quartile 1, 9/103)
  18. Popplewell M, Reizes J, **Zaslowski C.** 'Appropriate Statistics for Determining Chance-Removed Interpractitioner Agreement', *Journal of Alternative Complementary Medicine* 2018 May 31. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
  19. Loyeung B, Lee J, **Michaeil C**, **Zaslowski C.** 2018, 'An experimental study in distinguishing an authentic herbal substance from sham herbal substances', *Complementary Therapies in Medicine*. 2018 Aug;39:92-96. doi: 10.1016/j.ctim.2018.04.005. Epub 2018 Apr 11. (IF 1.54; quartile 1, 9/103)
  20. Popplewell M, Reizes J, **Zaslowski C.** 2018 'Consensus in Traditional Chinese Medical Diagnosis in Open Populations', *Journal of Alternative and*

- Complementary Medicine. 2018 Mar 1. doi: 10.1089/acm.2017 (IF 1.49; quartile 1, 22/103)
21. Xiao H, **Zaslowski C**, Vardy J, Oh B. 2018 'Treatment of Sciatica Following Uterine Cancer with Acupuncture: A Case Report', *Medicines (Basel)*, vol. 5, no. 1, pii: E6. doi: 10.3390/medicines5010006 (IF unknown)
  22. Yu, XF, **Zaslowski C** and Lim DCE. (2018) Vitamin D on glycaemia control in type 2 diabetes patients: a systematic review of randomised clinical Trials. *Journal of the Australian Traditional Medicine Society*, vol. 13, no. 2, pp. 82-88. (IF unknown; quartile 4, 98/103)
  23. Popplewell M, Reizes J, **Zaslowski C**. 2018, 'A Novel Approach to Describing Traditional Chinese Medical Patterns: The Traditional Chinese Medical Diagnostic Descriptor', *Journal of Alternative and Complementary Medicine* <https://doi.org/10.1089/acm.2018.0065> 2018. (IF 1.498)
  24. **McCambridge AB**, **Zaslowski, C.** & **Bradnam, V.** 2018 'The effect of verum and sham acupuncture on corticomotor excitability in healthy adults', *Clinical Neurophysiology*, vol. 129, s1, pp. e119. DOI: 10.1097/WNR.0000000000001159
  25. Oh B, Eade T, Kneebone A, Hruby G, Lamoury G, Pavlakis N, Clarke S, **Zaslowski C**, Marr I, Costa D, Back M. 2018, 'Acupuncture in Oncology: The Effectiveness of Acupuncture May Not Depend on Needle Retention Duration', *Integrative Cancer Therapies*, vol. 17, no. 2, pp. 458-66. doi: 10.1177/1534735417734912 (IF 2.65; quartile 1, 11/103)
  26. Oh B, Yeung A, Klein P, Larkey L, Ee C, **Zaslowski C**, Knobf T, Payne P, Stener-Victorin E, Lee R, Choi W, Chun M, Bonucci M, Lang HD, Pavlakis N, Boyle F, Clarke S, Back M, Yang P, Wei Y, Guo X, Weng CD, Irwin MR, Elfiky AA, Rosenthal D. 2018 'Accreditation Standard Guideline Initiative for Tai Chi and Qigong Instructors and Training Institutions', *Medicines (Basel)*. Vol. 5, no. 2, pii: E51. doi: 10.3390/medicines502005
  27. **Ong M**, Cheng J, Jin X, Lao W, Johnson M, Tan Y, **Qu X**. 2018 'Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of cytochrome P450 17A1 expression in primary murine theca cells.' *J Ethnopharmacol*, vol. 229, pp. 97-103. doi: 10.1016/j.jep.2018.09.006.
  28. Chen H, McGowan EM, Ren N, Lal S, Nassif N, Shad-Kaneez F, **Qu X**, Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. *Biomark Insights*. 2018 Jul 5;13:1177271918785130. doi: 10.1177/1177271918785130.
  29. Reyna Zeballos, J.L. & **Meier, P** 2018, 'A Practical Model for Implementing Digital Media Assessments in Tertiary Science Education', **American Journal of Educational Research**, vol. 6, no. 1, pp. 27-31.
  30. Reyna Zeballos, J.L., Hanham, J & **Meier, P** 2018, 'The Internet explosion, digital media principles and implications to communicate effectively in the digital space', *E-Learning and Digital Media*, vol. 15, no. 1, pp. 36-52.
  31. Reyna Zeballos, J.L. & **Meier, P.**, Hanham, J 2018, 'A Framework for Digital Media Literacies for Teaching and Learning in Higher Education', **E-Learning and Digital Media**, vol. 15, no. 4.
  32. Reyna Zeballos, J.L. & **Meier, P** 2018, 'Using the Learner-Generated Digital Media (LGDM) Framework in Tertiary Science Education: A Pilot Study', **Education Sciences**, vol. 8, no. 3, pp. 1-23.

As to strategic fit, the CM course has been taught within the Faculty of Science since 1994. The course has several research methods subjects within the curriculum and has a reasonable group of HDR students undertaking clinical and experimental projects across a variety of areas. We specialise in neuroscience (trans-magnetic cortical stimulation for example) and clinical aspects of acupuncture. We have a positive outcome for a multisite clinical trial publication coming out this year for tennis elbow pain and several publications already for 2019.

The CM group are at odds to understand how the decision was made by SMG concerning these three areas.

Thanks Chris (in s2.13.)

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>

**Sent:** Monday, 15 July 2019 4:56 PM

**To:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>

**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** CM Staff update – Traditional Chinese Medicine program

Dear colleagues,

As you know, the management of the Faculty of Science at UTS has recently been undertaking a review of the Traditional Chinese Medicine program. The review considered a range of information about the program, including staffing profiles, courses and teaching, student load, financial position within the faculty, course viability analyses, accreditation, benchmarking QILT, research training, research activity and productivity, external engagement, and TCM at other universities. Chinese Medicine staff had two opportunities to respond to the draft document, and their comments were received, considered and incorporated into the review where appropriate.

As part of the review, the Science Senior Management Group were then asked to support one of two options as a recommendation to the Provost:

- Discontinuation of the program at UTS
- Build up the program

The Senior Management Group acknowledged the length of time the program has run, the high quality of the students, the excellent QILT outcomes, and their respect of their colleagues. However,

based on the program's poor financial viability, research productivity, and strategic fit within Science, the outcome of the discussion was a majority vote to phase out/discontinue the program.

Whilst no final decision is made prior to the formal process in accordance with the UTS Award Course Approval Policy and Procedures, I wish to provide as much transparency as possible and will continue to communicate with staff, students and other stakeholders as we are able. We will provide a further update after the Faculty Board meeting to be held later in July.

The university acknowledges the uncertainty staff are currently dealing with. Staff are encouraged to utilise support as needed via UTS Human Resources, our partner being Raelene La Ferla, and/or our UTS Employee Assistance Program support provider, PeopleSense (1300 307 912). Note, we are also looking at providing individual support to you and your colleagues during this process and I will be in touch with more details on this soon.

Thank you once again for your contributions and professionalism through this review process.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

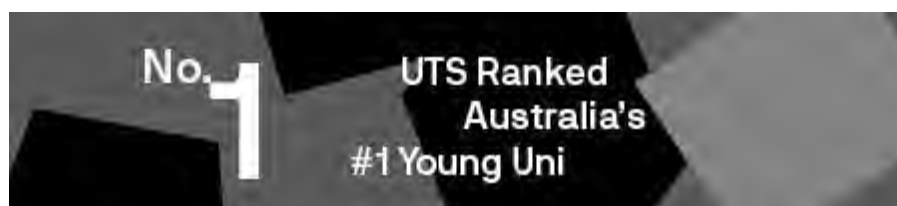
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [William Gladstone](#)  
**To:** [Christopher Zaslowski \(Chris.Zaslowski@uts.edu.au\)](mailto:Chris.Zaslowski@uts.edu.au)  
**Bcc:** [William Gladstone](#)  
**Subject:** CM Status report  
**Date:** Friday, June 14, 2019 9:53:00 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[CM status report Final 2019-06-12.docx](#)  
R-1.3. [TCM status report Revised 2019-05-29 2019-06-05 \(002\) responses.docx](#)

---

Dear Chris

Thanks very much for submitting your responses to the revised version of the status report.

I have replied to all of the comments/track changes that you provided in your response, and have shown how these have been addressed in the attached document. The Dean reviewed these changes and accepted the final version of the status report.

I have also attached the final version of the status report that was submitted by the Dean to the Provost yesterday, along with the review of options that was prepared by Peter. Therefore, the Provost now has two documents: the status report, and Peter's review of the options. The latter was submitted without any commentary by the Dean or myself so that the position of CM could be fully represented to the Provost.

The Dean will also be communicating this to CM staff today, and Doreen or Kate Higgs will be in contact with you sometime today to confirm the staff who should be on the email distribution list.

Best regards

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** Christopher Zaslowski  
**To:** Sean Walsh; Mary Garvey; "Carolyn.Michael@uts.edu.au"; Nancy Morgan; Weihong Li; "Chunlin.Zhou@uts.edu.au"; Huiling Yao  
**Cc:** s.2.1.3. (Peter Meier's personal email)  
**Subject:** FW: Comment on options paper  
**Date:** Thursday, March 28, 2019 12:44:00 PM  
**Attachments:** TCM status report Draft 2019-03-06[119578].docx

---

If you haven't already started please use this annotated version by myself and Shuai.

Thanks all

Chris

---

**From:** Shuai Zheng <Shuai.Zheng@uts.edu.au>  
**Sent:** Thursday, 28 March 2019 12:31 PM  
**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Carolyn Michael <Carolyn.Michael@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Weihong Li <Weihong.Li-1@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>  
**Cc:** s.2.1.3. (Peter Meier's personal email)  
**Subject:** RE: Comment on options paper

My additions

Dr Shuai Zheng, PhD

Lecturer  
Chinese Medicine Program Director  
Subject Coordinator 99618 | 99651 | 99652 | 99584  
UTS | Science | SoLS | CM | CB04.06.350  
[shuai.zheng@uts.edu.au](mailto:shuai.zheng@uts.edu.au) | 61 2 9514 7854

---

**From:** Christopher Zaslowski  
**Sent:** Thursday, March 28, 2019 1:35:29 AM  
**To:** Sean Walsh; Shuai Zheng; Carolyn Michael; Mary Garvey; Weihong Li; Nancy Morgan; Huiling Yao; Chunlin Zhou; Dale Elsdon  
**Cc:** s.2.1.3. (Peter Meier's personal email)  
**Subject:** Comment on options paper

Dear all

I have made comments/suggestions to the options paper Bill has produced. Please add further relevant comment (using track changes) and send back to me by COB tomorrow. I have to submit to Bill on Friday.

Thanks Chris

**From:** [Christopher Zaslowski](#)  
**To:** Peter Meier; [Shuai Zheng \(Shuai.Zheng@uts.edu.au\)](mailto:Shuai.Zheng@uts.edu.au)  
**Subject:** Confirmation of info  
**Date:** Wednesday, June 5, 2019 9:57:00 AM

---

Hi Peter and Shuai

Our TCM amendments to Bill options paper has to be submitted today and I need to know several "enrolment and EFTSU" facts. Are these number correct and what is the current state for enrolled students and associated EFTSU for 2019 (census date for this semester)?

Peter- do you want me to attached the final version of your response (CM team) to Bills options paper as I refer to it in the Bills doc? If so if you could send me the updated and final version. If not how will you submit it?

Thanks Chris

*At the August 2018 census there were 176 enrolled students in TCM courses, representing 165 students in the Bachelor of Health Science in Traditional Chinese Medicine and 13 students in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies. The total taught EFTSL was 129.1, including 123.4 Commonwealth supported places and 5.7 international fee-paying places<sup>[1]</sup>.*

*The total number of commencing students in the TCM courses declined annually from the peak of 79 in 2015 to 55 in 2018, with the numbers increasing to 73 in 2019 (Table 3). The taught EFTSL represented by all TCM students declined from 167.3 in 2015 to 128 in 2018 (Table 4), and this is expected to show an increase in 2019 following the increased number of commencing students.*

---

<sup>[1]</sup> These numbers differ slightly from the numbers in Table 4 because of rounding of numbers in each row contributing to the total.

**From:** [Christopher Zaslowski](#)  
**To:** [Sean Walsh](#); [Nancy Morgan](#); "[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)"; [Weihong Li](#); [Shuai Zheng \(Shuai.Zheng@uts.edu.au\)](#); [Dale Elsdon](#); "[Carolyn.Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)"; "[Xianqin Qu](#)"; [Mary Garvey](#)  
**Subject:** Draft options response  
**Date:** Monday, December 17, 2018 6:36:00 PM  
**Attachments:** [Options paper.docx](#)

---

Dear all

As discussed at the meeting today here is the first draft of the options response paper. Please feel free to comment and add ideas especially to the risk and benefit section of the four options.

If you could get back with comments by the 1<sup>st</sup> January it would be much appreciated.

Thanks chris



## Options paper

**Preamble:** The CM program (Bachelor of Health Science in Traditional Chinese medicine (CXXXX) has been taught within the Faculty of Science for the last 24 years. At its introduction in 1994 it was located within the DVC unit and had one year to decide where it should be located within UTS. In 1995 the CM staff chose the Faculty of Science since the focus was on developing evidence based medicine and upskilling staff with research qualifications.

The CM program has developed throughout the 25 years it has been taught at UTS and has gained the reputation of being the premier CM educational program within Australia competing against several universities and private course providers as evidenced by the recent QILT data (see section 2.2). More recently in 2015 the course underwent an internal course accreditation review and was given a five year (2017-2021) reaccreditation period (rather than three years) due to its excellent performance all around. Green spheres were given for overall rating, UAC preference 1-3, student load, SFS agreement (overall satisfaction), success rate, attrition rate, FT employment rate and average salary (see appendix 1 for summary graphs of the OCAP report for short accreditation). A review of the 2017 CM program reported that

In addition the CM program was accredited with the Chinese Medicine Board of Australia as one of six programs in Australia where graduates were eligible for registration upon completion of the program. Under Section 43 of the Health Practitioner Regulation National Law (NSW) the UTS Chinese medicine program is accredited by an external accreditation committee established by the Chinese Medicine Board of Australia. This required the UTS program to be assessed according to the national accreditation standards. The program was subsequently assessed and accredited in December 2017 with one condition and four monitoring conditions, by far the least of any of the other five accredited programs in Australia.

More recently the Australian Government has recognised the value of CM to the Australian environment and the signed Australia-China Trade agreement (Free Trade Agreement between the Government of Australia and the Government of the People's Republic of China, 2015) incorporated specific statements and requirements into the World Trade agreement.

*2. Each Party, where possible, will encourage the relevant bodies in its territory to develop, where possible, mutually acceptable standards and criteria for licensing and certification, and to provide recommendations to the Committee on Trade in Services on mutual recognition with respect to service sectors mutually agreed by the Parties including engineering and Traditional Chinese Medicine.*

ARTICLE 8.15: QUALIFICATIONS RECOGNITION COOPERATION

Furthermore the CM team has developed a well patronised on-campus CM outpatient clinic that provides a valuable service to the local and wider Sydney community. As of 14<sup>th</sup> December, 2018 there had been 6149 clinical consultations with a gross income of \$224,000 during the year. This is one of few UTS activities that is representative of a successful commercial outward facing community service that also achieves excellent learning outcomes for the students as well. Attached to the clinical program is an outpatient clinic conducted at Concord Hospital at the Cancer Survivor Centre where final year students (under supervision) administer acupuncture to assist in the control of pain and dysfunction for cancer survivors.

Finally the CM academic staff has shown leadership both nationally as well as internationally. CM academics have contributed to:

- World Health Organization (policies and documents). Associate Professor Carole Rogers (ex-head of unit) and Associate Professor Chris Zaslowski have both been temporary consultants for several projects and reports (2003-2015).
- NSW Chinese Medicine Council (committees, activities) Associate Professor Chris Zaslowski was appointed President of the Council (2012-2018), and several CM academics (Dr Shuai Zheng and Mr Dale Elsdon) are appointed as “persons of authority” to investigate complaints received by the NSW Health Care Complaints Commission (2012-current).
- International Standards Organisation (ISO) where Associate Professor Chris Zaslowski led six Australian delegations (as Chair of the Standards Australian HE 031 committee) to ISO TC 249 plenary meetings (2009-2015).
- Chinese Medicine Board of Australia. Associate Professor Chris Zaslowski is currently on the AHPRA Course accreditation committee and several CM academics have been appointed to accreditation teams (Dr Shuai Zheng and Mr Dale Elsdon) (2012-current).
- International associations such as World Federation of Acupuncture and Moxibustion Societies (WFAS) and the World Federation of Chinese medicine Societies (WFCMS) who are both liaison organisations to the WHO. Associate Professor Chris Zaslowski currently an Executive Director of WFAS (2015-2018) and several CM staff members are on committees of both organisations. Associate Professor Xianqin Qu is XXX
- Australian Vice Chancellor Committee representatives for course accreditation purposes (2003, 2007).
- TESQA course accreditation committee membership (2010).
- New Zealand Qualifications Authority-appointment as course monitor (2010-2015).
- Course Accreditation Panel- Chair Hong Kong Baptist University, (2014).
- Founding Committee member of the Alliance of Chinese Medicine-Chinese Academy of Chinese Medical Sciences, Beijing China (2010).
- Ministry of Health (PRC) Training program for English speakers of Traditional Chinese medicine, Invited Guest lecturer: Beijing University of Chinese Medicine (2015, 2017).

The CM team also convened an international research conference at UTS in 2012 titled “Scientific Acupuncture and Meridian Symposium” that attracted international significance and attendees.

Finally CM team members have and continue to contribute to several internal UTS committees including the

- Human Research Ethics Committee (HREC),
- the clinical trials subcommittee of the HREC
- Course Accreditation Committee and the
- Learning futures peer reviewer scheme.

### TCM Staff and Student Numbers

The CM course has 206 students enrolled and 27 HDR students

	TCM Undergrad Students	Domestic	International
C10186	B Health Science in TCM	191	7
C10164	B Health Science in TCM/B Arts in International Studies	15	0
	<b>Total</b>	206	7

TCM HDR Students	
Doctor of Philosophy	19
Masters by Research	6
Total	25

### TCM Staff

- 1) FTE Permanent: (notional 40/40/20, TCM staff generally have higher teaching workloads negotiated)
  - 4.8 staff
  - s.2.1.3. [REDACTED]
- 2) FTE Permanent assigned to SSG
  - 1 staff
  - This staff member has a IR-1.2. [REDACTED] teaching load. The remainder is covered by staff on fixed term contracts
- 3) Fixed term contracts of 1 year ending 2018
  - 0.8 FTE staff (100% teaching)
  - 1.0 FTE staff (80% teaching)
- 4) Sessional fixed term for 3 years ending 2020
  - 0.6 FTE (100% teaching)
- 5) Clinical Educators (not technically academic contracts but counted as 100% teaching)
  - 1.2 FTE Permanent

Consequently, excluding workload of staff currently being replaced by fixed term, the total number of **FTE staff teaching into the program is 7.6 FTE** (this load is spread across 11 individuals, with varying teaching/research/other loadings)

- 6) Staff: student ratio 1:30

Counting staff including those on long service leave and secondment the total count is 9.4 FTE. It would be misleading to use this figure to produce a staff:student ratio

### Option 1- Maintain the course within the Faculty of Science but with conditions

Potential benefits to UTS regarding this option are:

Potential risks to UTS regarding this option are are:

### Option 2- Transfer the course to the Faculty of Health

Potential benefits to UTS regarding this option are:

Potential risks to UTS regarding this option are are:

**Option 3 - Transfer the course to another approved institution.**

Potential benefits to UTS regarding this option are:

Potential risks to UTS regarding this option are are:

**Option 4 - Close the course and teach out over the next four years (2019-2022)**

Potential benefits to UTS regarding this option are:

Potential risks to UTS regarding this option are are:

**From:** [Christopher Zaslowski](#)  
**To:** [William Gladstone](#)  
**Cc:** [Dianne Jolley](#); [Peter Meier](#)  
**Subject:** Draft report 2  
**Date:** Wednesday, June 5, 2019 4:38:42 PM  
**Attachments:** R-1.3. TCM status report Revised 2019-05-29 2019-06-05 (002).docx

---

Dear Dianne and Bill

Please find attached the second round of comments resulting from the second draft of the options paper from the CM team. I keep inserting the WTO article (8.15) which I believe is important to recognise, that the Australian government has tabled the support of Chinese medicine regulation and education in Australia. I have also updated the student numbers for 2019 based on the recent 2019 Autumn census and identified clearly the amount of funding left for salary and NSI after both Central and faculty have deducted their costs. I have used track changes so you can see the suggested changes. I believe Peter has also sent an options paper in addition to this report.

Thanks Chris

**From:** Christopher Zaslowski  
**To:** Sean Walsh; Shuai Zheng (Shuai.Zheng@uts.edu.au)  
**Subject:** FW: Draft report 2  
**Date:** Thursday, June 6, 2019 12:28:00 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)

---

Hi Sean and Shuai

Can you tell me the hours and subjects you teach into re Bills question? ASAP?

Cheers

Chris

---

**From:** William Gladstone <William.Gladstone@uts.edu.au>  
**Sent:** Thursday, 6 June 2019 9:34 AM  
**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Subject:** RE: Draft report 2

Dear Chris

One of the comments included in the report is this:

“Not mentioned here is that a couple of the staff also teach into other programs in science (Sean/Shuai) and into other faculties (Sean for Health/FTDI)”.

Do you have the details of this teaching eg number of hours?

Thanks

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup>

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** IR-13  
**To:** Dean of Science TCM; IR-13; [Stella Valenzuela](#); [Peter Meier](#)  
**Cc:** William Gladstone; Raelene La Ferla  
**Subject:** RE: TCM review update  
**Date:** Tuesday, July 23, 2019 8:52:16 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

Dear Dianne

Thank you for the update and clarification of several points despite it being disappointing and devastating news for the Chinese medicine staff and students. There are still two issues that from our perspective need clarification. The first is financial viability. The report that was supplied to the senior management group, Provost and the Faculty Board meeting, details that the indirect costs of the course (University and Faculty) were in the vicinity of <sup>s2.15</sup> [REDACTED]

[REDACTED] In the feedback to the first report I had asked for this information to be included in the final report however this was not included with no reason given (see below).

s2.15 [REDACTED]

The inclusion of this paragraph would have made very clear that the financial model for the course was unsustainable given that the remaining monies would not be enough to cover one academic wage at level C. Through our diligence and hard work in the clinic, the income monies would increase the amount available but not to the extent that it would be viable to cover more than 3 academic staff across the four year program.

The question that has yet to be answered from our perspective is, "Do other Science programs have such a large amount of indirect costs coming from the EFTSU to the extent that over 95% of the EFTSU is used for indirect costs exist and to what extent? "

The second issue relates to research publications. I supplied a list of publication for the report and while the 2017 publications were acknowledged, the publications for 2018 (n= 20) were not updated and included in the report (see below). I do not believe that the case can be made for poor research outputs and the additional 2018 publications should have been included in the report to give an accurate and reasonable picture of CM staff research.

Weighted pub points	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	3.29	227.66	230.95	1.4%	3.0%
<b>2015</b>	0.70	238.35	239.05	0.3%	2.9%
<b>2016</b>	3.04	273.41	276.45	1.1%	2.3%

<b>2017</b>	5.27	249.86	255.13	2.1%	4.9%
-------------	------	--------	--------	------	------

Total publications	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	9	490	499	1.8%	3.0%
<b>2015</b>	4	528	532	0.8%	2.9%
<b>2016</b>	19	616	635	3.0%	2.3%
<b>2017</b>	34	566	600	5.7%	4.9%

As to strategic fit at the University level, Complementary medicine was recently given an ERA rating of 4. While the majority of the publications came from the ARCCIM in the Faculty of Health, the CM teaching group did contribute to the result.

I would also reiterate that I believe the Faculty needs to inform the Chinese Medicine Accreditation Committee of the current status of the course as required under the CM accreditation guidelines. This would include proposed changes and student transfers. I have not yet replied to the email from the Chair of the committee because the responsibility to inform the committee should be with the faculty.

I also acknowledge the hard work and dedication of all the CM staff member who have consistently worked beyond their required responsibilities to realise what I believe are remarkable achievements in the clinic, research and teaching. I do not believe the outcome and the reports reflect their commitment and contribution to the wider society and Australian public that the course, graduates and the teaching clinic have made over the period.

Finally it was noted in your email that the last year of the phase out teaching would be 2021. This does not align with the current four year program progression whereby the current 1<sup>st</sup> year cohort would complete the course by the end of 2022.

Regards

IR-13.

---

**From:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>

**Sent:** Tuesday, 23 July 2019 3:30 PM

**To:** Weihong Li <Weihong.Li-1@uts.edu.au>; Emma King <Emma.King@uts.edu.au>; Bouavirone Choy <Bobbie.Choy@uts.edu.au>; Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>; Carolyn Michaeil <Carolyn.Michaeil@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Stella Valenzuela <Stella.Valenzuela@uts.edu.au>; Peter Meier <Peter.Meier@uts.edu.au>

**Cc:** William Gladstone <William.Gladstone@uts.edu.au>; Raelene La Ferla



<Raelene.LaFerla@uts.edu.au>

**Subject:** TCM review update

Dear colleagues

To help staff, students and interested community members better understand the review of Traditional Chinese Medicine at UTS and the process of phase out/discontinuation that is being considered, the Faculty has published an [online summary](#) and some [Frequently Asked Questions](#), which it will update as more information becomes available.

I am also sharing with you a message I am sending to TCM students today (see below).

I would like to meet with all Chinese Medicine staff late next week to discuss the process, let you know of the support that is available to you, and answer any questions you have. You will receive a calendar invite in the next day or so once a suitable time can be found.

This is all the information I have to share with you at this time – as always, you are welcome to contact [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) if you have any enquiries in the future.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

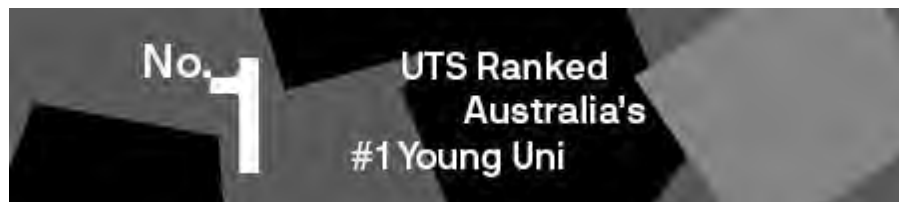
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



\*\*\*\* Student message – to be sent 23 July \*\*\*\*

From: Dianne Jolley, Dean of Science  
To: TCM students  
Subject: TCM review update

Dear students

First, I apologise for the length of this email but it is necessary if I am to respond appropriately to the emails I have received over recent weeks.

I do appreciate that the uncertainty created by the absence of concrete information in relation to the future of Traditional Chinese Medicine (TCM) at UTS is a cause of frustration and anxiety for TCM students, staff and community more broadly. While there are certain details I cannot share – either because it would be improper to do so, or simply because they are unknown at this time – I am able to explain the process currently underway as has been requested.

The decision as to whether the University accepts students into a particular program, and therefore whether that program is amongst the University's offering from year to year, is made by the UTS Provost on the recommendation of the Faculty.

In this particular case, following a review the Faculty of Science through its management group put forward a recommendation to the Provost that – despite its many strengths – the continuation of the TCM course is neither financially viable nor in the strategic direction of the Faculty.

The Provost accepted this recommendation, that the program accordingly be discontinued/phased out, subject only to any further advice arising from the discussion of the matter at Faculty Board, which the Provost will take into account in making his final decision. Faculty Board will also advise the Provost on how it intends to implement the discontinuation/phase out, including how it will ensure current TCM students have the opportunity to complete their studies.

It will be recommended to Faculty Board that teaching ceases for TCM programs at the end of 2021. Many students are on a path to complete by or before teaching ceases. For students who are not on a path to complete their TCM program by end-2021, we will make at least two course options available along with the opportunity to consult with a study plan expert (on a one-on-one basis) to discuss which of the available options will deliver the best outcome for them.

The first option we can make at this time is the offer of an internal course transfer to a new Health Sciences major within the existing UTS Bachelor of Science. This new major will be

specifically designed to provide an opportunity to complete a UTS degree that provides a direct pathway into the final year of an accredited Chinese Medicine program at an alternative institution (i.e. a second degree).

The second option, available from the beginning of 2020, is a transfer to an existing Chinese Medicine program at another institution. Details such as credit recognition are currently being negotiated with an alternative provider to ensure the smoothest possible transition for all UTS students who are unable to complete their TCM degree before end-2021.

Following the Provost's decision to not accept any future student enrolments into the program, the University has a subsequent process to follow in relation to the academic arrangements.

Academic Board, on the recommendation of Faculty Board, approves any changes to a course necessary to ensure the best interests of students in the course during the phase out period, and also removes the accreditation of the course at the end of the phase out process.

Courses are phased out and discontinued across the University each year for a range of reasons (e.g. strategic, commercial, currency, etc.). The discontinuation of academic accreditation is described in UTS Student Rule 3.6.1. More broadly, [UTS Student Rule 3.6 \('Changes to courses'\)](#) provides some information about the process we are currently following. I draw your attention to rules 3.6.4 and 3.6.5 in particular, as these rules explain our obligations to students when we revise, phase out and discontinue courses.

When I wrote to you in early June, I committed to "continue to update you, and other key stakeholders, once we can about the options being considered and what they could potentially mean for you." It was then, as it remains now, my intention to update you following this week's Faculty Board meeting.

As the future of Traditional Chinese Medicine at UTS becomes more certain, I will be able to answer more of your questions. However, we have uploaded a summary of the [situation to date](#) and some [Frequently Asked Questions](#).

Finally, I am conscious that Spring session commences this week and in the absence of concrete information you might be inclined to review your Spring subject enrolment. The best advice I can give in the absence of certainty is to follow the course program detailed in the [Handbook](#) as closely as possible. If you were offered (and accepted) a place in your course on a full-time basis you should make every effort to undertake a full-time study load (four 6cp subjects). Please note that the last day to enrol in Spring subjects is Monday, 5 August.

This is all the information I have to share with you at this time – as always, you are welcome to contact [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) if you have any enquiries in the future.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

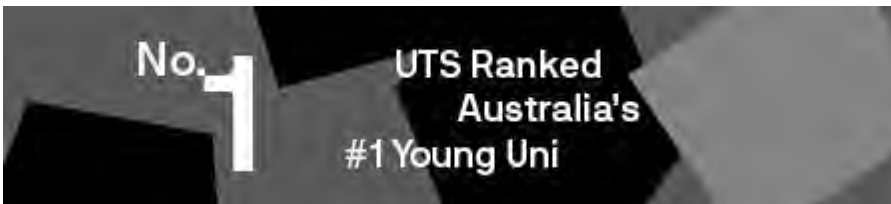
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Dianne Jolley](#)  
**To:** [Sean Walsh](#)  
**Subject:** Re: TCM review update  
**Date:** Tuesday, July 23, 2019 6:38:25 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

Hello Sean,

Thanks for your email and highlighting this point. We can talk to this on Friday during the meeting.

Have a good evening  
Dianne

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology Sydney NSW Australia

\* Sent from my phone

---

**From:** Sean Walsh <Sean.Walsh@uts.edu.au>  
**Sent:** Tuesday, July 23, 2019 5:14:58 PM  
**To:** Dianne Jolley <Dianne.Jolley@uts.edu.au>  
**Subject:** Re: TCM review update

Dear Dianne,

I've just replied to yourself. The advice you have been receiving is incorrect. I may have completely have mis-read the student email, however... for student clarity:

The Chinese medicine program is a four (4) year program, rather than three (3). With natural progression through the course, then I would calculate a completion of the current cohort in 2022 for those students commencing in 2019, rather than 2021 that was noted below.

Best wishes,

Sean.

Dr Sean Walsh, PhD (Science)  
Senior Lecturer  
School of Life Sciences  
University of Technology Sydney

---

**From:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>

**Sent:** Tuesday, 23 July 2019 3:30 PM

**To:** Weihong Li <Weihong.Li-1@uts.edu.au>; Emma King <Emma.King@uts.edu.au>; Bouavirone Choy <Bobbie.Choy@uts.edu.au>; Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>; Carolyn Michaeil <Carolyn.Michaeil@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Stella Valenzuela <Stella.Valenzuela@uts.edu.au>; Peter Meier <Peter.Meier@uts.edu.au>

**Cc:** William Gladstone <William.Gladstone@uts.edu.au>; Raelene La Ferla <Raelene.LaFerla@uts.edu.au>

**Subject:** TCM review update

Dear colleagues

To help staff, students and interested community members better understand the review of Traditional Chinese Medicine at UTS and the process of phase out/discontinuation that is being considered, the Faculty has published an [online summary](#) and some [Frequently Asked Questions](#), which it will update as more information becomes available.

I am also sharing with you a message I am sending to TCM students today (see below).

I would like to meet with all Chinese Medicine staff late next week to discuss the process, let you know of the support that is available to you, and answer any questions you have. You will receive a calendar invite in the next day or so once a suitable time can be found.

This is all the information I have to share with you at this time – as always, you are welcome to contact [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) if you have any enquiries in the future.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

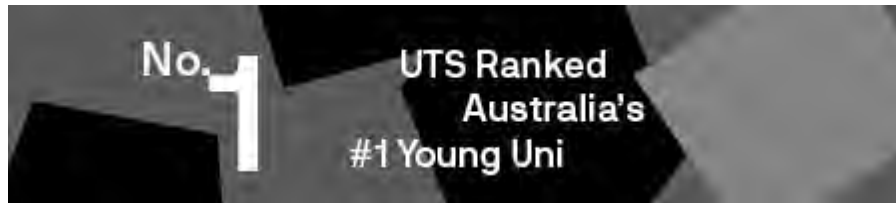
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



\*\*\*\* Student message – to be sent 23 July \*\*\*\*

From: Dianne Jolley, Dean of Science

To: TCM students

Subject: TCM review update

Dear students

First, I apologise for the length of this email but it is necessary if I am to respond appropriately to the emails I have received over recent weeks.

I do appreciate that the uncertainty created by the absence of concrete information in relation to the future of Traditional Chinese Medicine (TCM) at UTS is a cause of frustration and anxiety for TCM students, staff and community more broadly. While there are certain details I cannot share – either because it would be improper to do so, or simply because they are unknown at this time – I am able to explain the process currently underway as has been requested.

The decision as to whether the University accepts students into a particular program, and therefore whether that program is amongst the University's offering from year to year, is made by the UTS Provost on the recommendation of the Faculty.

In this particular case, following a review the Faculty of Science through its management group put forward a recommendation to the Provost that – despite its many strengths – the continuation of the TCM course is neither financially viable nor in the strategic direction of the Faculty.

The Provost accepted this recommendation, that the program accordingly be discontinued/phased out, subject only to any further advice arising from the discussion of the matter at Faculty Board, which the Provost will take into account in making his final decision. Faculty Board will also advise the Provost on how it intends to implement the discontinuation/phase out, including how it will ensure current TCM students have the opportunity to complete their studies.

It will be recommended to Faculty Board that teaching ceases for TCM programs at the end of 2021. Many students are on a path to complete by or before teaching ceases. For students who are not on a path to complete their TCM program by end-2021, we will make at least two course options available along with the opportunity to consult with a study plan expert (on a one-on-one basis) to discuss which of the available options will deliver the best outcome for them.

The first option we can make at this time is the offer of an internal course transfer to a new Health Sciences major within the existing UTS Bachelor of Science. This new major will be specifically designed to provide an opportunity to complete a UTS degree that provides a direct pathway into the final year of an accredited Chinese Medicine program at an alternative institution (i.e. a second degree).

The second option, available from the beginning of 2020, is a transfer to an existing Chinese Medicine program at another institution. Details such as credit recognition are currently being negotiated with an alternative provider to ensure the smoothest possible transition for all UTS students who are unable to complete their TCM degree before end-2021.

Following the Provost's decision to not accept any future student enrolments into the program, the University has a subsequent process to follow in relation to the academic arrangements.

Academic Board, on the recommendation of Faculty Board, approves any changes to a course necessary to ensure the best interests of students in the course during the phase out period, and also removes the accreditation of the course at the end of the phase out process.

Courses are phased out and discontinued across the University each year for a range of reasons (e.g. strategic, commercial, currency, etc.). The discontinuation of academic accreditation is described in UTS Student Rule 3.6.1. More broadly, [UTS Student Rule 3.6 \('Changes to courses'\)](#) provides some information about the process we are currently following. I draw your attention to rules 3.6.4 and 3.6.5 in particular, as these rules explain our



obligations to students when we revise, phase out and discontinue courses.

When I wrote to you in early June, I committed to “continue to update you, and other key stakeholders, once we can about the options being considered and what they could potentially mean for you.” It was then, as it remains now, my intention to update you following this week’s Faculty Board meeting.

As the future of Traditional Chinese Medicine at UTS becomes more certain, I will be able to answer more of your questions. However, we have uploaded a summary of the [situation to date](#) and some [Frequently Asked Questions](#).

Finally, I am conscious that Spring session commences this week and in the absence of concrete information you might be inclined to review your Spring subject enrolment. The best advice I can give in the absence of certainty is to follow the course program detailed in the [Handbook](#) as closely as possible. If you were offered (and accepted) a place in your course on a full-time basis you should make every effort to undertake a full-time study load (four 6cp subjects). Please note that the last day to enrol in Spring subjects is Monday, 5 August.

This is all the information I have to share with you at this time – as always, you are welcome to contact [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) if you have any enquiries in the future.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



**From:** [Christopher Zaslawski](#)  
**To:** [Dianne Jolley](#)  
**Cc:** [William Gladstone](#)  
**Subject:** Letter from §2.1.9 (out of scope)  
**Date:** Wednesday, June 5, 2019 2:41:10 PM  
**Attachments:** UTS TCM letter §2.1.9 (out of scope).docx

---

Dear Dianne and Bill

I was sent this letter today to forward onto both of you for consideration. It is from §2.1.9 (out of scope). Bill-I will forward shortly the second draft with CM comments regarding the options paper.

Regards Chris

**From:** [Christopher Zaslawski](#)  
**To:** [Marilla Dann](#)  
**Cc:** [Greg Welsh](#)  
**Subject:** RE: Media query about Traditional Chinese Medicine Course  
**Date:** Sunday, June 2, 2019 5:36:00 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)

---

Thanks Marilla. Now in [s.2.1.3.](#) and monitoring the online petition which is now up to 3156. I was informed four weeks ago via a current student comment to a staff member (and last week from the Dean of Science) that the course intake for 2020 was closed to both domestic and international students. Our University clinic has over 6000 patient contacts per year and until recently (December 2018) we ran a special community clinic service (once Saturday a week) at Concord hospital for cancer survivors (free of charge). This has now been discontinued due to financial burden. The Chinese medicine discipline contributes to World Health Organisation (WHO) activities as well as ISO standard development. Chinese medicine is a registered health profession under the National Registration and Accreditation Scheme (NRAS) that regulates 15 medical and allied health professions and staff members play a valuable role in contributing to the scheme. Unfortunately the word has got around and I am receiving emails from the public, previous graduates regarding the situation. I am replying that it is only course intake for 2020 that has been closed and a final decision about final course closure is yet to be made.

Please keep me informed of any developments in your area.  
Thanks Chris

---

**From:** Marilla Dann <Marilla.Dann@uts.edu.au>  
**Sent:** Friday, 31 May 2019 10:08 AM  
**To:** Christopher Zaslawski <Chris.Zaslawski@uts.edu.au>  
**Subject:** RE: Media query about Traditional Chinese Medicine Course

Thanks for getting back to me Chris, [s.2.1.3.](#) !!  
I'll keep you in the loop of any progress.

Regards,

**Marilla Dann**  
 Marketing & Communications Manager  
 UTS  
**Faculty of Science**  
 T: +61 2 9514 1777

---

**From:** Christopher Zaslawski <[Chris.Zaslawski@uts.edu.au](mailto:Chris.Zaslawski@uts.edu.au)>  
**Sent:** Friday, 31 May 2019 10:03 AM  
**To:** Marilla Dann <[Marilla.Dann@uts.edu.au](mailto:Marilla.Dann@uts.edu.au)>  
**Subject:** Re: Media query about Traditional Chinese Medicine Course

Hi Marilla

Yes I became aware at 1pm yesterday of the petition. <sup>s2.1.2</sup> is a student. The students became aware the course intake was closed for 2020 in the last several weeks. Since then I have had several emails from students wondering their situation. I am on long service leave for two months and will have irregular email contact over <sup>s2.1.3</sup>

Please keep me informed of the developing situation. Chinese medicine is a registered health profession under NRAS.

Cheers Chris

Sent from my Samsung Galaxy smartphone.

----- Original message -----

From: Marilla Dann <[Marilla.Dann@uts.edu.au](mailto:Marilla.Dann@uts.edu.au)>

Date: 31/05/2019 09:52 (GMT+10:00)

To: Helen Hume <[Helen.Hume@uts.edu.au](mailto:Helen.Hume@uts.edu.au)>, Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>, Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

Subject: FW: Media query about Traditional Chinese Medicine Course

Morning Helen, Dianne, Chris

Thought you should be aware of a petition that has started to keep TCM. The petition was started by a <sup>s2.1.2</sup>. Chris, is <sup>s2.1.2</sup> a student?

You can see the petition detail [here](#)

As far as we are aware no decision has been made or announced to cease TCM.

Greg Welsh, Deputy Director, Strategic Communication, will follow up on the media query below.

Regards,

**Marilla Dann**

Marketing & Communications Manager

UTS

Faculty of Science

T: +61 2 9514 1777

---

**From:** Marea Martlew <[Marea.Martlew@uts.edu.au](mailto:Marea.Martlew@uts.edu.au)>

**Sent:** Friday, 31 May 2019 9:37 AM

**To:** Marilla Dann <[Marilla.Dann@uts.edu.au](mailto:Marilla.Dann@uts.edu.au)>

**Subject:** FW: Media query about Traditional Chinese Medicine Course

**Importance:** High

FYI

**From:** [Mary Garvey](#)  
**To:** [Christopher Zaslowski](#)  
**Subject:** Re: Meeting to discuss the faculty review report  
**Date:** Thursday, March 7, 2019 11:41:17 AM  
**Attachments:** [TCM status report Draft 2019-03-06 \(MG\).docx](#)

---

Hi Chris,  
a few suggestions for the report attached.  
best wishes,  
Mary

Dr Mary Garvey, PhD  
Senior Lecturer  
UTS | Science | SoLS | CM | CB04.06.330  
mary.garvey@uts.edu.au | 61 2 95147851

Co-author, Chief Editor English: *Traditional Chinese Medicine Basic Theory*, 2018, World Publishing Corporation, Shanghai

Chief Editor English: *Anecdotes of Traditional Chinese Medicine: A Bilingual Extracurricular Reader for Traditional Chinese Medicine*, 2016, Shanghai Science and Technology Publishers;  
Re-released 2018, World Scientific Publishing, Singapore <http://bit.ly/anec-tcm>

Author: *A Clinical Guide to the Body in Chinese Medicine: History and Contemporary Practice*, 2015, Paradigm Publications, <<http://www.redwingbooks.com/sku/BodChiMed-E>>.

---

**From:** Christopher Zaslowski  
**Sent:** Thursday, 7 March 2019 11:29 AM  
**To:** Carolyn Michael; Sean Walsh; Weihong Li; Mary Garvey; Shuai Zheng; Dale Elsdon; Xianqin Qu; Nancy Morgan; Chunlin Zhou; Huiling Yao  
**Subject:** Meeting to discuss the faculty review report

Dear all  
I have tentatively booked 12.30-2.30 in 07.06.009A for a meeting next Wednesday. Hope you can all attend.

Cheers  
Chris

## Status of Traditional Chinese Medicine in the UTS Faculty of Science

### Background

In 1994 Traditional Chinese Medicine moved from Acupuncture Colleges (Australia) to UTS, and in 1995 moved to the Faculty of Science. The courses initially taught included a 3.5 year undergraduate degree in acupuncture and a 2-year Masters by coursework program in Chinese herbal medicine. In 2000 the acupuncture and Chinese herbal medicine programs were combined to form a 4-year undergraduate course that covered both acupuncture and Chinese herbal medicine. Two undergraduate courses are currently offered: Bachelor of Health Science in Traditional Chinese Medicine, and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years). Staff and students have provided a public-facing Traditional Chinese Medicine Clinic at UTS since 1994 that also acts as a teaching facility for students in all years of the undergraduate courses.

The discipline of Traditional Chinese Medicine was re-named Chinese Medicine in 2015 with the formation of the new School of Life Sciences, and it is currently a Discipline Group in the School of Life Sciences with a Discipline Group leader (Associate Professor Chris Zaslowski). As a Discipline Group Leader, Associate Professor Zaslowski is a member of the School Executive. The courses taught by staff in the Chinese Medicine Discipline Group are called 'Traditional Chinese Medicine' and so for consistency throughout this paper the combination of staff, teaching, research, and the clinic operations will collectively be referred to as Traditional Chinese Medicine (TCM).

Elsewhere at UTS, research and research training in aspects of traditional Chinese medicine occur in the Faculty of Health in the Australian Research Centre for Complementary and Integrative Medicine. The Centre also does projects in a range of other complementary therapies. Within universities in NSW, traditional Chinese medicine exists only at Western Sydney University (WSU) in the School of Science and Health.

This report will inform thinking and decisions about options for the future of Traditional Chinese Medicine at UTS. It is a response to several strategic pressures: the results of the 2018 UTS Course Viability Analysis and internal Faculty financial analysis (provided later in this report); the strategic imperative (via UTS 2027) for UTS and the Faculty of Science to evolve from being research-active to research-intensive and the potential for Traditional Chinese Medicine to contribute to this; the need for continual improvement in the Faculty's overall financial position and efficiency of its operations; and consideration of the disciplinary fit of Traditional Chinese Medicine (with courses that graduate complementary health professionals) with the Faculty of Science.

### Staff

In 2018 there were 21 staff employed as: 9 continuing academics; 3 fixed-term academics; 7 casual academics; and 2 casual professional staff. These staff represent 12.6 FTE. The 12.6 FTE includes Associate Professor Xianqin Qu (who teaches in the TCM courses but is a member of the Medical Science Discipline Group in the School of Life Sciences) and Associate Professor Peter Meier (Associate Dean (Teaching and Learning), with a substantive appointment in the TCM discipline).

The 12 academic staff employed in fixed-term or continuing academic positions represented academic staff levels A (Associate Lecturer) to D (Associate Professor) and Clinical Educator, who had

been employed for periods from IR-1.2. (Figure 1). These staff included IR-1.2.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

IR-1.2.

In 2018 nineteen of the 24 TCM-specific subjects required casual academics to assist with teaching. Twenty-seven different individuals were employed as casuals for a total of 500 hours and a total cost (including oncosts) of \$21.5. The loss of four full-time staff due to retirement IR-1.2. ) and appointment to Faculty Management (Assoc. Professor Peter Meier) has led to an increase in TCM staff casualisation in recent years, and thereby reduced staff research opportunities.

Average TCM staff workloads in 2018 (for the nine continuing and three fixed-term academics) reported in the Faculty's workload calculators were: 60% teaching, 19% research, and 21% management/engagement. By comparison, the average workloads across all other academics in the Faculty of Science were: 22% teaching, 58% research, and 20% management/engagement. The distribution of workload across the three categories for TCM staff differs from the average workload profile of the rest of the Faculty of Science because of: 42% of TCM academics were employed as teaching only (i.e. the fixed-term academics and the clinical educators); two staff performed leadership roles (Meier, Zaslowski); and there were no research intensive academic staff.

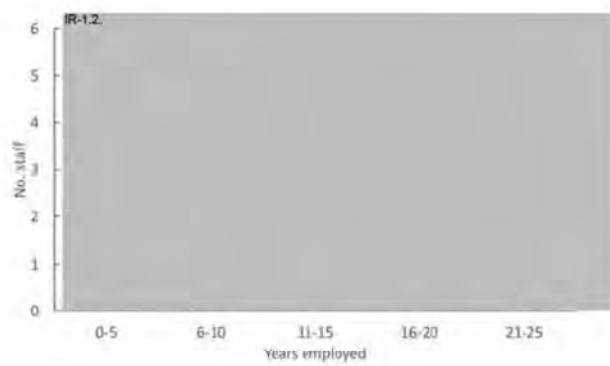
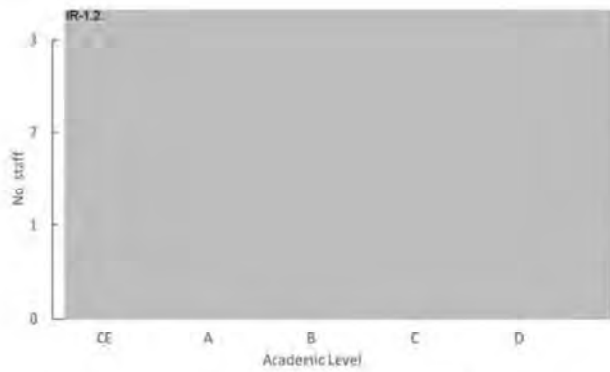


Figure 1. Profile of academic staff (fixed-term and continuing) employed in the TCM discipline at the end of January 2019: (a) academic level (CE Clinical Educator; A Associate Lecturer; B Lecturer; C Senior Lecturer; D Associate Professor); (b) years employed at UTS.



### Courses and Teaching

The following courses are offered:

- Bachelor of Health Science in Traditional Chinese Medicine (4-years)
- Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies (6-years)

Throughout the 4-year Bachelor of Health Science in Traditional Chinese Medicine course TCM students complete 30 subjects representing 192 credit points (Table 1 Table 1). These subjects represent 24 TCM-specific subjects, 5 non-TCM subjects offered by the Faculty of Science, and 1 non-TCM subject offered by the Faculty of Health. The 4-year course is prescribed i.e. there are no elective subjects.

Three TCM subjects were taken by students enrolled in other courses during 2018: Chinese Medicine Foundations 1 (3.5 EFTSL), Clinical Practice 1 (0.5 EFTSL), and Clinical Features of Disease (2.9 EFTSL).

The five non-TCM subjects offered by the Faculty of Science and taken by TCM students include: (i) Human Anatomy and Physiology, a first-year core subject for all students enrolled in a course in the life sciences stream; (ii) Physiological Systems, a core subject in the Bachelor of Medical Science, Bachelor of Biomedical Engineering, and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science, Infection and Immunity majors); (iii) Human Pathophysiology, a core subject in the Bachelor of Medical Science and Bachelor of Advanced Science (Pre-Med, Pharmaceutical Science majors); (iv) Neuroscience, a core subject in the Bachelor of Medical Science; and (v) Clinical Features of Disease, a core subject in the Pre-Medicine major in the Bachelor of Advanced Science.

The TCM subjects are delivered via a variety of modes including lectures, practicals, clinic, workshop or tutorial. Currently, no TCM subjects are delivered in the Summer session. The clinic-based training (in the TCM Clinic), commences in Autumn session of first-year in both courses. The number of clinic-based teaching hours increases in each year of the courses, delivered across eight clinical subjects. Students complete a total of 1000 clinical hours throughout their course.

As part of their clinical education TCM students can elect to do a six-week clinical placement in a hospital in China (affiliated with the Chengdu University of Chinese Medicine) or South Korea (affiliated with Dong Eui University). These arrangements are supported by MoUs with both institutions. This opportunity is taken-up by 50-75% of final-year students. The overseas placements are self-funded by each student, although some financial assistance is provided through UTS Build and Colombo Plan (for students meeting the age requirement).

In comparison with other courses in the Faculty of Science, the majority (24/30 subjects i.e. 80%) of subjects in the TCM course are TCM-discipline subjects. This level of specificity is required to meet the external accreditation requirements because the majority of outcomes required for accreditation are specific to TCM practice. The large component of clinical teaching also provides a relevant learning experience that distinguishes the UTS TCM course from other courses. While this level of specificity provides a unique and intensive, discipline-based teaching experience it results in the teaching being resource intensive, and also leads to inefficiencies when the number of enrolled students is low and there are few opportunities to offer subjects that are also of interest and relevant to non-TCM students in, for example, biomedical or medical science courses.

For other courses the School of Life Sciences uses a model of co-taught subjects and sharing of resources to optimise efficiency, whilst maintaining differentiation among courses. As a result, most

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

courses have 20-30% unique subjects. These other courses also have greater enrolments, which further increases the efficiency of teaching.

DRAFT

Table 1. Structure of the Bachelor of Health Science in Traditional Chinese Medicine. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject and <sup>2</sup> Faculty of Science non-TCM subjects.

First Year	Credit points	Subject code
<i>Autumn Session</i>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<i>Spring Session</i>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<i>Autumn Session</i>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<i>Spring Session</i>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<i>Autumn Session</i>		
Clinical Features of Disease <sup>2</sup>	6	99584
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<i>Spring Session</i>		
Medical Classics and the History of Chinese Medicine	6	91610
Clinical Practicum (Therapy and Diagnosis)	6	91611
Clinic Level 6	6	99647
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<i>Autumn Session</i>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<i>Spring Session</i>		
Professional Issues in Traditional Chinese Medicine	6	91613
Evaluating TCM: Theory, Practice and Research 2	6	91615
Clinical Practice 2 (TCM)	12	99631

Table 2. Structure of the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies combined degree. All subjects are TCM-specific with the exception of <sup>1</sup> Faculty of Health subject, <sup>2</sup> Faculty of Science non-TCM subjects, and <sup>3</sup> Faculty of Arts and Social Sciences subjects.

First Year	Credit points	Subject code
<b>Autumn Session</b>		
Chinese Medicine Foundations 1	6	99665
Point Location and Acupuncture Anatomy	6	99641
Clinical Theory and Clinic Level 1	6	99667
Communication for the Complementary Therapist <sup>1</sup>	6	92227
<b>Spring Session</b>		
Introduction to Chinese Herbal Medicine	6	99567
Chinese Medicine Foundations 2	6	99666
Clinic Level 2 and Acupuncture Techniques 1	6	99668
Human Anatomy and Physiology <sup>2</sup>	6	91400
<b>Second Year</b>		
<b>Autumn Session</b>		
Chinese Diagnostic System 1	6	99618
Clinic Level 3 and Acupuncture Techniques 2	6	99644
Pharmacology of Chinese Herbal Medicine	6	99650
Physiological Systems <sup>2</sup>	6	91703
<b>Spring Session</b>		
Chinese Diagnostic System 2	6	99621
Clinic Level 4 and Acupuncture Techniques 3	6	99645
Chinese Herbal Formula 1	6	99651
Human Pathophysiology <sup>2</sup>	6	91239
<b>Third Year</b>		
<b>Autumn Session</b>		
Chinese Language and Culture 1 <sup>3</sup>	8	91701
Clinic Level 5 and Acupuncture Microsystems	6	99646
Chinese Herbal Formula 2	6	99652
Neuroscience <sup>2</sup>	6	91706
<b>Spring Session</b>		
Medical Classics and the History of Chinese Medicine	6	91510
Clinical Practicum (Therapy and Diagnosis)	6	91611
Chinese Language and Culture 2 <sup>3</sup>	8	97102
Disease States for Traditional Chinese Medicine 1	6	99656
<b>Fourth Year</b>		
<b>Autumn Session</b>		
Clinical Features of Disease <sup>2</sup>	6	99584
Chinese Language and Culture 3 <sup>3</sup>	8	97103
Foundations in International Studies <sup>3</sup>	8	976001
<b>Spring Session</b>		
Chinese Language and Culture 4 <sup>3</sup>	8	97104
Contemporary China <sup>1</sup>	8	976111
Clinic Level 6	6	99647
<b>Fifth Year</b>		
<b>Autumn Session</b>		
In-country Study 1: China <sup>3</sup>	24	977110
<b>Spring Session</b>		
In-country Study 2: China <sup>3</sup>	24	978110
<b>Sixth Year</b>		
<b>Autumn Session</b>		
Evaluating TCM: Theory, Practice and Research 1	6	91614
Disease States for Traditional Chinese Medicine 2	6	99657
Clinical Practice 1 (TCM)	12	99630
<b>Spring Session</b>		
Professional Issues in Traditional Chinese Medicine	6	91613
Clinical Practice 2 (TCM)	6	99631
Evaluating TCM: Theory, Practice and Research 2	6	91615

Throughout the 6-year Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies students complete 38 subjects (Table 2 Table 3), including 24 TCM subjects, 5 non-TCM subjects offered by the Faculty of Science, 1 non-TCM subject offered by the Faculty of Health, and 8 subjects offered by the Faculty of Arts and Social Science. The combined degree is structured so that students complete the majority of the TCM subjects in years 1-3, a mix of TCM and international studies subjects in year 4, a year of in-country study in China in year 5, and the remainder of the TCM course in year 6.

Formatted: Font: Not Italic

#### Student Load

At the August 2018 census there were 176 enrolled students in TCM courses, representing 165 students in the Bachelor of Health Science in Traditional Chinese Medicine and 13 students in the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies. The total taught EFTSL was 129.1, including 123.4 Commonwealth supported places and 5.7 international fee-paying places<sup>1</sup>.

The total number of commencing students in the TCM courses has declined annually from the peak of 79 in 2015 (fluctuates from year-to-year with an overall average of 63.3 per year) (Table 3 Table 4) and 4. The taught EFTSL represented by all TCM students has declined from 167.3 in 2015 to 128 in 2018 (Table 4 Table 5).

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Table 3. Number of commencing students between 2014 and 2019 in the Bachelor of Health Science in Traditional Chinese Medicine (B Health Sc TCM) and Bachelor of Health Science in Traditional Chinese Medicine / Bachelor of Arts in International Studies (B Health S TCM + B AIS).

	2014	2015	2016	2017	2018	2019
B Health Sc TCM	50	74	64	59	48	54
B Health Sc TCM + B AIS	4	5	10	3	7	2
Total	54	79	74	62	55	56

Table 4. Total taught EFTSL of TCM students in subjects owned by the Faculty of Arts and Social Sciences (FASS), Faculty of Health (Health), Faculty of Science that are not TCM subjects (Science (non-TCM)), and in TCM subjects (TCM), for the Bachelor of Health Science in Traditional Chinese Medicine and Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

	2014	2015	2016	2017	2018
FASS	2.2	2.5	0.5	0.7	1.7
Health	5.6	4.0	5.0	7.1	4.1
Science (non-TCM)	19.7	22.4	18.0	15.4	15.1
TCM	127.5	138.4	135.2	121.0	107.1
Total	155.0	167.3	158.7	144.2	128.0

<sup>1</sup> These numbers differ slightly from the numbers in Table 4 Table 5 because of rounding of numbers in each row contributing to the total.

Formatted: Font: Not Italic

**Financial Position: Faculty-level Analysis**

The Faculty's financial analysis of TCM is shown in Table 5Table 5. The financial analysis includes taught load income (Commonwealth Supported Places, and international fee-paying), income from TCM clinic, direct expenses (salary and NSI), and indirect expenses (UTS overheads, and Faculty-allocated overheads). §2.15.

Formatted: Font: 11 pt  
Formatted: Font: 11 pt, Not Italic

§2.15.

§2.15.

The UTS overhead costs were based on the information used in the 2018 Course Viability Analysis. The Faculty-based overheads were attributed based on staff FTE. The largest cost items were direct costs (salaries and NSI, estimated to be \$<sup>§2.15</sup>) and UTS central overhead costs (\$<sup>§2.15</sup>). The net financial position was an estimated deficit of \$1.483M at the end of 2018.

**Course Viability Analysis**

The first Course Viability Analysis (CVA) was done in 2018 as a part of the Business Model Strategy. The intention was for the CVA to support informed decisions on the closure, subsidisation or retention of undergraduate and postgraduate courses. The CVA approach was to fully match non-research net costs to teaching revenues for all UTS courses using data for 2017, and to incorporate indicators of quality alongside the financial indicators.

§2.15.

§2.15.

§2.15.

The CVA also assessed five indicators of course quality that covered student performance, student experience and graduate feedback. The five indicators were: success rate, retention rate, student satisfaction with quality, graduate satisfaction with course, and graduate satisfaction with teaching. An index was calculated for each indicator, which was the reported result divided by the national average (i.e. a course that performed better than the national average would have an index value >1). Each indicator was weighted as a measure of its relative importance. The weighted indexes for the five indicators were summed to produce a Course Quality Index. A Course Quality Index >1 is a positive result relative to the national average, and an Index of <1 is a negative result. Each course was assessed for its net profitability (described in the previous paragraph) and Course Quality Index by plotting on XY axes (Figure 24).

The performance of the two TCM courses combined in the CVA is shown in Figure 25. The position of the TCM courses at the bottom left of the graph indicates a large negative net profit margin and an overall Course Quality Index below the national average benchmark (shown as 1 on the graph).

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Table 5. Financial analysis of TCM based on student load income at the August 2018 census (provided by J Maddalena, Faculty Finance partner).

<u>Income</u>	<u>EFTSL</u>	<u>Income \$ Source</u>			
<b><u>Commonwealth Supported Places</u></b>	S.2.1.5				
TCM Subjects taught within TCM Courses		2018 August Census			
TCM Subjects taught within Non-TCM Courses		2018 August Census			
Non-TCM Subjects taught within TCM Courses		2018 August Census			
<b><u>International Fee Paying (and Other)</u></b>					
TCM Subjects taught within TCM Courses		2018 August Census			
TCM Subjects taught within Non-TCM Courses		2018 August Census			
Non-TCM Subjects taught within TCM Courses		2018 August Census			
<b><u>Total Taught EFTSL/Income</u></b>					
<b><u>Total Enrolled Student Headcount</u></b>		2018 August Census			
<b><u>Expenses</u></b>		<b><u>Source</u></b>			
TCM Academic Salary Expenses (Operating)		2019 Budget			
Acupuncture Casual Academic Costs		2019 Budget			
Chinese Medicine Casual Academic Costs		2019 Budget			
Total Staff FTE/Costs					
Operating NSI 0226049		2018 Actuals			
Operating NSI 0226086		2018 Actuals			
Operating NSI 0226392		2018 Actuals			
<b><u>Total Salary &amp; NSI Expenses</u></b>					
Income (Clinical Services & Fees)		2018 Actuals			
<b><u>Net Direct Expenses</u></b>					
Indirect Faculty Costs (by FTE)		2019 FTE applied to 2018 Budget Model			
Indirect Faculty Costs (by EFTSL)		2018 EFTSL applied to 2018 Budget Model			
<b><u>Total Indirect Faculty Costs</u></b>					
<b><u>Indirect Central Overhead Costs</u></b>		2018 Taught Load applied Provost's CVA Estimate			
<b><u>Total Indirect Costs</u></b>					
<b><u>Net Result at UTS Level</u></b>					



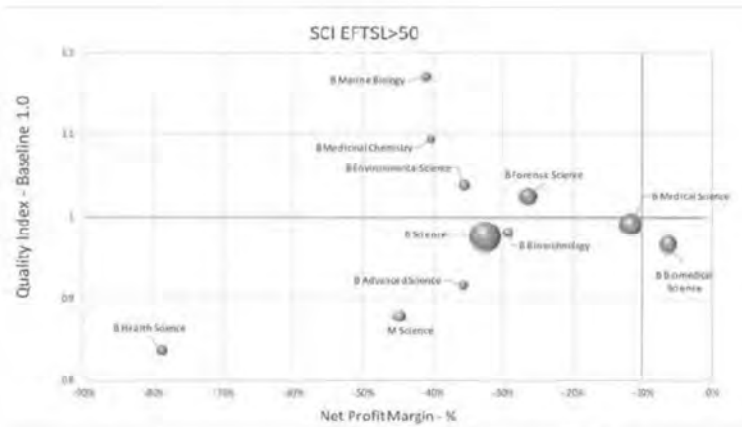


Figure 2. Graphical summary of the results of the Course Viability Analysis for courses in the Faculty of Science with an enrolled student load >50 EFTSL. The calculation and interpretation of the net profit margin and quality index are explained in the text. B Health Science is the combined result for the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies.

The TCM courses had a Course Quality Index of 0.84. This overall below average result was driven by below average results for the Graduate Satisfaction with Course (0.807) and Graduate Satisfaction with Teaching (0.535), and the higher weightings for these indexes (25%) compared to the other indexes. The other indexes were close to, or at, national average values: Success Rate (1.011, 15% weighting), Retention Rate (1.042, 15% weighting), and Student Satisfaction with Quality (0.969, 20% weighting).

**Accreditation: Internal**

Courses at UTS are approved for periods of five years via the Award Course Approval and Reaccreditation Policy and the Award Course Approval and Reaccreditation Procedures. The depth and extent of the approval process depend on the previous performance of the course, and courses with a record of good performance require a 'short reaccreditation' process. The UTS Courses Accreditation Committee recommended (after a Short Reaccreditation process during 2016) that the Bachelor of Health Science in Traditional Chinese Medicine and the Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies be re-accredited for 2017-2021. This recommendation was approved by Academic Board in July 2016.

The UTS Curriculum Performance Report reviews all UTS courses and subjects against a set of benchmarks determined by the Provost and Deputy Vice-Chancellor (Education & Students). The indicators (determined for courses and subjects) used in the CPR are designed to link course performance with UTS KPIs. The CPR provides an assessment of the performance of courses and subjects relative to the indicators and highlights areas requiring action to address issues that have been identified.

The Bachelor of Health Science in Traditional Chinese Medicine was included on the Outstanding Courses List for 'consecutive excellent ratings and improving over two or more years' in the 2014 and 2015 Curriculum Performance Reports.

The Bachelor of Health Science in Traditional Chinese Medicine received an overall rating of Green each year in its annual Course Performance Reports for 2015-17. Specific indicators that were also Green each year included: UAC preferences 1-3 to total preferences; student load; success rate; and attrition rate. Average salary of graduates was Green in 2017 and 2015. There have been no consistent issues (indicated by a Red rating) over these three years, with timetabled hours/EFTSL flagged as Red in 2017 and 2015.

The Bachelor of Health Science in Traditional Chinese Medicine/Bachelor of Arts in International Studies received Green assessments annually in the Course Performance Reports for 2015-17 for Success Rate, and for two of three years for UAC preferences 1-3 to total preferences. No indicator was flagged with a Red warning in every year, however SFS for student satisfaction was flagged Red in 2015 and 2016 (and was Green in 2017). Student Load and Attrition moved from Red to Green over 2015 to 2017.

All TCM subjects have been learning.futures certified, and XX% of TCM subjects have been peer-reviewed (awaiting data from Peter Meier).

**Accreditation: External**

The TCM courses are accredited externally by the Australian Health Practitioner Regulation Agency (AHPRA), which oversees fourteen national boards including those for Medicine, Nursing and Midwifery, Physiotherapy and Pharmacy. Graduates of the UTS TCM courses are eligible for professional membership as a health practitioner with the Chinese Medicine Board of Australia (CMBA) within AHPRA (<http://www.handbook.uts.edu.au/courses/c10164.html>). Graduates are accredited to practice at a Chinese herbal medicine, dispensing and acupuncture practice, and

eligible for membership with the relevant professional associations (<https://www.uts.edu.au/future-students/find-a-course/bachelor-health-science-traditional-chinese-medicine>).

The external accreditation requires that students achieve a number of outcomes, and the majority of these are specific to the discipline and practice of TCM. The structure of the TCM course reflects, in large part, these requirements. The two TCM courses were accredited by AHPRA in December 2017 with one condition and 4 monitoring conditions. The responses to these conditions were reported in November 2018 and the accreditation committee's decision will be released in March. The Accreditation Committee does not accredit courses for a defined period of time, instead undertaking annual monitoring (via requested reports) of the education provider (i.e. UTS) and the course<sup>2</sup>.

#### Benchmarking: QILT

In the Quality Indicators of Learning and Teaching (QILT) TCM is classified in the Health Services and Support study area. The other UTS courses included within this study area are: Bachelor of Health Science; Bachelor of Human Movement; and Bachelor of Sport and Exercise Science. In the Student Experience Survey 2016 and 2017 (Table 6), UTS courses in Health Services and Support were close to the national average in all areas of Student Experience, exceeded the national average in two areas of Graduate Satisfaction (Overall Satisfaction, Teaching Scale), and below the national average in full-time employment. The combination of TCM and other UTS courses covered by this study area means that it is not possible to directly report the QILT results for the TCM courses.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Table 6. Summary of the Student Experience Survey 2016 and 2017 outcomes for the Health Services and Support area (undergraduate) at UTS and compared to the national average (Source: [www.qilt.edu.au](http://www.qilt.edu.au)).

		UTS	National av
Student Experience	Overall quality of educational experience	77.9%	80.6%
	Teaching quality	81.8%	82.8%
	Learner engagement	64.7%	64.5%
	Learning resources	84.5%	84.1%
	Student support	70.0%	73.0%
	Skills development	83.2%	81.5%
Graduate Satisfaction	Overall satisfaction	85.5%	80.3%
	Teaching scale	71.0%	65.7%
	Skills scale	80.6%	82.8%
Graduate Employment	Full-time employment	64.1%	72.1%
	Overall employment	88.0%	89.8%
	Full-time study	49.3%	23.4%

<sup>2</sup> Australian Health Practitioner Regulation Agency / Chinese Medicine Board of Australia (2017) Chinese Medicine accreditation process (Australian Health Practitioner Regulation Agency, Melbourne).

### Research Training

Of the 12 continuing or fixed-term academic staff in TCM, four are supervising HDR students as principal supervisor, six are not acting as a principal supervisor of a HDR student, and <sup>s2.1.2</sup> current HDR students.

At the end of 2018 there were 27 (headcount) HDR students enrolled in TCM-related MSc (research) or PhD projects. These HDR students consisted of <sup>s2.1.2 and s2.1.5</sup>

There have been no HDR commencement in 2019 so far.

The annual number of TCM HDR students completing has been: 4 in 2015, 1 in 2016, 1 in 2017, and 3 in 2018.

### Research<sup>3</sup>

TCM undertakes research, mainly human clinical research but also some profession focused research. This is undertaken by four fulltime academic staff and the 28 HDR students. Currently there are nine randomised clinical trials (RCTs) being developed, conducted or reported in peer reviewed journals. These are acupuncture and tennis elbow pain, Chinese herbal medicine and insomnia, acupuncture and cancer pain, acupuncture and mental stress in university students, acupuncture and hot flushes in breast cancer patients, vitamin D in reducing DM risks and acupuncture and osteoarthritic knee pain and male potency following radical prostatectomy and qigong and well-being. In the past, TCM has undertaken RCTs for taiji and stress, acupuncture and hepatitis C, acupuncture and post-traumatic stress disorder and acupuncture and male subfertility.

TCM staff and HDR students are also undertaking experimental human studies including transcranial magnetic stimulation, pain challengers e.g. pressure pain threshold and thermal thermography. TCM staff and students undertake survey research projects such as referral between medical, allied health and TCM practitioners, adverse event profile of Chinese herbal medicine, clinical outcomes implementation for acupuncture and Chinese medicine and the use of the Chinese herb *qingdai* (*Indigo Naturalis*) for eczema. Other projects are evaluating the safety of moxa smoke, clinical reasoning, professional communication, acupuncture needling sensations, radial and carotid artery tonometry, Parkinson's disease symptomology, a delphi study on osteoarthritic knee pain, transcriptome analysis of Chinese herbs on human squamous cancer cell line and a critical classical medical literature review.

Finally there are several educational projects on student empathy and enablement, collaborative learning experiences, technologies and civic virtues, linguistic analysis of Chinese medicine clinical interaction and student visualization in education. In total there are 33 research projects currently being undertaken by TCM academic staff and HDR students.

TCM researchers (in total) attracted external research grant income of \$10,000-\$64,000 p.a. between 2014 and 2018, representing <1% of the total external research income awarded to the Faculty of Science (*Table 7+table 3*). None of this external grant income was classified as Category 1 grant income. This annual grant income was awarded to one TCM academic in 2014 and 2015, three

<sup>3</sup> The first three paragraphs describing the research being done in TCM were provided by C Zaslawski.

Formatted: Font: Italic

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

TCM academics in 2016, six TCM academics in 2017, and two TCM academics in 2018. Over this same time period TCM academic staff represented 2.3-4.9% of total academic staff in the Faculty of Science.

Table 7. Total external research grant income awarded to researchers in TCM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-18.

	TCM	FoS	TCM % FoS	% TCM staff
2014	\$10,000	\$11,123,023	0.09%	3.0
2015	\$10,000	\$13,347,000	0.07%	2.9
2016	\$65,000	\$16,244,000	0.40%	2.3
2017	\$39,495	\$16,666,505	0.24%	4.9
2018	\$64,064	\$19,492,936	0.33%	NA

The total annual weighted publication points of TCM researchers varied between 0.70 and 5.27 (Table 8), representing 0.3-2.1% of the total for the Faculty of Science.

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

Table 8. Total weighted publication points for researchers in TCM and the whole of the Faculty of Science (FoS, excluding TCM) for 2014-17 (2018 publication data not yet finalized).

	TCM	FoS	TCM % FoS	% TCM staff
2014	3.29	227.66	1.4	3.0
2015	0.70	238.35	0.3	2.9
2016	3.04	273.41	1.1	2.3
2017	5.27	249.86	2.1	4.9

Elsewhere at UTS, the Faculty of Health hosts the Australian Research Centre for Complementary and Integrative Medicine (ARCCIM) (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine>). The Centre's web page notes that complementary and alternative medicine includes acupuncture, herbal medicines, and massage (all of which form part of the TCM curriculum) as well as other therapies. Both ARCCIM and TCM undertake research that tests the efficacy of traditional Chinese medicine approaches, such as acupuncture. ARCCIM supervises PhD students but does not teach undergraduate or postgraduate courses. The ARCCIM web pages (<https://www.uts.edu.au/research-and-teaching/our-research/complementary-and-integrative-medicine/research/research-0-26>) list only one project that involves a collaboration with a TCM staff member ('Chinese medicine practitioner knowledge, experience and attitudes towards professional registration in New South Wales', collaborators include TCM academic Carolyn Michael). Overall, there has been limited collaboration between TCM and ARCCIM represented by: co-supervision (by ARCCIM staff) of some TCM PhD students, and five co-authored publications since 2014.

## External Engagement

### TCM Clinic

The TCM Clinic is open to the public (at a reduced cost) for acupuncture, Chinese herbal medicine, and remedial massage (Figure 3). The TCM Clinic also operates as clinical research facility and an intern clinic for final-year students, who are supervised by qualified TCM staff. Final-year intern students complete 750 hours of contact clinical hours and administer 300 individual treatments (<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/about-us/year-4-intern-clinic>). The TCM Clinic at UTS is the largest and busiest of the university and private college teaching clinics in Australia. In 2017 there were 6019 patient visits to the TCM Clinic, and in 2018 there were 5999 visits (representing 4920 acupuncture, 777 herbal therapies, and 294 massage visits).

Formatted: Font: 11 pt

Formatted: Font: 11 pt, Not Italic

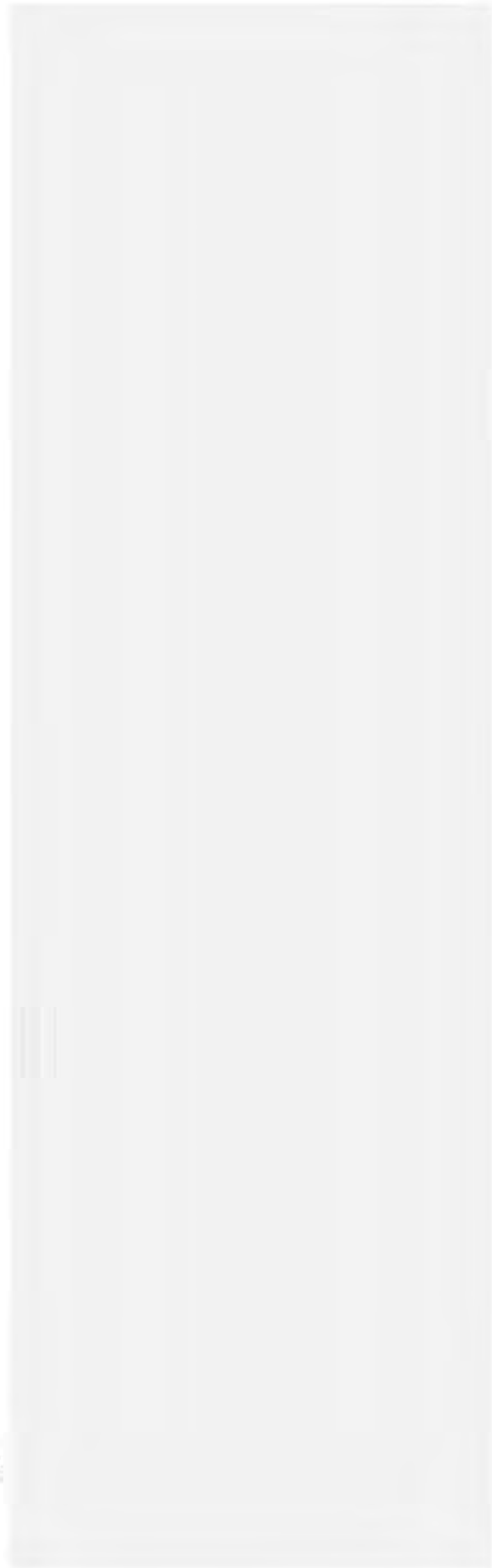


Figure 3. Entrance to the Traditional Chinese Medicine Clinic on level 2 of Building 4 (corner of Harris and Thomas Streets).

### Concord Hospital

During 2018 final-year TCM students provided 300 acupuncture treatments at Concord Hospital to cancer survivors as a community service (i.e. no fee was charged). This program, voluntary for students, has been running since 2016. It occurs within the oncology/haematology outpatients clinic at Concord Hospital and treats cancer survivor patients for pain either associated with their cancer treatment or independent of their cancer status (e.g. lower back pain). The program occurs for 20-30 weeks, the students are supervised, and patients are recruited through the Cancer Survivor Centre at Concord Hospital.

DRAFT



International partnerships

UTS has active MoUs with the following organisations for TCM:

- Dong-Eui University (Republic of Korea), for outbound teaching
- Shaolin Temple (China), for research
- Healthpac Centre for Excellence in Integrative Medicine Pty Ltd (Australia) for research
- Chengdu University of Traditional Chinese Medicine (China), for outbound teaching
- Korea Institute of Oriental Medicine (KIOM) (Republic of Korea), for outbound teaching

Stakeholder organisations

Staff in UTS TCM interact with a number of external stakeholder organisations including:

- Standards Australia via ISO Technical Committee (ISO/TC 249 Traditional Chinese Medicine)
- Concord Hospital Cancer Survivor Centre
- Australian Acupuncture and Chinese Medicine Association
- Chinese Medicine and Acupuncture Society of Australia
- Chinese Medicine Board of Australia
- Chinese Medicine Council of New South Wales
- Australian Natural Therapists Association
- World Federation of Acupuncture and Moxibustion Societies
- World Federation of Chinese Medicine Societies

Other

The CM team also convened an international research conference at UTS in 2012 titled "Scientific Acupuncture and Meridian Symposium" that attracted international significance and attendees.

TCM at other Universities

Courses in TCM are offered at 2 other universities:

- Western Sydney University, School of Science and Health: Bachelor of Traditional Chinese Medicine (4 years), which is accredited by the Chinese Medicine Board of Australia; and Master of Chinese Medicine (1.5 years full time, 3 years part-time) with the choice of a Clinical Stream or Research Stream
- RMIT, School of Health and Biomedical Sciences: Bachelor of Health Science/Bachelor of Applied Science (Chinese Medicine) (5 years) which is accredited by the Chinese Medicine Board of Australia; Master of Applied Science (Acupuncture) (3 years part-time); and Master of Applied Science (Chinese Herbal Medicine) (3 years part-time).

WSU offers a TCM Clinic as part of UniClinic. At RMIT students in the final two years of their course work treat patients in the Chinese Medicine Clinic that is part of the Health Science Clinic at University Hill in Bundoora. Research in TCM at RMIT, and additional education related to TCM, occur through the WHO Collaborating Centre for Traditional Medicine, and the Chinese Medicine Confucius Institute.



Courses in TCM are also offered by two private providers in Sydney:

- Sydney Institute of Traditional Chinese Medicine: Bachelor of Traditional Chinese Medicine (4 years) (approved by the Chinese Medicine Board of Australia); Diploma of Bachelor of Traditional Chinese Medicine Remedial Massage (1 year).
- Endeavour College of Natural Health: Bachelor of Health Science – Acupuncture (4 years) (not recognised by Chinese Medicine Board of Australia).

DRAFT

§ 2.1.2 and § 2.1.5.



**From:** Christopher Zaslowski  
**To:** IR-12  
**Subject:** RE: Meeting to discuss the faculty review report  
**Date:** Tuesday, March 12, 2019 10:59:00 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

Hi IR-12

Yes I will still proceed with the meeting despite people not being able to attend. I will have to leave slightly early as I need to fly down to Melbourne for an accreditation meeting. Maybe next week?

I am going to ask Bill for an extension of at least one week (currently due this Friday).

Cheers

Chris

---

**From:** IR-12  
**Sent:** Tuesday, 12 March 2019 10:56 AM  
**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Subject:** Re: Meeting to discuss the faculty review report

Hi Chris,

With all the 'declines', I'm concerned the meeting you've arranged for tomorrow might not be very helpful for the CM report response.

Before all this started I had planned to contact you to discuss my workload / Spring term schedule before s213.

Would you like me to come in tomorrow evening or Thursday evening? For either of these two matters?

If you are too busy, that's fine.

best wishes,

IR-12



R-1.2.



**From:** IR-1.2.  
**Sent:** Monday, 11 March 2019 12:17 PM  
**To:** IR-1.2.  
**Subject:** RE: Meeting to discuss the faculty review report

Hi Chris,

I am already booked for a workshop that day and unavailable.

Best wishes,

IR-1.2.



---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

**Sent:** Thursday, 7 March 2019 11:29 AM

**To:** Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>

**Subject:** Meeting to discuss the faculty review report

Dear all

I have tentatively booked 12.30-2.30 in 07.06.009A for a meeting next Wednesday. Hope you can all attend.

Cheers

Chris

---

**From:** Peter Meier <Peter.Meier@uts.edu.au>

**Sent:** Monday, 3 June 2019 7:14 PM

**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>; Carolyn Michael <Carolyn.Michael@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>; Weihong Li <Weihong.Li-1@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Sheila Humbel <Sheila.Humbel@uts.edu.au>

**Subject:** options paper

Dear All,

Attached is the draft of the options paper I intend to present. I have not written summaries yet but I will focus those down into what will form a clear set of options.

I may remove the reference to the VET sector if we feel that's not realistic

Please provide any comments to me by tomorrow before 4. I will finalise the paper and send to the dean on Wednesday.

Peter

-----  
Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science  
University of Technology, Sydney  
PO Box 123, Broadway  
NSW 2007, Australia

ph: +61 2 9514 7858 fax: +61 2 9514 8206

UTS CRICOS Provider Code: 00099F

DISCLAIMER: This email message and any accompanying attachments may contain confidential information. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message. Any views expressed in this message are those of the individual sender,

except where the sender expressly, and with authority, states them to be the views of the University of Technology Sydney. Before opening any attachments, please check them for viruses and defects.

Think. Green. Do.

Please consider the environment before printing this email.

**From:** [Christopher Zaslowski](#)  
**To:** [Peter Meier](#); [Carolyn Michael](#); [Dale Elsdon](#); [Huiling Yao](#); [Weihong Li](#); [Shuai Zheng](#); [Mary Garvey](#); [Chunlin Zhou](#); [Nancy Morgan](#); [Xianqin Qu](#); [Sean Walsh](#); [Sheila Humbel](#)  
**Subject:** RE: options paper  
**Date:** Wednesday, June 5, 2019 4:43:00 PM  
**Attachments:** IR-13. TCM status report Revised 2019-05-29 2019-06-05 (002).docx

---

Thanks Peter. I have also sent the response to Bills option paper as well (attached) within this email. Thanks also to those who commented on this as well. Hopefully both documents can give us a way forward.

Cheers  
 Chris

*Dear Dianne and Bill*

*Please find attached the second round of comments resulting from the second draft of the options paper from the CM team. I keep inserting the WTO article (8.15) which I believe is important to recognise, that the Australian government has tabled the support of Chinese medicine regulation and education in Australia. I have also updated the student numbers for 2019 based on the recent 2019 Autumn census and identified clearly the amount of funding left for salary and NSI after both Central and faculty have deducted their costs. I have used track changes so you can see the suggested changes. I believe Peter has also sent an options paper in addition to this report.*

*Thanks Chris*

---

**From:** Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Sent:** Wednesday, 5 June 2019 4:27 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michael <[Carolyn.Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Sheila Humbel <[Sheila.Humbel@uts.edu.au](mailto:Sheila.Humbel@uts.edu.au)>  
**Subject:** RE: options paper

This is the final copy that I have sent to the dean. Thanks to those that contributed.

Peter

-----  
 Peter C Meier  
 Associate Dean (Teaching and Learning)  
 Faculty of Science



---

**From:** Peter Meier

**Sent:** Monday, 3 June 2019 7:14 PM

**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michael <[Carolyn.Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[chunlin.zhou@uts.edu.au](mailto:chunlin.zhou@uts.edu.au)>; Nancy Morgan ([Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)) <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Sheila Humbel <[Sheila.Humbel@uts.edu.au](mailto:Sheila.Humbel@uts.edu.au)>

**Subject:** options paper

Dear All,

Attached is the draft of the options paper I intend to present. I have not written summaries yet but I will focus those down into what will form a clear set of options.

I may remove the reference to the VET sector if we feel that's not realistic

Please provide any comments to me by tomorrow before 4. I will finalise the paper and send to the dean on Wednesday.

Peter

-----  
Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science  
University of Technology, Sydney  
PO Box 123, Broadway  
NSW 2007, Australia

ph: +61 2 9514 7858 fax: +61 2 9514 8206

UTS CRICOS Provider Code: 00099F

DISCLAIMER: This email message and any accompanying attachments may contain confidential information. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message. Any views expressed in this message are those of the individual sender, except where the sender expressly, and with authority, states them to be the views of the University of Technology Sydney. Before opening any attachments, please check them for viruses and defects.

**From:** [Raelene La Ferla](#)  
**To:** [Christopher Zaslowski](#)  
**Cc:** [Andrea Leigh](#); [William Gladstone](#)  
**Subject:** Q & A from Chinese Medicine Meeting  
**Date:** Monday, February 4, 2019 2:52:39 PM  
**Attachments:** [Questions and Answers from meeting with Chinese Medicine 6 Dec 2018.docx](#)

---

Hi Chris

My apologies for the delay in getting these notes to you. Please find attached as requested.

Raelene

**From:** [Dale Elsdon](#)  
**To:** [Christopher Zaslowski](#)  
**Cc:** [Shuai Zheng](#); [Carolyn Michaeli](#); [Nancy Morgan](#); [Weihong Li](#)  
**Subject:** Re: Q & A from Chinese Medicine Meeting  
**Date:** Tuesday, February 5, 2019 1:41:25 PM

---

Hello Chris,  
Is there a page missing from this, or did she stop taking notes half way through?

I thought the conversation was a bit longer than this.  
Perhaps we should defer to <sup>IR-1.3.</sup> notes.

Dale

On 4 Feb 2019, at 6:25 pm, Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)> wrote:

Hi all please find attached the notes from the discussion with the deputy Dean last year. Please feed back any comments reflections.  
Thanks Chris

Sent from my Samsung Galaxy smartphone.

----- Original message -----

From: Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
Date: 04/02/2019 2:52 p.m. (GMT+10:00)  
To: Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
Cc: Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>, William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
Subject: Q & A from Chinese Medicine Meeting

Hi Chris

My apologies for the delay in getting these notes to you. Please find attached as requested.

Raelene

<Questions and Answers from meeting with Chinese Medicine 6 Dec 2018.docx>

**From:** [William Gladstone](#)  
**To:** [Christopher Zaslowski](#)  
**Cc:** [Andrea Leigh](#)  
**Subject:** Q re TCM staff  
**Date:** Friday, February 8, 2019 7:46:22 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

Dear Chris

I am gathering background information for the options paper. Here is the list of TCM academic staff sent to me by HR who were employed at the end of 2018 as either fixed-term or continuing academics:

Meier, Peter
Zaslowski, Christopher
Michael, Carolyn (Carolyn)
Yao, Huiling (Huiling)
Li, Wei Hong (Weihong)
Elsdon, Dale Scott
Zheng, Shuai
Garvey, Mary (Mary)
Zhou, Chunlin (Chunlin)
Morgan, Nancy (Nancy)
Walsh, Sean Patrick (Sean)
Qu, Xianqin (Xianqin)

Can you please tell me:

- does each person have accredited qualifications as TCM practitioner?
- who does not have a PhD

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

**From:** [Christopher Zaslowski](#)  
**To:** [Shuai Zheng](#)  
**Subject:** Re: Re: Questions about the formal admission  
**Date:** Friday, November 30, 2018 1:33:50 PM

---

Hi Shuai

I have just received news from the Dean that the intake for 2019 will proceed as usual. Good news!

Cheers Chris

Sent from my Samsung Galaxy smartphone.

----- Original message -----

**From:** Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>  
**Date:** 30/11/2018 1:06 p.m. (GMT+10:00)  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>, Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** Fwd: Re: Questions about the formal admission

FYI

Dr Shuai Zheng, PhD

Lecturer  
Subject Coordinator [99618](#) | [99651](#) | [99652](#)  
UTS | Science | SoLS | CM | [CB04.06.350](#)  
[shuai.zheng@uts.edu.au](mailto:shuai.zheng@uts.edu.au) | 61 2 9514 7854

----- Forwarded message -----

**From:** v2.1.9 (out of scope) [@gmail.com](#)>

v2.1.9 (out of scope)



**From:** [Christopher Zaslowski](#)  
**To:** [Peter Meier](#); [Shuai Zheng](#)  
**Subject:** RE: Re: Questions about the formal admission  
**Date:** Friday, November 30, 2018 5:14:00 PM

---

Hi all

Judging from the email sent from the Provost it looks like they are not approving intake of internationals but only domestic ?

---

**From:** Peter Meier  
**Sent:** Friday, 30 November 2018 5:09 PM  
**To:** Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** RE: Re: Questions about the formal admission

Hi Shuai,

We have been advised that we will have a 2019 intake so feel free to reply to any further enquiries that an offer will proceed.

regards

Peter

---

Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science

---

**From:** Shuai Zheng  
**Sent:** Friday, 30 November 2018 1:07 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** Fwd: Re: Questions about the formal admission

FYI

Dr Shuai Zheng, PhD

Lecturer  
Subject Coordinator [99618](tel:99618) | [99651](tel:99651) | [99652](tel:99652)  
UTS | Science | SoLS | CM | CB04.06.350  
[shuai.zheng@uts.edu.au](mailto:shuai.zheng@uts.edu.au) | 61 2 9514 7854

----- Forwarded message -----  
**From:** © 2.1.0. (out of scope). [@gmail.com](#)>

© 2.1.0. (out of scope).



**From:** [Peter Meier](#)  
**To:** [Shuai Zheng](#); [Christopher Zaslowski](#)  
**Subject:** RE: Re: Questions about the formal admission  
**Date:** Friday, November 30, 2018 6:26:16 PM

---

Dear Shuai,

I have now been advised that international student intakes will be suspended. It is only domestic student intakes that will proceed. You will need to modify your advice accordingly.

Peter

-----  
Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science

---

**From:** Peter Meier  
**Sent:** Friday, 30 November 2018 5:09 PM  
**To:** Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** RE: Re: Questions about the formal admission

Hi Shuai,

We have been advised that we will have a 2019 intake so feel free to reply to any further enquiries that an offer will proceed.

regards

Peter

-----  
Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science

---

**From:** Shuai Zheng  
**Sent:** Friday, 30 November 2018 1:07 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** Fwd: Re: Questions about the formal admission

FYI

**From:** [Peter Meier](#)  
**To:** [Christopher Zaslowski](#)  
**Subject:** RE: Report  
**Date:** Thursday, March 14, 2019 12:10:41 AM

---

The course quality index is the provosts system and numbers taken from various metric sets and then an algorithm applied. You just have to take them on face value

---

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Wednesday, 13 March 2019 12:03 PM  
**To:** s.2.1.3. (Peter Meier's personal email)  
**Subject:** Report

Hi Peter

I am going through the report and need clarification on some figures Bill is reporting regarding the course.

1. What is the current enrolment for 2019? Bill has it as 56 for 2019 and “declining annually from 79 in 2015”\
2. “The TCM courses had a Course Quality Index of 0.84. This overall below average result was driven by below average results for the Graduate Satisfaction with Course (0.807) and Graduate Satisfaction with Teaching (0.535), and the higher weightings for these indexes (25%) compared to the other indexes. The other indexes were close to, or at, national average values: Success Rate (1.011, 15% weighting), Retention Rate (1.042, 15% weighting), and Student Satisfaction with Quality (0.969, 20% weighting).”

Are these figures correct and available to see?

Thanks Chris

UTS CRICOS Provider Code: 00099F DISCLAIMER: This email message and any accompanying attachments may contain confidential information. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message. Any views expressed in this message are those of the individual sender, except where the sender expressly, and with authority, states them to be the views of the University of Technology Sydney. Before opening any attachments, please check them for viruses and defects. Think. Green. Do. Please consider the environment before printing this email.



**From:** IR-13.  
**To:**  
**Cc:** s.2.1.3. (Peter Meier's personal email)  
**Subject:** response document to Dean  
**Date:** Wednesday, May 15, 2019 2:15:00 PM  
**Attachments:** [Response to Dean.docx](#)  
[2018 Chinese Medicine Discipline Report.pdf](#)

---

Hi all

Please see my response to the Dean. I also intend to attach the 2018 CM status review provided at the end of each year to Bill.

Please get back to me with any feedback ASAP as I plan to send tomorrow to the Dean.

Thanks IR-13.

**From:** s.2.1.2.  
**To:** Christopher Zaslowski  
**Subject:** RE: response document to Dean  
**Date:** Wednesday, May 15, 2019 2:30:43 PM

---

Hi Chris,

Please remove where it says I am s.2.1.2. under the listing of s.2.1.2.

Regards,

s.2.1.2.

---

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Wednesday, 15 May 2019 2:15 PM  
**To:** Sean Walsh <Sean.Walsh@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Carolyn Michaeil <Carolyn.Michaeil@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Weihong Li <Weihong.Li-1@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>  
**Cc:** s.2.1.3. (Peter Meier's personal email)  
**Subject:** response document to Dean

Hi all

Please see my response to the Dean. I also intend to attach the 2018 CM status review provided at the end of each year to Bill.

Please get back to me with any feedback ASAP as I plan to send tomorrow to the Dean.

Thanks Chris

**From:** IR-1.3  
**To:** [Dianne Jolley](#)  
**Cc:** [William Gladstone](#); [Peter Meier](#)  
**Subject:** RE: Response for Deans meeting next week  
**Date:** Wednesday, May 22, 2019 2:20:01 PM

---

Thanks Dianne

Again this morning I received a call from the technical officer in the CM clinic that one of the Chinese medicine students who is a Science "sprout" sent her the following email

*Hi Sheila I'm at a sprouts training session and they mentioned the tcm degree might be cut soon - is that true?*

I told Sheila to tell her the course is "under review". Rumours abound.

Cheers

R-1.3.

---

**From:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>  
**Sent:** Tuesday, 21 May 2019 6:47 PM  
**To:** IR-1.3  
**Cc:** [William Gladstone](#) <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; [Peter Meier](#) <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** Re: Response for Deans meeting next week

Hello R-1.3.

Thank you for this information and for conveying the concerns of the TCM team. This is a very difficult time for the team, and I appreciate that the uncertainty is not helping.

I will discuss this with Bill Gladstone tomorrow to identify how we can better facilitate this whole process.

Best wishes

Dianne

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology, Sydney NSW Australia

\* Sent from my phone

---

**From:** IR-1.3  
**Sent:** Tuesday, May 21, 2019 11:42 am

**To:** Dianne Jolley  
**Cc:** William Gladstone; Peter Meier  
**Subject:** Response for Deans meeting next week

Dear Dianne

Thank you for the notification email informing us the University has decided not to market the course in the UAC guide and that the TCM status report that was circulated and subsequently submitted for executive consideration in April 2019. It was also noted that the response to the report is still under discussion, and that you are not able to provide any further information. This is at odds with what information has been relayed to us that the Faculty is still responding to our previous comments on of the draft report. We are aware we are to attend a meeting with yourself and the Deputy Dean on the 29<sup>th</sup> May but have received no agenda at this point in time.

We would like you to note that despite providing feedback on a draft report we did not received any final report for confirmation. We were also told that individual staff members would be consulted prior to submitting the final report which did not occur. We had prepared several documents (see attached 2017 and 2018 review documents) that listed all activities, publications, yet very few of these were tabled in the draft report we commented on.

It should be noted that the Australian government is supportive of Chinese medicine education noting in the signed Australia-China Trade agreement (Free Trade Agreement between the Government of Australia and the Government of the People's Republic of China, 2015) specific statements and requirements into the World Trade agreement were incorporated.

*2. Each Party, where possible, will encourage the relevant bodies in its territory to develop, where possible, mutually acceptable standards and criteria for licensing and certification, and to provide recommendations to the Committee on Trade in Services on mutual recognition with respect to service sectors mutually agreed by the Parties, including engineering and Traditional Chinese Medicine.*

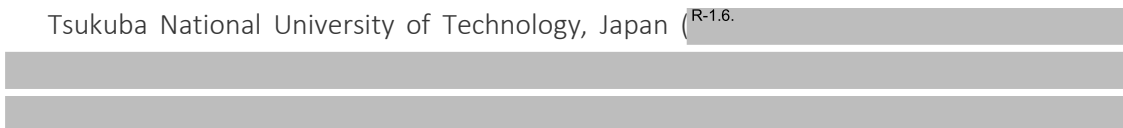
ARTICLE 8.15: QUALIFICATIONS RECOGNITION COOPERATION

### **Course accreditation**

The provision of educational programs are accredited under the National Law and we have recently been notified by the Australian Health Practitioner Regulatory Agency (AHPRA) that there are no conditions on the program.

To date in 2019, the CM discipline has **received delegations from**

- Tsukuba National University of Technology, Japan (R-1.6.



IR-1.6. [REDACTED]  
[REDACTED]  
[REDACTED]). This was a three day instructional program for visually impaired acupuncture students. This university specialises in training students with disabilities and was the second time we have hosted them for such an event.

- Chiba University (IR-1.6. [REDACTED] April);
- Korea Institute of Oriental Medicine (IR-1.6. [REDACTED] and two colleagues, research collaborators in diagnostic reliability research group, May);
- Shaolin Temple, Henan, China (IR-1.6. [REDACTED], research collaborator for the proposed IR-1.6. [REDACTED] exercise clinical trial, March).

### Hosted two visiting scholars

- Chengdu (IR-1.6. [REDACTED], February-May). A survey of students was undertaken and a manuscript for publication prepared for the Chinese and English journals.
- Beijing Sports Institute and Beijing University of Chinese medicine- (IR-1.6. [REDACTED], October-April). A staff member participated in the writing of a publication and is a co-author of, "Effects of cardiac rehabilitation qigong exercise in patients with stable coronary artery disease undergoing phase III rehabilitation: A randomized controlled trial."

### Visitations have also been made internationally to

- Hong Kong Baptist University (IR-1.6. [REDACTED], research collaborator on international multisite randomised acupuncture trial, March 2019).
- Director of the Affiliated Hospital of the Chengdu University of Chinese Medicine, Prof (IR-1.6. [REDACTED] (April, 2019). The hospital hosts the student placement for the UTS CM students in Chengdu.

### Staff in 2019 have been appointed to

- World Health Organisation (WHO review panel) for traditional medicine terminology (May, 2019)
- Accreditation Committee of the Chinese Medicine Board of Australia (2019-2022)
- Assessor Panel - Accreditation Committee of the Chinese Medicine Board of Australia
- Standards Australia delegation to ISO TC 249 Plenary, Bangkok, June 2019.

### Conferences

Academic staff and HDR students have presented research at

1. Contenance Foundation of New South Wales State Conference-Acupuncture as a treatment for Overactive Bladder and Urinary Incontinence: a review of the current evidence-3<sup>rd</sup> April 2019, Sydney.

2. International Conference on Complementary and Integrative Medicine Research – Brisbane, May 2019
  - o The effect of acupuncture treatment on lateral elbow tendinopathy: A multi-centre randomised controlled study
  - o A snapshot of Chinese Medicine practice in Australia over a 10 year period (2006 – 2016): Moving towards integrative clinical care
  - o Moxibustion-Is it safe? A GMS study on the profile of the smoke.

**The UTS Chinese medicine clinic** continues to be a central point for many learning and clinical activities. In 2018, **over 6000 patient** contacts were made in the clinic and a gross income of **\$224,673** was received through clinical services. This continues this year with 1,655 clinical patient contacts and \$62,336 received as of 15<sup>th</sup> May 2019. The clinic provides care to a wide range of presenting medical conditions, including chronic pain, adjunct cancer care, neurological and digestive conditions amongst others. The clinic maintains a database that tracks the patient presentations over time and several publications have resulted from the project.

**Financial considerations** The discipline also notes that there has been little financial information provided to them over the past several years until just recently and that there has been inadequate time to address any financial concerns raised about Course costs. The discipline did however make significant changes to the program in 2019 that resulted in an \$80,000 reduction in course costs based on the faculty spreadsheet program. It should be noted that in late 2018 when the financial data were supplied to the team leader there were gross inaccuracies including costing people on long service leave and seconded to higher duties.

It has been difficult to make progress in several areas for us as a group (despite over 18 publications last year in the field of Chinese medicine) due to the constant disruption of the review (meetings, attending to rumours, circulation of emails, responses to the Faculty) and the casualization of academic staff that continues for Chinese medicine. Several staff members have left and short terms contracts has meant a changing employment field and upskilling of new casual staff.

We hope you see our comments constructively and look forward to working with you for an amicable outcome to the review.

Regards

IR-1.3.



**From:** [Christopher Zaslowski](mailto:Christopher.Zaslowski@uts.edu.au)  
**To:** "[Carolyn Michael@uts.edu.au](mailto:Carolyn.Michael@uts.edu.au)"; [Nancy Morgan](mailto:Nancy.Morgan@uts.edu.au); [Sean Walsh](mailto:Sean.Walsh@uts.edu.au); [Mary Garvey](mailto:Mary.Garvey@uts.edu.au); "[Chunlin Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)"; [Huilong Yao](mailto:Huilong.Yao@uts.edu.au); [Sheila Humbel](mailto:Sheila.Humbel@uts.edu.au); [Weihong Li](mailto:Weihong.Li@uts.edu.au); [Shuai Zheng \(Shuai.Zheng@uts.edu.au\)](mailto:Shuai.Zheng@uts.edu.au); [Dale Elsdon](mailto:Dale.Elsdon@uts.edu.au)  
**Subject:** FW: TCM and Faculty of Health  
**Date:** Monday, March 4, 2019 3:22:00 PM  
**Attachments:** [Chinese-Medicine-Board---Report---Registration-Data-Table---December-2018.pdf](#)

---

Dear all

After my discussion with Bill last Friday morning, I received this response email from him this morning. You can see my response to his email.

Most disappointing!

Cheers

Chris

---

**From:** Christopher Zaslowski  
**Sent:** Monday, 4 March 2019 2:50 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** RE: TCM and Faculty of Health

Hi Bill

It is indeed disappointing news that a decision on an option is made without having a full review of the CM discipline. We are a registered [health profession](#) (see attached workforce data) under the Health Practitioner Regulation National Law (the National Law), as in force in each state and territory, and the National Registration and Accreditation Scheme (the National Scheme), supported by the Australian Health Practitioner Regulation Agency (AHPRA).

I will inform the CM staff.

Cheers

Chris

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Monday, 4 March 2019 8:23 AM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** TCM and Faculty of Health

Dear Chris

Following our meeting last Friday I discussed the option of TCM moving to the Faculty of Health with our Dean, Dianne Jolley. During the meeting with you and other TCM staff late in 2018 I reported that moving TCM to the Faculty of Health was a possible option.

Dianne has now had the opportunity to discuss this with the Dean of the Faculty of Health, Suzanne Chambers. Suzanne confirmed that moving TCM to the Faculty of Health is not an option for these reasons: (i) Health does not teach undergraduate complimentary medicine; (ii) Health only has one complimentary therapies research program (philanthropically funded), with one subject embedded within a public health masters, and (iii) complimentary medicine is not within the scope of the evolving Health Faculty strategy.

Can you tell the rest of the Chinese Medicine Discipline Group about this please?

I will send you the draft of the review document on Wednesday, and will ask you to distribute it to the Discipline Group, seek their feedback/corrections etc, and return these to me by Friday 15 March. I will submit the revised document to the Provost on 22 March.

Thanks very much.

Bill



**From:** [William Gladstone](#)  
**To:** [Willa Huston](#)  
**Cc:** [Andrea Leigh](#)  
**Subject:** RE: TCM casuals  
**Date:** Friday, February 22, 2019 7:46:53 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

Thanks Willa

Cheers  
Bill

---

**From:** Willa Huston <Wilhelmina.Huston@uts.edu.au>  
**Sent:** Thursday, 21 February 2019 8:31 PM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>  
**Cc:** Andrea Leigh <Andrea.Leigh@uts.edu.au>  
**Subject:** RE: TCM casuals

Hello Bill

Really good point, we would keep but revamp clinical features of disease.

This would mean ceasing CM affects at least 27 and probably 28 casual staff. 28 still because we would probably use one of our existing clinically trained staff who are itching to improve this subject to do this (both Hermily and Ghaith have spoken to me about issues and ideas to improve this subject).

It is now <sup>IR-1.2</sup> hours of casual staffing for a total spend of \$132, 263 (\$153, 519 including oncosts) for the casual spend.

Best wishes  
Willa

**Wilhelmina (Willa) Huston**  
Acting Associate Head of School Learning and Teaching  
  
Program Director Masters Medical Biotechnology

**School of Life Sciences**

**Faculty of Science**

University of Technology Sydney  
T. +61 (02) 95143449  
PO Box 123 Broadway NSW 2007 Australia  
[uts.edu.au](http://uts.edu.au)



---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Thursday, 21 February 2019 12:48 PM  
**To:** Willa Huston <[Wilhelmina.Huston@uts.edu.au](mailto:Wilhelmina.Huston@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** RE: TCM casuals

Hi Willa

Great, thanks for getting back so quickly with this data. I want to include this data for both the reasons you suggest below ie understanding the \$\$ aspects, and also the potential impacts on staff who are employed as casuals.

Can you re-do and exclude Clinical Features of Disease, because it is shared with another program. If TCM is discontinued then we will continue offering this subject won't we?

Thanks!

Bill

---

**From:** Willa Huston <[Wilhelmina.Huston@uts.edu.au](mailto:Wilhelmina.Huston@uts.edu.au)>  
**Sent:** Thursday, 21 February 2019 12:20 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** RE: TCM casuals

Hello Bill

Thanks to Kristine's help I have the full report on all contracts issued in 2019 for CM for casuals.

If you look at the three columns to the right there is a summary per subject in terms of costs and numbers of casuals per subject and the total for the program at the bottom – summary of the casual \$. I presume the \$ is the main reason for this query.

However, if you need this information to workout impacts/communication on casuals in terms of staff, look at the second spreadsheet where I have sorted the data independent of subject by staff number. We have a total of 27 casual staff we use in CM in 2018, ~4 or 5 of them teach across a number of subjects so would be most impacted by any changes.

In my perspective, a high level view of the program suggests that they are heavily used for the clinical and professional practise subjects (not so much theory) indicating that they are offering some form of external or specialised expertise or teaching associate time in the clinical labs. One thing to note maybe, is that the key subject that is almost entirely taught and coordinated by casuals is Clinical Features of Disease – because we try to staff and run it exclusively by western medicine clinicians, and it is also used in the Adv Sci Pre-Med program.

I will get onto your other query shortly.

Best wishes

Willa

**Wilhelmina (Willa) Huston**

Acting Associate Head of School Learning and Teaching

Program Director Masters Medical Biotechnology

**School of Life Sciences**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 95143449

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Sent:** Thursday, 21 February 2019 8:19 AM  
**To:** Willa Huston <[Wilhelmina.Huston@uts.edu.au](mailto:Wilhelmina.Huston@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** TCM casuals

Hi Willa

I need some information on casuals teaching in TCM subjects: how can I get it? I need to know (for 2018): the TCM-specific subjects that employed casuals, the number of casuals employed in each of these subjects, and the total casual hours required for each of these subjects.

Thanks  
Bill

**From:** [Fiona Thomas](#)  
**To:** [Raelene La Ferla](#); [Frank Young](#)  
**Cc:** [Lesley Healy](#); [Kate Higgs](#)  
**Subject:** RE: TCM emails  
**Date:** Wednesday, July 17, 2019 9:41:46 AM

---

Hi Rae,

Thanks for your email.

The last few days have been quite tricky with this project. I have cc'd Kate as she is on her own over in Science working on this, and I have cc'd Greg. Dianne and Bill are away.

RE – EAP

Myself and Lesley spoke yesterday with Kate regarding EAP support and we agreed that we would engage peoplesense now. We know that Dianne wants a tailored 1:1 support program so we don't need to wait for her to meet with people sense – we will do that and get the program up and running. The change is evoking a very emotive response and a campaign like approach. Lesley has already approached peoplesense and she has organised a meeting to get this rolling (you have the invite Rae).

RE – response from Chris

Kate has been dealing with the unfortunate invite that went out to faculty board on Monday with an attachment and an agenda that clearly communicates the faculty senior management support for discontinuation of the program. She did not want that invite to go out until closer to the faculty board meeting and following a meeting with Dianne and the CM team. However because it went out Kate quickly mitigated this and sent an email from Dianne to the CM team to update them so they would not hear it from someone on faculty board first. Its not ideal we all know. With regards to Chris, he has had a lot of time to send in his feedback on the viability and the research (this was first discussed with the team in Dec last year), so I am not overly concerned with his email, and ongoing feedback is always considered.

However we are going to discuss with Kate the possibility of setting up a meeting with Dianne and the team when Dianne gets back as it is always better to have a meeting rather than emails.

I also agree with Frank that some of these emails do require a tailored response, and we will work with Kate on this.

Fi

---

**From:** Raelene La Ferla <Raelene.LaFerla@uts.edu.au>  
**Sent:** Wednesday, 17 July 2019 7:54 AM  
**To:** Frank Young <Frank.Young@uts.edu.au>; Fiona Thomas <Fiona.Thomas@uts.edu.au>

**Subject:** TCM emails

**Importance:** High

Hi Frank and Fi,

I'm just cc'ing you in to a couple of emails received yesterday. Sorry Lesley may have already shown you the first one from <sup>R-1.2</sup> [REDACTED]  
[REDACTED]  
[REDACTED]. We don't have a meeting with Di until 2 August to discuss EAP solutions.

The second one is from Chris the Discipline Lead. TCM staff have been given opportunity to put their feedback forward and it has been considered. I'm thinking we may want to draft a response to that effect however I wanted to confirm with you both.

Sorry I am not in the office again today as I'm not well but I am contactable on the mobile if you need me.

Rae

## TRADITIONAL CHINESE MEDICINE (TCM) – PROJECT TIMELINE

### Suggested high level process timeline to communicate to Chris and TCM team:

- Consultation on Options Paper with TCM team
- Review and incorporate feedback on Options Paper
- Executive decision on preferred option for future of TCM
- Consultation with TCM team on preferred option for future of TCM
- Review and incorporate feedback and develop a change plan
- Implementation of preferred option for future of TCM

Dec 18 / Feb 19  
 End Feb / Mar 19  
 Mar 19  
 Apr / May 19  
 June 19  
 June onwards

### Detailed Plan

Activity	Comments	Responsible	Indicative Timeframe by	Status
<b>Planning Phase</b>				
Develop comms plan with key messages for relevant stakeholders	Statement provided to send to stakeholders to ensure consistent message	MCU / BG / AL / HRU	16 Nov 18	In progress
Develop high level project plan		HRU	16 Nov 18	Complete
Decision regarding options for student intake for 2019	Refer email from Greg 13/11 with relevant information on enrolments	Provost / BG	16 Nov 18	Complete
1:1 meeting with Chris Zaslowski	Outline high level process timeline. Advise CZ that he will be able to provide detailed feedback on the Options during the consultation period.	BG / AL	16 Nov 18	Complete
1:1 meeting with Peter Meier	Outline high level process timeline	BG/AL	16 Nov 18 or	Complete
Email SMG, School Executive regarding the high level timeline of the change strategy for the future of TCM	This should be done prior to F 2 F meeting with TCM staff	BG / AL	16 Nov 18	Complete
Discuss the support staff in TCM may need during this process, with an emphasis on immediate needs	HRU to organise (Ray)	HRU / CZ / BG / AL	23 Nov 18	Complete
Develop an Options Paper on the future of Traditional Chinese Medicine and provide to Provost for comment		BG	23 Nov 18	In progress
Meet with TCM team (include Xiangqin Qu)	Outline high level timeline.	BG / AL	7 Dec 18	
Advise Ass Dean T&L in FASS of potential change to TCM	A decision on the future of TCM may impact the BA Intl studies in TCM	BG /AL	7 Dec 18	

Activity	Comments	Responsible	Indicative Timeframe by	Status
Shirley Alexander advised on the Options Paper and high level timeline		BG / AL	7 Dec 18	In progress
<b>Consultation 1: On Options Paper</b>				
F2F meeting with relevant staff within TCM (plus Qu) to: <ul style="list-style-type: none"> <li>- provide the Options Paper</li> <li>- provide a timeline for consultation</li> <li>- outline process for providing feedback</li> <li>- provide information on support options</li> </ul>	Consultation period commences – End Jan / Feb 19	BG / AL	Dec 18 / Feb 19	
<i>Communication to other key stakeholders, alumni, UTS Staff, external bodies etc.</i>	<i>refer communication plan</i>	MCU / CZ / BG / AL / HRU	Jan / Feb 19	
Options paper provided to NTEU and CPSU	TBA – will check if required	HRU	Jan / Feb 19	
Feedback on Options Paper collated	This will be an iterative process	BG / AL / HRU	Feb 19	
Risk Assessment developed for each option taking feedback gathered during consultation into consideration	BG has already had an indicative discussion with Nick Glover regarding the proposed options	BG / AL / Nick Glover	Nov 18 / Feb 19	In progress
Options Paper updated to incorporate feedback from TCM/ stakeholders with risk assessment and provided to the Provost		BG/AL	End Feb / Mar 19	
Taking all feedback into consideration, options for the future of TCM presented to SEM		Provost / BG	Mar 19	
Preferred option identified on the future of TCM	<b>Milestone</b>	SEM	Mar 19	
Communicating SEM decision to Chris and Peter, then School Exec and SMG	Suggest 1:1 with Chris and Peter and meeting with TCM.	BG/AL	ASAP following SEM decision	
<i>Communication to other key stakeholders</i>	<i>Refer communication plan</i>			
Commence Implementing Planning on preferred option	This is dependent on the preferred option	BG/AL/HRU/MCU	Apr 19	
	Consultation 2 outlined below will be included as part of implementation planning.			
	<b>A separate detailed implementation team may need to be put together to undertake detailed</b>			



Activity	Comments	Responsible	Indicative Timeframe by	Status
<i>Revise / update communication plan in line with preferred option</i>	<b>implantation planning on all other aspects of implementation of preferred option</b> <i>Refer communication plan</i>	BG / AL / HRU	Apr 19	
Impact assessment conducted deriving from the preferred option for the future of TCM and preparation of Change Proposal/consultation paper	This is dependent on the preferred option			
<b>Consultation 2: On Preferred Option –People impact, if Relevant</b>				
Develop consultation document outlining the proposed impact of the preferred option, and strategies to mitigate this impact.			Apr 19	
★ 1:1 consultation meetings with affected staff. Consultation document provided to relevant staff regarding the impact and a proposed implementation approach	Staff given a 2 week min period to provide feedback	BG / AL	Apr / May 19	
Feedback considered and amendments made as appropriate		BG / AL	May 19	
★ Change plan prepared		BG / AL / HRU	June 19	
Change plan released to relevant staff		BG	June 19	
<i>Communication to relevant stakeholders on the future of TCM</i>	<i>Refer communication plan</i>	MCU / BG / AL / CZ/HRU	June 19	
<b>Implementation</b>				
★ Implementation of 'people' change as outlined in Change Plan	Note – this may have a long lead time depending on the option	BG / AL / HRU	June 19 onwards	

## TRADITIONAL CHINESE MEDICINE (TCM) – PROJECT TIMELINE

### Suggested high level process timeline to communicate to Chris and TCM team:

- Consultation on Options Paper with TCM team
- Review and incorporate feedback on Options Paper
- Executive decision on preferred option for future of TCM
- Consultation with TCM team on preferred option for future of TCM
- Review and incorporate feedback and develop a change plan
- Implementation of preferred option for future of TCM

Dec 18 / Feb 19  
 End Feb / Mar 19  
 Mar 19  
 Apr / May 19  
 June 19  
 June onwards

### Detailed Plan

Activity	Comments	Responsible	Indicative Timeframe by	Status
<b>Planning Phase</b>				
Develop comms plan with key messages for relevant stakeholders	Statement provided to send to stakeholders to ensure consistent message	MCU / BG / AL / HRU	16 Nov 18	In progress
Develop high level project plan		HRU	16 Nov 18	Complete
Decision regarding options for student intake for 2019	Refer email from Greg 13/11 with relevant information on enrolments	Provost / BG	16 Nov 18	Complete
1:1 meeting with Chris Zaslowski	Outline high level process timeline. Advise CZ that he will be able to provide detailed feedback on the Options during the consultation period.	BG / AL	16 Nov 18	Complete
1:1 meeting with Peter Meier	Outline high level process timeline	BG/AL	16 Nov 18 or	Complete
Email SMG, School Executive regarding the high level timeline of the change strategy for the future of TCM	This should be done prior to F 2 F meeting with TCM staff	BG / AL	16 Nov 18	Complete
Discuss the support staff in TCM may need during this process, with an emphasis on immediate needs	HRU to organise (Ray)	HRU / CZ / BG / AL	23 Nov 18	Complete
Develop an Options Paper on the future of Traditional Chinese Medicine and provide to Provost for comment		BG	23 Nov 18	In progress
Meet with TCM team (include Xiangqin Qu)	Outline high level timeline.	BG / AL	7 Dec 18	Complete
Advise Ass Dean T&L in FASS of potential change to TCM	A decision on the future of TCM may impact the BA Intl studies in TCM	BG /AL	7 Dec 18	Complete

Activity	Comments	Responsible	Indicative Timeframe by	Status
Shirley Alexander advised on the Options Paper and high level timeline		BG / AL	7 Dec 18	In progress
Brief new Dean of Science on draft Options Paper	<i>Refer communication plan</i>	BG	Dec 18	
<b>Consultation 1: On Options Paper</b>				
F2F meeting with relevant staff within TCM (plus Qu) to:	Consultation period commences – End Jan / Feb 19	BG / AL	Dec 18 / Feb 19	
- provide the Options Paper				
- provide a timeline for consultation				
- outline process for providing feedback				
- provide information on support options				
<i>Options paper provided to relevant internal stakeholders</i>	Faculty's Senior Management Group Faculty's Teaching and Learning Committee School Teaching and Learning Committee Other relevant internal stakeholders: Deans, Faculty of Health and Faculty of Arts and Social Sciences	BG / AL	Dec 18 / Feb 19	
<i>Communication to other key stakeholders, alumni, UTS Staff, external bodies etc.</i>	<i>Refer communication plan</i> <i>refer communication plan</i>	MCU / CZ / BG / AL / HRU	Jan / Feb 19	
Options paper provided to NTEU and CPSU	TBA – will check if required	HRU	Jan / Feb 19	
Feedback on Options Paper collated	This will be an iterative process	BG / AL / HRU	Feb 19	
Risk Assessment developed for each option taking feedback gathered during consultation into consideration	BG has already had an indicative discussion with Nick Glover regarding the proposed options	BG / AL / Nick Glover	Nov 18 / Feb 19	In progress
Options Paper updated to incorporate feedback from TCM/ stakeholders with risk assessment and provided to the Dean of Science and Provost		BG/AL	End Feb / Mar 19	
Final Options Paper provided to CM team and other relevant stakeholders e.g. SMG	<i>Refer communication plan</i>	Provost / BG	Mar 19	
Taking all feedback into consideration, options for the future of TCM presented to SEM		SEM	Mar 19	
Preferred option identified on the future of TCM	<b>Milestone</b>			

Activity	Comments	Responsible	Indicative Timeframe by	Status
Further internal approval/ recommendation/ due diligence may be required depending on the identified preferred option		TBD	Mar onwards	
Communicate SEM decision to Chris and Peter, then School Exec, SMG and other relevant internal stakeholders including Faculty and School T&L committees	Suggest 1:1 with Chris and Peter and meeting with TCM. <i>Refer communication plan</i>	BG/AL	ASAP following SEM decision	
Commence Implementing Planning on preferred option	This is dependent on the preferred option	BG/AL/HRU/MCU	Apr 19	
<i>Revise / update communication plan in line with preferred option</i>	Consultation 2 outlined below will be included as part of implementation planning.  <b>A separate detailed implementation team may need to be put together to undertake detailed implementation planning on all other aspects of implementation of preferred option</b>			
Impact assessment conducted deriving from the preferred option for the future of TCM and preparation of Change Proposal/consultation paper	<i>Refer communication plan</i> This is dependent on the preferred option	BG / AL / HRU	Apr 19	
<b>Consultation 2: On Preferred Option –People impact, if Relevant</b>				
Develop consultation document outlining the proposed impact of the preferred option, and strategies to mitigate this impact.		HRU / BG / AL	Apr 19	
Brief Dean of Science of potential impact to CM staff and seek approval of proposal Brief SMG and School of Life Science Exec on proposal Provost approval to consult	<i>Refer communication plan</i>	BG	Apr 19	
1:1 consultation meetings with affected staff.	Commence consultation with Peter and Chris prior to the team	BG BG / AL	Apr 19 Apr / May 19	



Activity	Comments	Responsible	Indicative Timeframe by	Status
Consultation document provided to relevant staff regarding the impact and a proposed implementation approach	Staff given a 2 week min period to provide feedback			
Feedback considered and amendments made as appropriate		BG / AL	May 19	
Change plan prepared		BG / AL / HRU	June 19	
Brief Dean of Science on Change Plan and seek endorsement Brief SMG, School of Life Science Exec and other relevant internal stakeholders on Change Plan	<i>Refer communication plan</i>	BG	June 19	
Provost approval of Change Plan		BG	June 19	
Change plan released to relevant staff		BG	June 19	
<i>Communication to relevant stakeholders on the future of TCM</i>	<i>Refer communication plan</i>	MCU / BG / AL / CZ/HRU	June 19	
<b>Implementation</b>				
Implementation of 'people' change as outlined in Change Plan	Note – this may have a long lead time depending on the option	BG / AL / HRU	June 19 onwards	

**From:** [William Gladstone](#)  
**To:** [Raelene La Ferla](#)  
**Subject:** RE: TCM options paper timeline  
**Date:** Thursday, March 21, 2019 1:28:00 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[image008.png](#)  
[image009.png](#)  
[TCM status and options DRAFT v2019-03-21.docx](#)

---

Hi Rae

Here is the preliminary draft of the review and options paper that I will send to the Provost tomorrow. Please note it is confidential. I completed it this morning.

I provided a shorter version to the TCM group (on 7 March) that included only the factual information i.e. everything before the section called Overview (i.e. pages 1-17) to ensure the information was correct. The section called Overview is my interpretation of the factual information.

I asked for feedback from the TCM group by 15 March but Chris advised they could not meet that deadline because many staff were busy at the start of Autumn teaching session.

I also offered to meet with Chris and the TCM group to get their verbal feedback and answer any questions.

After discussing it with Dianne we decided that a preliminary draft of the report should still be submitted to the Provost on 22 March (the deadline we had set several weeks before), and that a final version would be submitted after I had received feedback from the TCM group, Dianne and Andy.

Dianne has read the attached report and has agreed to me submitting it tomorrow. I also provided a copy to Andy, in case she was able to give some feedback in time for me to submit it tomorrow.

Thanks

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

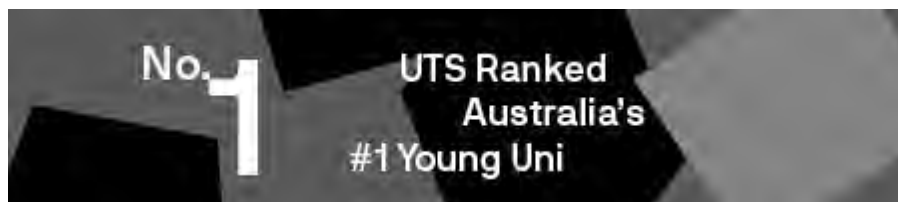
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Sent:** Thursday, 21 March 2019 1:14 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** RE: TCM options paper timeline

Hi Bill,

How developed is the options paper? Would you mind if Fiona and I took a look at it? And have you heard from any of the TCM staff on keeping the course at UTS ie did they present evidence?

Rae

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Thursday, 21 March 2019 1:13 PM  
**To:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>  
**Cc:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Subject:** RE: TCM options paper timeline

Thanks very much Greg

I will let you know as soon as the next steps become clearer.

Cheers  
Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

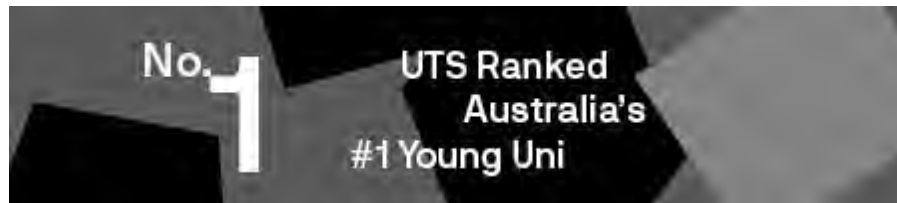
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Sent:** Wednesday, 20 March 2019 8:36 AM

**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>

**Cc:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** RE: TCM options paper timeline

Hi Bill and Andy

I understand things might have recently progressed in terms of the options? If so, might be good for us to get back together to plan. Will leave it to you, but at your disposal

Best wishes

Greg

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Sent:** Friday, 7 December 2018 9:50 AM

**To:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>

**Cc:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Subject:** RE: TCM options paper timeline



Hi Lesley

I have updated the plan, and have included the Deans of Health, and Arts and Social Sciences for internal consultation.

I have also noted that the team consultation yesterday, and my communication with the Faculty of Arts and Social Sciences, have occurred.

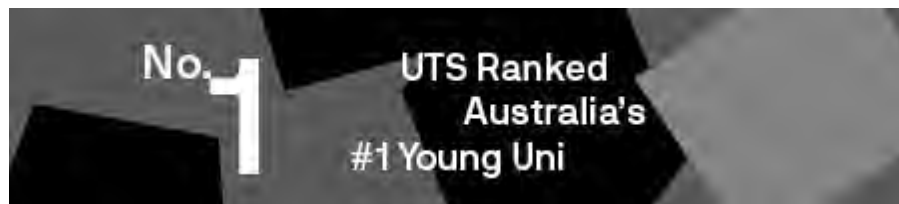
The question was asked yesterday about whether the Faculty of Health should be approached before the options paper is drafted, so we have an understanding about whether transfer there is even a viable option. I will arrange a meeting of me, Dianne (new Science Dean), and new Dean of Health to discuss.

Thanks  
Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) s.2.1.3.  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>  
**Sent:** Wednesday, 5 December 2018 10:44 AM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Cc:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Subject:** RE: TCM options paper timeline

Hi Bill,

The questions/comments below are good and I have updated the project plan to include them (highlighted in yellow for your review). We also expect Greg's comms plan will cover off on those touchpoints.

With regards to your final comment about Faculty and Academic Board we don't know the answer, is this something that Peter Meier will be able to clarify as Associate Dean T&L? I recall when we met with Greg that we did identify Peter and Chris as someone who could assist with identify key stakeholders for comms.

Kind regards,

**Lesley Healy**

HR Change Partner (*Mon, Tues, Wed*)

Organisational Change and Delivery

Human Resource Unit

T. +61 (02) 9514 7420

Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Sent:** Wednesday, 5 December 2018 8:25 AM

**To:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Cc:** Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** RE: TCM options paper timeline

Hi Lesley

Thanks very much, the plan is clear and provides a pathway. I am also pleased to see that the timeline for the submission of the options paper to SEM has been moved to allow more time for consultation and revision of drafts of the paper.

I have some comments/questions:

- there is no mention of the new Dean (Dianne Jolley) in any of the steps giving her endorsement/approval of the options etc
- there is also no mention of the Faculty's Senior Management Group endorsing/approving the options paper (or giving feedback), or the Faculty's Teaching and Learning Committee, or School Teaching and Learning Committee. I think SMG need to endorse/approve the options paper, and the 2 T&L committees at least need to be informed at critical stages in the timeline
- if the option of discontinuing TCM is approved by SEM, will this also require approval from Faculty Board, and then a recommendation/approval from Academic Board? Will this be part of the change proposal/plan rather than this timeline?

I have included 2 comments in the document.

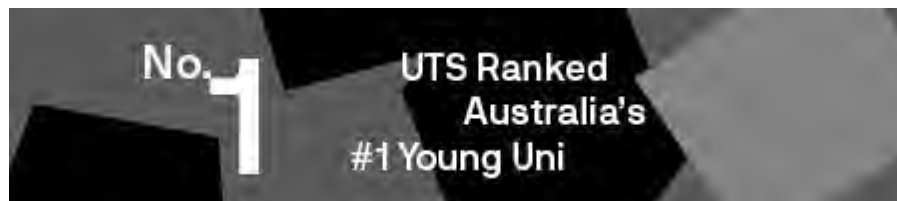
Best regards

Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>

**Sent:** Tuesday, 4 December 2018 2:14 PM

**To:** Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; William Gladstone

<[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Cc:** Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** RE: TCM options paper timeline

Hi Bill,

I have revised the high level project plan and have also included a slide which might be helpful for your meeting with the CM staff which outlines what activities we think will happen each month.

You will see that the timeline has expanded slightly from what you discussed with Andrew last week. Fiona met with Andrew this morning and he agreed that given the Christmas break and staff taking leave in January that the timeline from Dec to Feb was very tight for the options paper to be developed, consulted on and a decision made by SEM. Therefore with his blessing we have pushed the timeline for the executive decision out until March and consultation on the preferred option until Apr/May.

Please let us know if you have any concerns regarding this revised timeline.

Kind regards,

**Lesley Healy**

HR Change Partner (*Mon, Tues, Wed*)

Organisational Change and Delivery

Human Resource Unit

T. +61 (02) 9514 7420

Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

---

**From:** Fiona Thomas

**Sent:** Friday, 30 November 2018 9:10 AM

**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Cc:** Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** RE: TCM options paper timeline

Thanks for the update Bill, Lesley will be back on Monday and she will pull something together for you to share with the team.

Greg, have you got a draft comms plan that you can share?

Fi

**Fiona Thomas**

Manager, Organisational Change and Delivery,  
Human Resource Unit

T. +61 (02) 9514 1073

Level 23 Building 1, 15 Broadway, Ultimo NSW 2007

[uts.edu.au](http://uts.edu.au)



UTS acknowledges the Gadigal People of the Eora Nation and the Boorooberongal People of the Dharug Nation upon whose ancestral lands our campuses now stand. We would also like to pay respect to the Elders both past and present, acknowledging them as the traditional custodians of knowledge for these lands.

---

**From:** William Gladstone

**Sent:** Friday, November 30, 2018 6:57 AM

**To:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>; Fiona Thomas <[Fiona.Thomas@uts.edu.au](mailto:Fiona.Thomas@uts.edu.au)>; Lesley Healy <[Lesley.Healy@uts.edu.au](mailto:Lesley.Healy@uts.edu.au)>; Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>

**Subject:** TCM options paper timeline

Dear all

Andrew has agreed to the longer period for the consultations and options paper development (second slide) – thanks very much Fiona and Lesley for preparing the slides. You will see I also added another point about my capacity to do the work in the time of the original schedule.

Andrew also agreed to taking a 2019 cohort of commencing students.

I will let Chris and Peter know, and also re-schedule the staff meeting to a day next week.

Can you please adjust the original timeline doc to fit the new longer approach.

And, in the interests of complete transparency: what shall staff be telling students who come to UTS on Info Day (15 Dec) asking about the TCM course?

Thanks very much

Bill

**Professor William Gladstone GAICD**

Interim Dean

**Faculty of Science**

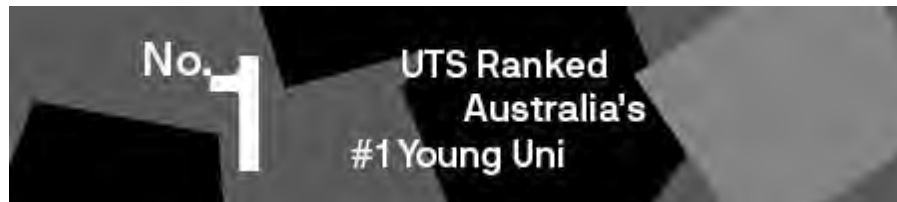
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** [Margaret Connolly](#)  
**To:** [Greg Welsh](#); [Dean of Science TCM](#)  
**Subject:** RE: TCM process  
**Date:** Monday, July 15, 2019 2:51:06 PM  
**Attachments:** [image001.png](#)

---

Hi Greg

Happy to chat. In short the proves below is right but there are two parts – accreditation and QA of the phase out (which is what the process below describes) and delivery (which the Provost can manage regardless of FB/AB by suspending intakes and effectively achieving the same end. FB/AB cannot determine that the course will be taught.

Regards

Margaret

---

**From:** Greg Welsh <[Greg.Welsh@uts.edu.au](mailto:Greg.Welsh@uts.edu.au)>  
**Sent:** Monday, 15 July 2019 2:40 PM  
**To:** Margaret Connolly <[Margaret.Connolly@uts.edu.au](mailto:Margaret.Connolly@uts.edu.au)>; Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>  
**Subject:** TCM process

Hi Margaret

It's possible that I misunderstood what you were telling me on Friday about the process for phasing out, after all I do have a small brain. I thought you were saying that once the provost had accepted the recommendation of Faculty management, then the decision was made, and that the various boards and committees thereafter were largely around how to implement the decision from an academic point of view. However the process outlined by Dianne in her letter of recommendation (see below) appears somewhat different, and suggests that the decision is not made until Academic Board meets (step 5). It may be that this is easily clarified by you, but if it's more complicated than my small brain can handle by email, perhaps you and I and Kate Higgs (CC'd) can catch up briefly to discuss?

Best wishes

Greg

If the Vice Chancellor supports this decision (in principal), we will need to delay formal announcements whilst we prepare a proposal for phasing out and discontinuation of the courses in accordance with the Award Course Approval Policy and Procedures.

We will simultaneously work with HR regarding staff support, Student Administration for student support, the media unit for internal and external communications, risk mitigation, and the legal unit. We will also progress discussions with WSU regarding potential student transfers.

When we are prepared for the decision to be shared with staff, the Faculty of Science Academic Program Officer will request that a proposal be set up in OCAP. We will simultaneously request that

a note be added in the UTS Handbook against the 2019 course entries to alert prospective students that the courses will not be offered in 2020. The academic approval steps for phasing out/discontinuation will be as follows:

1. Faculty Board of Science approves the phasing out and discontinuation, including transition arrangements for existing students.
2. The Courses Planning Committee reviews the Business Case for phasing out/discontinuation and makes a recommendation to the Provost.
3. The Provost approves the Business Case for phasing out/discontinuation.
4. The Courses Accreditation Committee reviews the Course Accreditation for phasing out/discontinuation and makes a recommendation to Academic Board.
5. Academic Board approves the Course Accreditation for phasing out/discontinuation.
6. The courses are set to “phasing out” in CASS so no commencing students can be enrolled in 2020. The courses do not appear in the 2020 UTS Handbook.
7. The Faculty and SAU manage the transition arrangements for existing/continuing students.
8. Once all existing students have completed/been transferred out of the courses, the courses are set to “discontinued” in CASS.

**Greg Welsh**

Head of External Communication

**Marketing and Communication Unit**

University of Technology Sydney

T. +61 (02) 9514 1608

M. +61 <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** [William Gladstone](#)  
**To:** [Alaina Ammit](#)  
**Cc:** [Lisa Merry](#); [Andrea Leigh](#)  
**Subject:** RE: TCM research  
**Date:** Thursday, December 6, 2018 9:17:59 AM  
**Attachments:** [image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)  
[image008.png](#)

---

Hi Alaina

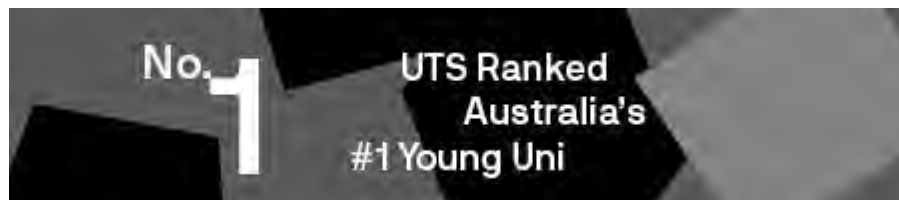
Thanks very much. Can the same be done for pubs please, and with the staff FTE added for both TCM and Faculty.

Thanks  
Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Alaina Ammit <Alaina.Ammit@uts.edu.au>  
**Sent:** Wednesday, 5 December 2018 5:19 PM

**To:** William Gladstone <William.Gladstone@uts.edu.au>  
**Cc:** Lisa Merry <Lisa.Merry@uts.edu.au>; Andrea Leigh <Andrea.Leigh@uts.edu.au>  
**Subject:** RE: TCM research

Dear Bill,

Here is the requested data on TCM research collated by Lisa. Apologies that it is late.

Alaina

---

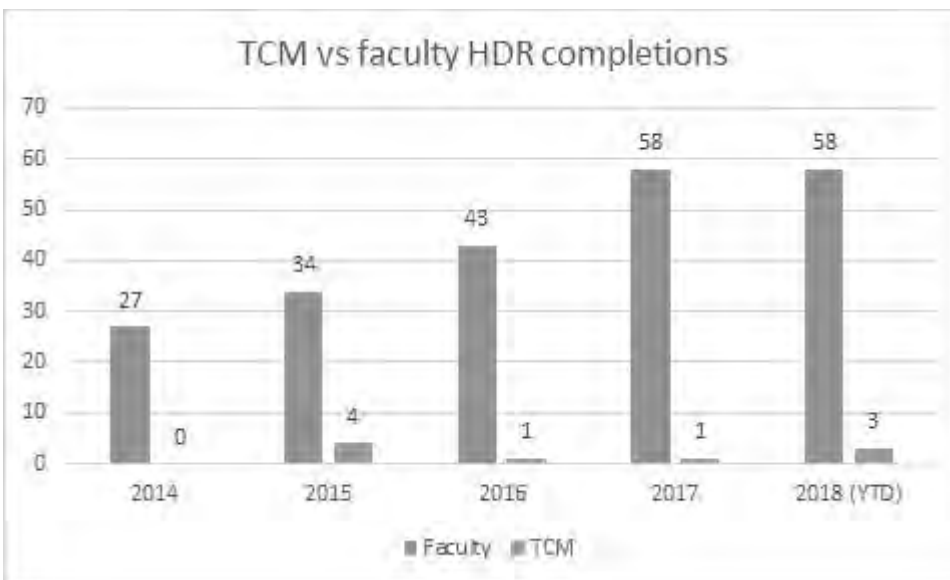
**From:** Lisa Merry <Lisa.Merry@uts.edu.au>  
**Sent:** Wednesday, 5 December 2018 5:14 PM  
**To:** Alaina Ammit <Alaina.Ammit@uts.edu.au>  
**Subject:** RE: TCM research

Hi Alaina,  
 Summary below, data in the attached.  
 I'm sorry this is late.  
 I added Deidre Cobbin, who passed away recently, but who did contribute.  
 regards  
 Lisa

Research Income:

	<b>TCM Income</b>	<b>Whole of Faculty income</b>	<b>TCM income as % of Whole of Faculty income</b>
<b>2014</b>	\$ 10,000	\$11,133,023	0.09%
<b>2015</b>	\$ 10,000	\$13,357,000	0.07%
<b>2016</b>	\$ 40,000	\$16,309,000	0.25%
<b>2017</b>	\$ 19,495	\$16,706,000	0.12%
<b>2018 (YTD)</b>	\$ 2,000	\$20,165,919	0.01%

HDR completions:




---

**From:** Alaina Ammit <[Alaina.Ammit@uts.edu.au](mailto:Alaina.Ammit@uts.edu.au)>  
**Sent:** Tuesday, 20 November 2018 12:59 PM  
**To:** Lisa Merry <[Lisa.Merry@uts.edu.au](mailto:Lisa.Merry@uts.edu.au)>  
**Subject:** Fwd: TCM research

Hello,

Further to that request this morning.

Confidential.

Ta!

Alaina

Begin forwarded message:

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Date:** 20 November 2018 at 12:37:59 pm AEDT  
**To:** Alaina Ammit <[Alaina.Ammit@uts.edu.au](mailto:Alaina.Ammit@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** TCM research

Hi Alaina

As we discussed this morning, I need some assistance from the research team to prepare the Chinese Medicine future options paper. In particular, I need to include background information/context on research performance (eg over last 5 years) on

publications, ERI and HDR completions. And, a comparison for the same metrics with the Faculty average. Can this be done by 27 November please.

I have attached the CM staff list provided to us by HR.

Thanks very much

Bill

**Professor William Gladstone GAICD**

Interim Dean

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)

**From:** [William Gladstone](#)  
**To:** [Christopher Zaslowski](#)  
**Subject:** RE: TCM research  
**Date:** Wednesday, February 27, 2019 4:31:32 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)

---

Thanks very much Chris

Cheers  
Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

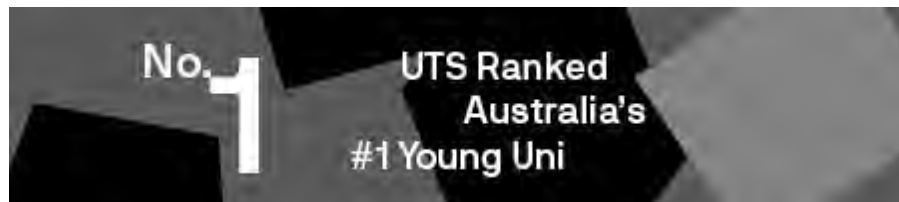
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Wednesday, 27 February 2019 4:21 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** RE: TCM research

Hi Bill

The gross income for the clinic in 2018 was \$224,673. This involved 4928 (acupuncture), 777 (herbal)

and 294 (Chinese tuina massage) consultations, a total of 5999 visits at the UTS clinic. In addition we delivered an additional 300 acupuncture treatments at the Concord Hospital (on Saturdays) as a community service (no fee charged) to cancer survivors as a community service. This would take the clinical consultations to 6,299 in total.

Cheers  
Chris

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Wednesday, 27 February 2019 3:31 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** RE: TCM research

Dear Chris

Can you please send me the final data for clinic visits in 2018 – I have the data you sent me in November, and I would like to use the end of year data.

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

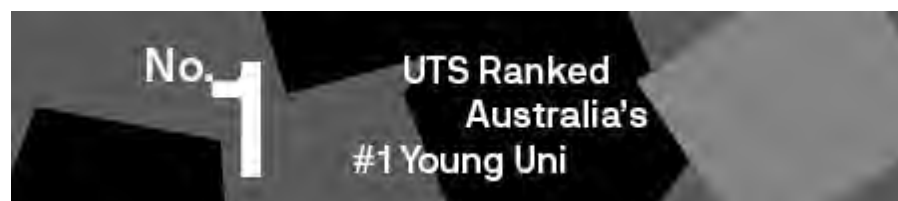
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Thursday, 21 February 2019 11:11 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Cc:** Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>  
**Subject:** RE: TCM research

Hi Bill

Here is a list of CM staff and associated HDR student projects. I haven't got Xianqin Qu projects (she is commencing a funded herbal medicine clinical trial) or all of Peter Meiers HDR students . I will try to send these in the next day or two.

Thanks Chris

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Wednesday, 20 February 2019 4:33 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** TCM research

Dear Chris

The TCM review paper will include a section on research. I have looked at the web page on TCM research:

<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/our-research>

However I'm not sure whether this is up to date. Do you have a summary of current TCM research projects that I can refer to?

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** [Christopher Zaslowski](#)  
**To:** [William Gladstone](#)  
**Cc:** [Sean Walsh](#)  
**Subject:** RE: TCM research  
**Date:** Wednesday, February 27, 2019 10:01:34 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[Response to Bill.docx](#)

---

Hi Bill

see the attached doc re the questions. I will send the three paragraphs re research before we meet on Friday.

Cheers

Chris

---

**From:** William Gladstone <William.Gladstone@uts.edu.au>  
**Sent:** Wednesday, 27 February 2019 5:32 PM  
**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Subject:** RE: TCM research

Hi Chris

Thanks for sending the information.

In order to do justice to the research being done by TCM staff and research students, can you please write a summary for me (eg up to 3 paragraphs) that I can include in the TCM review report. Thanks.

And, these are the other matters I wanted to check/discuss with you on Friday:

- what years do students learn in the TCM Clinic, and how does this learning change over the years of the course?
- do TCM students have opportunities for placements in private clinical practices (if so, when?)
- do TCM student have an opportunity for international placements? If so, how and when?
- what are the structures of TCM subjects i.e. lecture + clinic, or lecture + tutorial etc
- are any TCM subjects taught in Summer session?
- What does the external accreditation require in terms of teaching that impacts on/determines the structure of the course?

Thanks

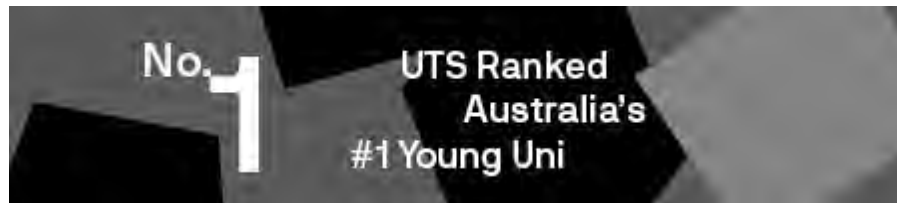
Bill

**Professor William Gladstone GAICD**



**Deputy Dean**  
**Faculty of Science**  
University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) s.2.1.3.  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Wednesday, 27 February 2019 5:03 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** RE: TCM research

Hi Bill

this is what Xianqin sent me regarding her research and publications.

Publications:

1. Chen H, Eileen M McGowan EM, Ren N, Lal S, Nassif N, Fatima Shad-Kaneez F, Qu X and Lin Y. Nattokinase: A Promising Alternative in Prevention and Treatment of Cardiovascular Diseases. Biomarker Insights. 2018, Volume 13: 1–8
2. Ong M, J Cheng, Lao M, Tan Y Jonson M, Qu X. Paeoniflorin extract reverses dexamethasone-induced testosterone over-secretion through downregulation of Cytochrome P450 17A1 expression in primary murine theca cells. Journal of ethnopharmacology. 2019, 229: 97-103
3. Tan Y, Kim J, Cheng J, Ong M, Lao W, Qu X. Green tea polyphenols ameliorate non-alcoholic fatty liver disease through upregulating AMPK activation in high fat fed Zucker fatty rats. World J Gastroenterol 2017; 23: 3805-3814
4. Lees T, Nassif N, Simpson A, Shad-Kaneez F, Martiniello-Wilks R, Lin Y, Jones A, Qu X, Lal S. Recent advances in molecular biomarkers for diabetes mellitus: a systematic review. Biomarkers 2017 Nov; 22:604-613. doi: 10.1080/1354750X.2017.1279216

5. Kamal M, Shakil S, Nawaz MS, Yu QS, Tweedie D, Tan T, Qu X, Greig NH. (2017) Inhibition of Butyrylcholinesterase with Fluorobenzylcymserine, an experimental Alzheimer's drug candidate: validation of enzoinformatics results by classical and innovative enzyme kinetic analyses. *CNS & Neurological Disorders - Drug Targets*. **2017**, Vol. 16, No. 3:1-8.
6. Teng B, Jie Peng J, Ong M, Qu X. Successful Pregnancy after Treatment with Chinese Herbal Medicine in a 43-Year-Old Woman with Diminished Ovarian Reserve and Multiple Uterus Fibrosis: A Case Report. *Medicines* 2017, *4*, 7 doi:10.3390/medicines4010007.
7. Ong M, Peng J, Jin X, Qu X. (2017) Targeting Insulin Resistance to Treat the Underlying Basis of Polycystic Ovary Syndrome with Chinese Herbal Medicine. *Am. J Chin. Med.* 2017, *45*: 405–422

External research funding income:

1. Collaborative research grant from Suzhou Red Cross Hospital, Jiangsu Province, China (\$15,000, 2016)
2. Collaborative research grant from Second Affiliated Hospital of Wenzhou Medical University (\$25,000, 2017-2018)
3. Department of Industry, Innovation and Science and Corncord Health Group for project “ Effects and Mechanisms of *Antrodia Cinnamonea* Extract for Non-alcoholic Fatty Liver Disease, POCS and Cancer” (\$80,000, 2018)
4. Collaborative research for clinical trial on Chinese herbal medicine for type 2 diabetes from Tasly Pharmaceuticals, China (\$425,000, 2018-2020)
5. Phase II for Department of Industry, Innovation and Science and Corncord Health Group for project (\$100,000, 2019)

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Sent:** Wednesday, 27 February 2019 4:55 PM

**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

**Subject:** RE: TCM research

Hi Chris

Can you send me the additional information please

Thanks

Bill


**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

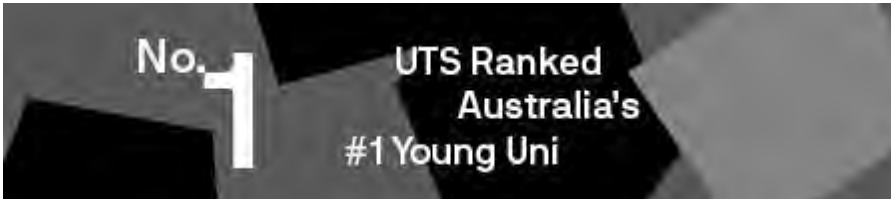
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> 

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Sent:** Thursday, 21 February 2019 11:11 PM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Cc:** Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>  
**Subject:** RE: TCM research

Hi Bill

Here is a list of CM staff and associated HDR student projects. I haven't got Xianqin Qu projects (she is commencing a funded herbal medicine clinical trial) or all of Peter Meiers HDR students. I will try to send these in the next day or two.

Thanks Chris

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Wednesday, 20 February 2019 4:33 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Cc:** Andrea Leigh <[Andrea.Leigh@uts.edu.au](mailto:Andrea.Leigh@uts.edu.au)>  
**Subject:** TCM research

Dear Chris

The TCM review paper will include a section on research. I have looked at the web page on TCM research:

<https://www.uts.edu.au/about/faculty-science/chinese-medicine-clinic/our-research>

However I'm not sure whether this is up to date. Do you have a summary of current TCM research projects that I can refer to?

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

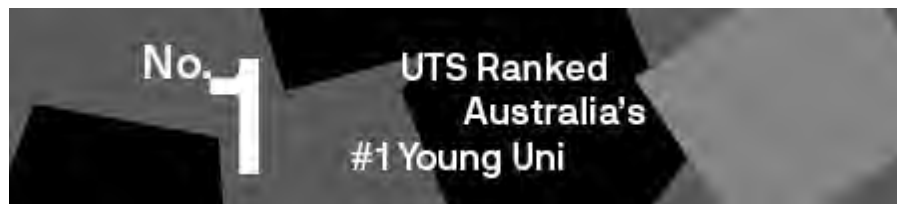
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** [Dianne Jolley](#)  
**To:** [William Gladstone](#); [Dean of Science TCM](#)  
**Cc:** [Willa Huston](#)  
**Subject:** Re: TCM review update - from R-1.3.  
**Date:** Wednesday, July 24, 2019 10:11:49 AM  
**Attachments:** [image008.png](#)  
[image009.png](#)  
[image010.png](#)  
[image011.png](#)  
[image012.png](#)  
[image013.png](#)  
[image014.png](#)  
[image015.png](#)  
[image016.png](#)  
[image017.png](#)  
[image018.png](#)  
[image019.png](#)

---

Hello Bill,

Yes, please do. I'd appreciate that. Can you please copy me in so I am across it in case it comes up again on Friday?

Di

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology Sydney NSW Australia

\* Sent from my phone

---

**From:** William Gladstone <William.Gladstone@uts.edu.au>  
**Sent:** Wednesday, July 24, 2019 8:13:08 AM  
**To:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>; Dianne Jolley <Dianne.Jolley@uts.edu.au>  
**Cc:** Willa Huston <Wilhelmina.Huston@uts.edu.au>  
**Subject:** RE: TCM review update - from R-1.3.

Hi Dianne

R-1.3. asked me the question about TCM finances before I went on leave but I did not have time to reply. Would you like me to draft a reply?

And, I can also reply to his question about the publication count?

Thanks

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

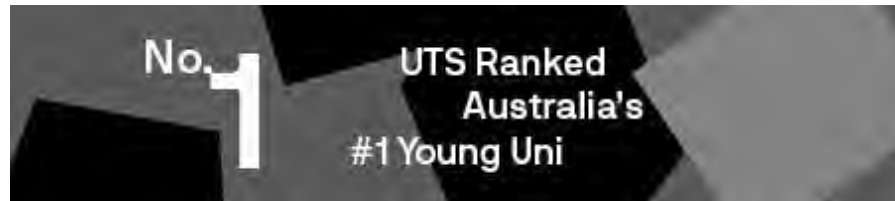
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s2.13.</sup>

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Dean of Science TCM <dean.of.science.TCM@uts.edu.au>

**Sent:** Tuesday, 23 July 2019 9:04 PM

**To:** Dianne Jolley <Dianne.Jolley@uts.edu.au>

**Cc:** William Gladstone <William.Gladstone@uts.edu.au>; Willa Huston <Wilhelmina.Huston@uts.edu.au>

**Subject:** FW: TCM review update - from <sup>IR-1.3.</sup>

Hi Dianne,

I expect you would want to see <sup>IR-1.3.</sup> email.

I am unsure if anyone can answer the financial question until Bill returns (imminently). Willa were you involved in this part of the report?

Kind rgds,  
Kate

---

**From:** R-1.3. [REDACTED]  
**Sent:** Tuesday, 23 July 2019 8:52 PM  
**To:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>; IR-1.3. [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>  
**Subject:** RE: TCM review update

Dear Dianne

Thank you for the update and clarification of several points despite it being disappointing and devastating news for the Chinese medicine staff and students. There are still two issues that from our perspective need clarification. The first is financial viability. The report that was supplied to the senior management group , Provost and the Faculty Board meeting, details that the indirect costs of the course (University and Faculty) were in the vicinity of s.2.1.5. [REDACTED]  
[REDACTED] In the feedback to the first report I had asked for this information to be included in the final report however this was not included with no reason given (see below).

s.2.1.5. [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

The inclusion of this paragraph would have made very clear that the financial model for the course was unsustainable given that the remaining monies would not be enough to cover one academic wage at level C. Through our diligence and hard work in the clinic, the income monies would increase the amount available but not to the extent that it would be viable to cover more than 3 academic staff across the four year program.

The question that has yet to be answered from our perspective is, “Do other Science programs have such a large amount of indirect costs coming from the EFTSU to the extent that over 95% of the EFTSU is used for indirect costs exist and to what extent? “

The second issue relates to research publications. I supplied a list of publication for the report and while the 2017 publications were acknowledged, the publications for 2018 (n= 20) were not updated and included in the report (see below). I do not believe that the case can be made for poor research outputs and the additional 2018 publications should have been included in the report to give an accurate and reasonable picture of CM staff research.

Weighted pub points	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	3.29	227.66	230.95	1.4%	3.0%
<b>2015</b>	0.70	238.35	239.05	0.3%	2.9%
<b>2016</b>	3.04	273.41	276.45	1.1%	2.3%
<b>2017</b>	5.27	249.86	255.13	2.1%	4.9%

Total publications	CM	FoS	Total	CM % total	CM staff % FoS staff
<b>2014</b>	9	490	499	1.8%	3.0%
<b>2015</b>	4	528	532	0.8%	2.9%
<b>2016</b>	19	616	635	3.0%	2.3%
<b>2017</b>	34	566	600	5.7%	4.9%

As to strategic fit at the University level, Complementary medicine was recently given an ERA rating of 4. While the majority of the publications came from the ARCCIM in the Faculty of Health, the CM teaching group did contribute to the result.

I would also reiterate that I believe the Faculty needs to inform the Chinese Medicine Accreditation Committee of the current status of the course as required under the CM accreditation guidelines. This would include proposed changes and student transfers. I have not yet replied to the email from the Chair of the committee because the responsibility to inform the committee should be with the faculty.

I also acknowledge the hard work and dedication of all the CM staff member who have consistently worked beyond their required responsibilities to realise what I believe are remarkable achievements in the clinic, research and teaching. I do not believe the outcome and the reports reflect their commitment and contribution to the wider society and Australian public that the course, graduates and the teaching clinic have made over the period.



Finally it was noted in your email that the last year of the phase out teaching would be 2021. This does not align with the current four year program progression whereby the current 1<sup>st</sup> year cohort would complete the course by the end of 2022.

Regards

IR-1.3.

---

**From:** Dean of Science TCM <[dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au)>

**Sent:** Tuesday, 23 July 2019 3:30 PM

**To:** Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>; Bouavirone Choy <[Bobbie.Choy@uts.edu.au](mailto:Bobbie.Choy@uts.edu.au)>; Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>; Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>; Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>

**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Raelene La Ferla <[Raelene.LaFerla@uts.edu.au](mailto:Raelene.LaFerla@uts.edu.au)>

**Subject:** TCM review update

Dear colleagues

To help staff, students and interested community members better understand the review of Traditional Chinese Medicine at UTS and the process of phase out/discontinuation that is being considered, the Faculty has published an [online summary](#) and some [Frequently Asked Questions](#), which it will update as more information becomes available.

I am also sharing with you a message I am sending to TCM students today (see below).

I would like to meet with all Chinese Medicine staff late next week to discuss the process, let you know of the support that is available to you, and answer any questions you have. You will receive a calendar invite in the next day or so once a suitable time can be found.

This is all the information I have to share with you at this time – as always, you are welcome to contact [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) if you have any enquiries in the future.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

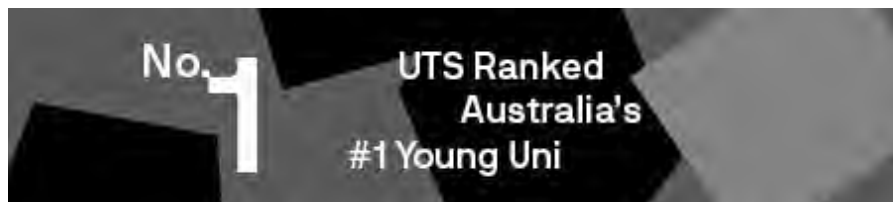
Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)



\*\*\*\* Student message – to be sent 23 July \*\*\*\*

From: Dianne Jolley, Dean of Science

To: TCM students

Subject: TCM review update

Dear students

First, I apologise for the length of this email but it is necessary if I am to respond appropriately to the emails I have received over recent weeks.

I do appreciate that the uncertainty created by the absence of concrete information in relation to the future of Traditional Chinese Medicine (TCM) at UTS is a cause of frustration and anxiety for TCM students, staff and community more broadly. While there are certain details I cannot share – either because it would be improper to do so, or simply because they are unknown at this time

– I am able to explain the process currently underway as has been requested.

The decision as to whether the University accepts students into a particular program, and therefore whether that program is amongst the University's offering from year to year, is made by the UTS Provost on the recommendation of the Faculty.

In this particular case, following a review the Faculty of Science through its management group put forward a recommendation to the Provost that – despite its many strengths – the continuation of the TCM course is neither financially viable nor in the strategic direction of the Faculty.

The Provost accepted this recommendation, that the program accordingly be discontinued/phased out, subject only to any further advice arising from the discussion of the matter at Faculty Board, which the Provost will take into account in making his final decision. Faculty Board will also advise the Provost on how it intends to implement the discontinuation/phase out, including how it will ensure current TCM students have the opportunity to complete their studies.

It will be recommended to Faculty Board that teaching ceases for TCM programs at the end of 2021. Many students are on a path to complete by or before teaching ceases. For students who are not on a path to complete their TCM program by end-2021, we will make at least two course options available along with the opportunity to consult with a study plan expert (on a one-on-one basis) to discuss which of the available options will deliver the best outcome for them.

The first option we can make at this time is the offer of an internal course transfer to a new Health Sciences major within the existing UTS Bachelor of Science. This new major will be specifically designed to provide an opportunity to complete a UTS degree that provides a direct pathway into the final year of an accredited Chinese Medicine program at an alternative institution (i.e. a second degree).

The second option, available from the beginning of 2020, is a transfer to an existing Chinese Medicine program at another institution. Details such as credit recognition are currently being negotiated with an alternative provider to ensure the smoothest possible transition for all UTS students who are unable to complete their TCM degree before end-2021.

Following the Provost's decision to not accept any future student enrolments into the program, the University has a subsequent process to follow in relation to the academic arrangements.

Academic Board, on the recommendation of Faculty Board, approves any changes to a course necessary to ensure the best interests of students in the course during the phase out period, and also removes the accreditation of the course at the end of the phase out process.

Courses are phased out and discontinued across the University each year for a range of reasons (e.g. strategic, commercial, currency, etc.). The discontinuation of academic accreditation is described in UTS Student Rule 3.6.1. More broadly, [UTS Student Rule 3.6 \('Changes to courses'\)](#) provides some information about the process we are currently following. I draw your attention to rules 3.6.4 and 3.6.5 in particular, as these rules explain our obligations to students when we revise, phase out and discontinue courses.

When I wrote to you in early June, I committed to “continue to update you, and other key stakeholders, once we can about the options being considered and what they could potentially mean for you.” It was then, as it remains now, my intention to update you following this week’s Faculty Board meeting.

As the future of Traditional Chinese Medicine at UTS becomes more certain, I will be able to answer more of your questions. However, we have uploaded a summary of the [situation to date](#) and some [Frequently Asked Questions](#).

Finally, I am conscious that Spring session commences this week and in the absence of concrete information you might be inclined to review your Spring subject enrolment. The best advice I can give in the absence of certainty is to follow the course program detailed in the [Handbook](#) as closely as possible. If you were offered (and accepted) a place in your course on a full-time basis you should make every effort to undertake a full-time study load (four 6cp subjects). Please note that the last day to enrol in Spring subjects is Monday, 5 August.

This is all the information I have to share with you at this time – as always, you are welcome to contact [dean.of.science.TCM@uts.edu.au](mailto:dean.of.science.TCM@uts.edu.au) if you have any enquiries in the future.

Kind regards.

Dianne Jolley

**Professor Dianne Jolley**

Dean

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)

**From:** [Margaret Connolly](#)  
**To:** [Kate Higgs](#)  
**Cc:** [Sam Sandford](#)  
**Subject:** RE: TCM Review/Approval - planning the Provost's availability  
**Date:** Friday, July 12, 2019 2:29:13 PM

---

Hi Kate

Andrew leaving for Newcastle straight after CPC on 6 August and will be there interviewing all day 7 August. He will be in the office on 8 August and could review the papers around midday. Would that work?

Regards

Margaret

---

**From:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 1:00 PM  
**To:** Margaret Connolly <[Margaret.Connolly@uts.edu.au](mailto:Margaret.Connolly@uts.edu.au)>  
**Subject:** TCM Review/Approval - planning the Provost's availability

Hi Margaret,

This email is with regard to the TCM project. My understanding is that Andrew has asked that the standard UTS policy is followed avoiding using the (also permitted) use of flying minutes or executive action where at all possible.

I am hoping you can confirm/reserve Andrew's availability on 7/8 to provide his formal approval – see step (2) below.

Assuming the proposal is approved at the various committees, the schedule squeezing the Provost's approval is;

- (1) The Courses Planning Committee (**6/8**) will make a recommendation to the Provost
- (2) The Provost approves the Business Case and recommends it to the Courses Accreditation Committee (**15/8**)
- (3) The documents for the Courses Accreditation Committee needs to be circulated to members on **8/8**.

We aim to meet all committee cut-offs, so that we are able to communicate a decision to staff and students prior to the opening of student re-enrolments (for 2020) which happens in mid-October.

Thank you for your help,

Kate

s.2.1.3.

---

**From:** Anne-Lise Daniel <[Anne-Lise.Daniel@uts.edu.au](mailto:Anne-Lise.Daniel@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 8:28 AM  
**To:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Cc:** Doreen Borg <[Doreen.Borg@uts.edu.au](mailto:Doreen.Borg@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; Helpdesk CPC <[helpdeskCPC@uts.edu.au](mailto:helpdeskCPC@uts.edu.au)>; Jacqui Wise <[Jacqui.Wise@uts.edu.au](mailto:Jacqui.Wise@uts.edu.au)>  
**Subject:** RE: Courses Planning Committee (6/8) - latest date to circulate paperwork

Hi Kate,

Papers are to be circulated on 30 July. Submission in OCAP is expected by 22 July. However, we can

exceptionally accept submission up until 29<sup>th</sup> July (we can manage one or two late submissions).

Regards,  
Anne-Lise

---

**From:** Jacqui Wise <[Jacqui.Wise@uts.edu.au](mailto:Jacqui.Wise@uts.edu.au)>  
**Sent:** Thursday, 11 July 2019 7:08 AM  
**To:** Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)>  
**Cc:** Doreen Borg <[Doreen.Borg@uts.edu.au](mailto:Doreen.Borg@uts.edu.au)>; Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>; Anne-Lise Daniel <[Anne-Lise.Daniel@uts.edu.au](mailto:Anne-Lise.Daniel@uts.edu.au)>; Helpdesk CPC <[helpdeskCPC@uts.edu.au](mailto:helpdeskCPC@uts.edu.au)>  
**Subject:** Re: Courses Planning Committee (6/8) - latest date to circulate paperwork

Hey Kate

I am indeed on CPC (though not CAC). However, I'm not the best person to answer your questions. I've copied Anne-Lise Daniel from APO and the CPCHelpdesk - either can assist.

Regards

Jacqui

Jacqui Wise  
Director, Student Administration Unit  
University of Technology, Sydney  
PO Box 123  
Broadway NSW 2007  
[jacqui.wise@uts.edu.au](mailto:jacqui.wise@uts.edu.au)  
T | +61 2 9514 1208  
M | s.2.1.3.  
Visit <http://www.uts.edu.au>

On 10 Jul 2019, at 8:00 pm, Kate Higgs <[Kate.Higgs@uts.edu.au](mailto:Kate.Higgs@uts.edu.au)> wrote:

Hi Jacqui,

I think you are on the Courses Planning Committee & Courses Accreditation Committee, so I thought you might be an ideal reality check... I was told that papers for the Courses Planning Committee are due 2 weeks prior – and I'm assuming circulated a week prior(?). As a member of the committee, do you always receive the paperwork 1 week in advance? Is there a precedent/process to manage documents circulated with less lead time?

I am asking because we are unlikely to have information entered into OCAP until 29/7 (best case), for TCM be considered at the CPC on 6/8.

Willa &/or Bill are needed to verify/submit information into OLAP, and they are away until 22-24/7. I could perhaps try to extract the right information from existing documents, but we need an informed academic to submit the information. In addition, at the moment we are working towards scheduling a special Science Faculty Board for ~29/7.

As you know, we have told students we aim to have a decision to them before mid-October, so it would be a significant issue to miss the targeted committees.

Thank you for any insight you can provide.

Kate

Kate Higgs

s.2.1.3.

Faculty of Science

University of Technology Sydney

15 Broadway, ULTIMO NSW 2007

W: [uts.edu.au](http://uts.edu.au)

<image001.png> <image002.png> <image003.png> <image004.png> <image005.png> <image006.png>

<image007.png>

**From:** [William Gladstone](#)  
**To:** [Christopher Zaslowski](#)  
**Subject:** RE: TCM status report  
**Date:** Thursday, March 7, 2019 9:05:09 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)

---

Hi Chris

Thanks for letting me know. Can you please send me the comments/changes you have compiled on the 15<sup>th</sup> March and we can discuss then whether an extension is needed to accommodate the staff's teaching commitments at this time of year.

Thanks  
Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

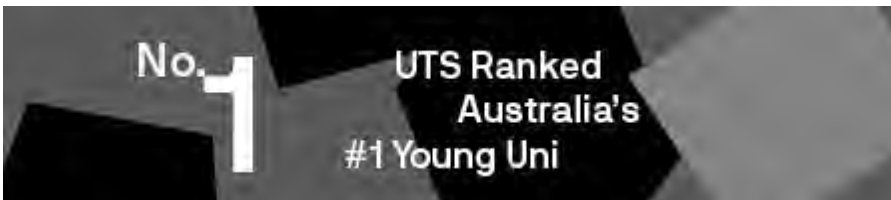
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Wednesday, 6 March 2019 4:56 PM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>



**Subject:** RE: TCM status report

Thanks Bill. I will distribute to the CM staff. Given the time of year (commencement of teaching) I feel the consultation time is tight.

Cheers

Chris

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>

**Sent:** Wednesday, 6 March 2019 4:41 PM

**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>

**Subject:** TCM status report

Dear Chris

Please find attached the draft TCM status report. I have compiled a summary of the current status for staff, students, teaching and learning, research, external engagement etc. The aim of the report is to inform the thinking and decisions about the future options for TCM in the Faculty of Science. I have therefore omitted any interpretation of the information and presentation of options, and have focused on presenting the information available to me.

Would you please distribute it to the Chinese Medicine Discipline Group and invite their comments, feedback, corrections, or suggestions for additional information that should be included? In preparing the status report I have relied on information that has been provided to me, and I would therefore greatly appreciate you and the Discipline Group checking it.

Can I please ask that you compile all the feedback from the Discipline Group, and send it to me by Friday 15 March? I aim to send the revised status report to the Provost by 22 March.

Please let me know if you, or any colleagues in the Discipline Group, have any questions and I will attempt to answer them as soon as possible.

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

**From:** [William Gladstone](#)  
**To:** [Dianne Jolley](#); [Andrea Leigh](#)  
**Subject:** FW: TCM status report  
**Date:** Thursday, March 7, 2019 9:09:33 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[TCM status report Draft 2019-03-06.docx](#)

---

Hi Di and Andy

Here is the draft TCM status report I sent to Chris yesterday, and the email to Chris seeking the TCM group's feedback.

You will see the report is a compilation of the available information on TCM. I have not included a discussion/overview because (i) I did not want to bias/influence staff's feedback on the draft report, (ii) there may be some errors/omissions in it that will be pointed out by staff, and (iii) I will include it in the report to be sent to Andrew on 22<sup>nd</sup> March.

Thanks  
Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

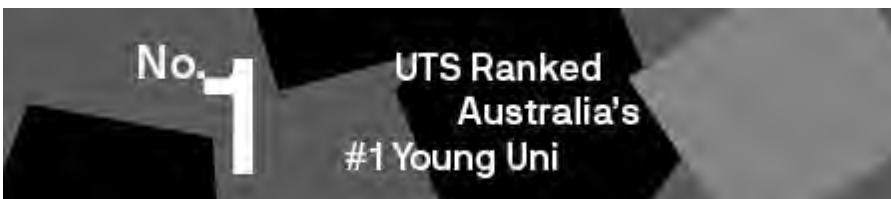
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** William Gladstone  
**Sent:** Wednesday, 6 March 2019 4:41 PM  
**To:** Christopher Zaslowski (Chris.Zaslowski@uts.edu.au) <Chris.Zaslowski@uts.edu.au>  
**Subject:** TCM status report

Dear Chris

Please find attached the draft TCM status report. I have compiled a summary of the current status for staff, students, teaching and learning, research, external engagement etc. The aim of the report is to inform the thinking and decisions about the future options for TCM in the Faculty of Science. I have therefore omitted any interpretation of the information and presentation of options, and have focused on presenting the information available to me.

Would you please distribute it to the Chinese Medicine Discipline Group and invite their comments, feedback, corrections, or suggestions for additional information that should be included? In preparing the status report I have relied on information that has been provided to me, and I would therefore greatly appreciate you and the Discipline Group checking it.

Can I please ask that you compile all the feedback from the Discipline Group, and send it to me by Friday 15 March? I aim to send the revised status report to the Provost by 22 March.

Please let me know if you, or any colleagues in the Discipline Group, have any questions and I will attempt to answer them as soon as possible.

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** IR-1.3.  
**To:** [REDACTED]  
**Subject:** Re: TCM status report  
**Date:** Thursday, March 7, 2019 6:55:00 PM  
**Attachments:** [image021.png](#)  
[image022.png](#)  
[image023.png](#)  
[image024.png](#)  
[image025.png](#)  
[image026.png](#)  
[image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image027.png](#)

---

I agree with IR-1.3. and there seems to be some missing income from the clinic? The clinic is presented as an expense only?

Will re-read this.

IR-1.3.

---

**From:** IR-1.3.  
**Sent:** Wednesday, 6 March 2019 5:14 PM  
**To:** IR-1.3.  
**Subject:** RE: TCM status report

Thank you, Chris.

Agree – there are omissions – and what has not been captured are the disruption from redundancies in recent years with staff not being replaced. It is interesting that the analysis against the four options (realistically two in my opinion) were not discussed.

I am away for a few days – talk next week.

Best wishes,

IR-1.3.





**From:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Sent:** Wednesday, 6 March 2019 4:59 PM  
**To:** Carolyn Michaeil <Carolyn.Michaeil@uts.edu.au>; Sean Walsh <Sean.Walsh@uts.edu.au>; Weihong Li <Weihong.Li-1@uts.edu.au>; Mary Garvey <Mary.Garvey@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Nancy Morgan <Nancy.Morgan@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Huiling Yao <Huiling.Yao@uts.edu.au>  
**Subject:** FW: TCM status report

Dear all

We have the report. Already I have noticed there are some omissions. Please read over the next few days and add comments using track changes. I will call a meeting sometime early next week to progress.

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Wednesday, 6 March 2019 4:41 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Subject:** TCM status report

Dear Chris

Please find attached the draft TCM status report. I have compiled a summary of the current status for staff, students, teaching and learning, research, external engagement etc. The aim of the report is to inform the thinking and decisions about the future options for TCM in the Faculty of Science. I have therefore omitted any interpretation of the information and presentation of options, and have focused on presenting the information available to me.

Would you please distribute it to the Chinese Medicine Discipline Group and invite their comments, feedback, corrections, or suggestions for additional information that should be included? In preparing the status report I have relied on information that has been provided to me, and I would therefore greatly appreciate you and the Discipline Group checking it.

Can I please ask that you compile all the feedback from the Discipline Group, and send it to me by Friday 15 March? I aim to send the revised status report to the Provost by 22 March.

Please let me know if you, or any colleagues in the Discipline Group, have any questions and I will attempt to answer them as soon as possible.

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

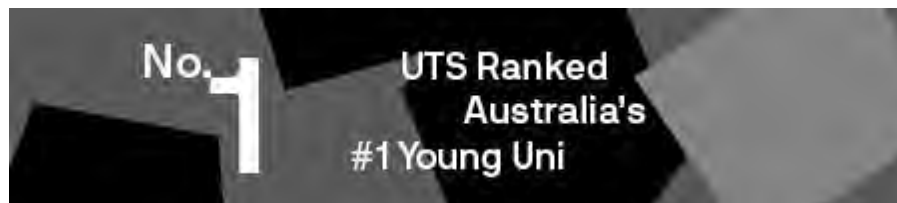
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



**From:** [Xianqin Qu](#)  
**To:** [Christopher Zaslawski](#)  
**Subject:** RE: TCM status report  
**Date:** Friday, March 8, 2019 12:06:44 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
s.2.1.5.

---

Hi, Chris,

I have meeting with s.2.1.9 (out of scope)

[REDACTED]. I will try to attend your meeting as much as I can.

Regarding the report, I would like to clarify on Table 7 of Page 15, external research income, whether these figure included my external research income? If so, 2018 figure is incorrect. I gained \$79,999 in 2018 (s.2.1.5.) and a clinical trial project \$425,000 (s.2.1.5.) and \$10,000 has been paid to UTS (s.2.1.5.).

Regards  
Xianqin,

---

**From:** Christopher Zaslawski <[Chris.Zaslawski@uts.edu.au](mailto:Chris.Zaslawski@uts.edu.au)>  
**Sent:** Wednesday, 6 March 2019 4:59 PM  
**To:** Carolyn Michaeil <[Carolyn.Michaeil@uts.edu.au](mailto:Carolyn.Michaeil@uts.edu.au)>; Sean Walsh <[Sean.Walsh@uts.edu.au](mailto:Sean.Walsh@uts.edu.au)>; Weihong Li <[Weihong.Li-1@uts.edu.au](mailto:Weihong.Li-1@uts.edu.au)>; Mary Garvey <[Mary.Garvey@uts.edu.au](mailto:Mary.Garvey@uts.edu.au)>; Shuai Zheng <[Shuai.Zheng@uts.edu.au](mailto:Shuai.Zheng@uts.edu.au)>; Dale Elsdon <[Dale.Elsdon@uts.edu.au](mailto:Dale.Elsdon@uts.edu.au)>; Xianqin Qu <[Xianqin.Qu@uts.edu.au](mailto:Xianqin.Qu@uts.edu.au)>; Nancy Morgan <[Nancy.Morgan@uts.edu.au](mailto:Nancy.Morgan@uts.edu.au)>; Chunlin Zhou <[Chunlin.Zhou@uts.edu.au](mailto:Chunlin.Zhou@uts.edu.au)>; Huiling Yao <[Huiling.Yao@uts.edu.au](mailto:Huiling.Yao@uts.edu.au)>  
**Subject:** FW: TCM status report

Dear all

We have the report. Already I have noticed there are some omissions. Please read over the next few days and add comments using track changes. I will call a meeting sometime early next week to progress.

---

**From:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Sent:** Wednesday, 6 March 2019 4:41 PM  
**To:** Christopher Zaslawski <[Chris.Zaslawski@uts.edu.au](mailto:Chris.Zaslawski@uts.edu.au)>  
**Subject:** TCM status report

Dear Chris

Please find attached the draft TCM status report. I have compiled a summary of the current status for staff, students, teaching and learning, research, external engagement etc. The aim of the report is to inform the thinking and decisions about the future options for TCM in the Faculty of Science. I have therefore omitted any interpretation of the information and presentation of options, and have focused on presenting the information available to me.

Would you please distribute it to the Chinese Medicine Discipline Group and invite their comments, feedback, corrections, or suggestions for additional information that should be included? In preparing the status report I have relied on information that has been provided to me, and I would therefore greatly appreciate you and the Discipline Group checking it.

Can I please ask that you compile all the feedback from the Discipline Group, and send it to me by Friday 15 March? I aim to send the revised status report to the Provost by 22 March.

Please let me know if you, or any colleagues in the Discipline Group, have any questions and I will attempt to answer them as soon as possible.

Thanks very much

Bill

**Professor William Gladstone GAICD**

**Deputy Dean**

**Faculty of Science**

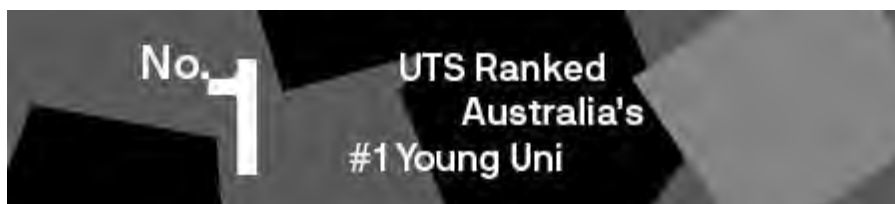
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) s.2.1.3.

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)





**From:** IR-1.3.  
**To:** [Dianne Jolley](#)  
**Cc:** [William Gladstone](#); IR-1.3.; [Peter Meier](#)  
**Subject:** RE: TCM Status Report Update  
**Date:** Tuesday, May 14, 2019 7:51:45 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

---

Thanks for your speedy response Dianne, it is appreciated.

The notification of closure of 2020 course intake will initiate a fresh round of rumours within the profession which will require time consuming responses (email and verbal) from the CM staff. It was a complete surprise to me that this has occurred as I had no notification that this decision had been made and the UAC course closure process initiated. My understanding was that no changes would be made until a final decision is made.

My preference is that we contain any course reputation damage by limiting discussion to only those in a continuing position employment and on a one year contract until a final decision is made. It may also require notification to AHPRA (accreditation committee of the Chinese Medicine Board of Australia) as it impacts on the course viability.

The impact of this course closure decision will be very distressing for the CM staff as many will read this as that a decision has already been made. If a decision is made to retain the CM course then the closure of 2020 course intake will impact greatly on enrolment for next year.

The following people need to be removed from the email listing:

- IR-1.2. (no longer works at UTS as a casual)
- Shail Lal (not a CM person, IR-1.2. )
- Taryn Chalmers (also a Sara Lal casual research assistant)
- Karen Bilton (does one lecture a year as a guest lecturer)
- Bouavirone Choy (does one lecture a year as a guest lecturer)
- IR-1.2. (no longer working at UTS).

Consideration should also be given to removing

- Emma King (casual demonstrator)
- Victoria Choi (casual demonstrator).

Thanks you for your consideration on this issue and I will get back to you shortly with a more detailed response to the situation.

Thanks Chris

---

**From:** Dianne Jolley <[Dianne.Jolley@uts.edu.au](mailto:Dianne.Jolley@uts.edu.au)>

**Sent:** Tuesday, 14 May 2019 7:09 AM  
**To:** IR-1.3.  
**Cc:** William Gladstone <William.Gladstone@uts.edu.au>  
**Subject:** Re: TCM Status Report Update

Good morning IR-1.3.

Thanks for your email.

I used the full list of staff associated with TCM, both full time and casual. I don't understand why you anticipate that this will be a problem. I'll wait for your full response.

Best wishes  
Dianne

-----  
Professor Dianne Jolley  
Dean, Faculty of Science  
University of Technology, Sydney NSW Australia

\* Sent from my phone

---

**From:** IR-1.3.  
**Sent:** Monday, May 13, 2019 10:30:30 PM  
**To:** Dianne Jolley  
**Subject:** Re: TCM Status Report Update

Dear Dianne

I note your email however query why it has been sent to people outside the direct UTS staff such as occasional casual guest lecturers? This will surely make future discussions difficult. I will respond shortly with a more detailed response.

Regards IR-1.3.

Sent from my Samsung Galaxy smartphone.

----- Original message -----

From: Dianne Jolley <Dianne.Jolley@uts.edu.au>  
Date: 13/05/2019 18:37 (GMT+10:00)  
To: Peter Meier <Peter.Meier@uts.edu.au>, Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>, Carolyn Michael <Carolyn.Michael@uts.edu.au>, Huiling Yao <Huiling.Yao@uts.edu.au>, Weihong Li <Weihong.Li-1@uts.edu.au>, Dale Elsdon <Dale.Elsdon@uts.edu.au>, Shuai Zheng <Shuai.Zheng@uts.edu.au>, Mary Garvey <Mary.Garvey@uts.edu.au>, Chunlin Zhou <Chunlin.Zhou@uts.edu.au>, Nancy Morgan <Nancy.Morgan@uts.edu.au>, Sean Walsh <Sean.Walsh@uts.edu.au>, Xianqin Qu <Xianqin.Qu@uts.edu.au>, IR-1.2., Victoria Choi <Victoria.Choi@uts.edu.au>, Karen Bilton <Karen.Bilton@uts.edu.au>, IR-1.2.

[REDACTED], Heiji Cho <[Heiji.Cho-1@uts.edu.au](mailto:Heiji.Cho-1@uts.edu.au)>, Emma King <[Emma.King@uts.edu.au](mailto:Emma.King@uts.edu.au)>, Shail Lal <[Shailendra.Lal@uts.edu.au](mailto:Shailendra.Lal@uts.edu.au)>, Taryn Chalmers <[Taryn.Chalmers@uts.edu.au](mailto:Taryn.Chalmers@uts.edu.au)>  
Cc: William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>, Stella Valenzuela <[Stella.Valenzuela@uts.edu.au](mailto:Stella.Valenzuela@uts.edu.au)>  
Subject: TCM Status Report Update

Dear colleagues,

I am writing to update you on the progress of the TCM status report that was circulated for your comment, and subsequently submitted for executive consideration in April 2019. I appreciate that a month has passed, however, the response to the report is still under discussion, so I am not able to provide you with any further information.

Whilst discussions are still in progress the University has decided not to market the TCM programs in the UAC guide.

I acknowledge your concerns and will provide an update as these discussions progress.

Best regards,

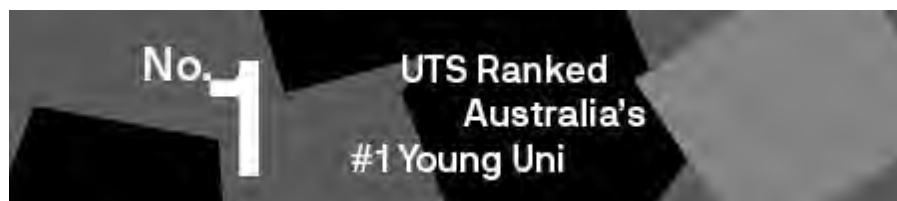
Dianne

**Professor Dianne Jolley**

Dean

**Faculty of Science**

University of Technology Sydney  
Building 7, Level 7, 15 Broadway, ULTIMO NSW 2007  
Tel: +61 (02) 9514 5412  
E: [dianne.jolley@uts.edu.au](mailto:dianne.jolley@uts.edu.au)  
W. [uts.edu.au](http://uts.edu.au)



**From:** Peter Meier <Peter.Meier@uts.edu.au>  
**Sent:** Friday, 30 November 2018 6:29 PM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>; Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Subject:** RE: Traditional Chinese Medicine

That regrettable regarding international students as we get a reasonable number of these applicants.

Peter

-----  
Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science

---

**From:** William Gladstone  
**Sent:** Friday, 30 November 2018 5:11 PM  
**To:** Peter Meier <Peter.Meier@uts.edu.au>; Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Subject:** FW: Traditional Chinese Medicine

Dear Peter

Please see the instructions from the Provost re offers to international students and other students.

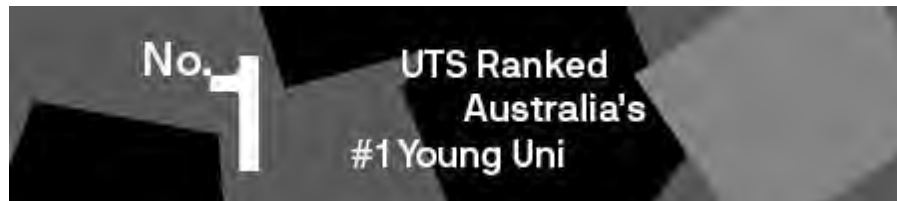
Thanks  
Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**

University of Technology Sydney  
T. +61 (02) 9514 8272  
M. +61 (0) s.2.1.3.  
PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Margaret Connolly

**Sent:** Thursday, 29 November 2018 4:54 PM

**To:** Nikki Ekanayake <[Nalinika.Ekanayke@uts.edu.au](mailto:Nalinika.Ekanayke@uts.edu.au)>; Neelam Shukla <[Neelam.Shukla@uts.edu.au](mailto:Neelam.Shukla@uts.edu.au)>; alex.murphy@insearch.edu.au; 'Belinda.Howell@insearch.edu.au' <[Belinda.Howell@insearch.edu.au](mailto:Belinda.Howell@insearch.edu.au)>; Timothy Laurence <[Timothy.Laurence@uts.edu.au](mailto:Timothy.Laurence@uts.edu.au)>

**Cc:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>; Iain Watt <[Iain.Watt@uts.edu.au](mailto:Iain.Watt@uts.edu.au)>; Andrew Parfitt <[Andrew.Parfitt@uts.edu.au](mailto:Andrew.Parfitt@uts.edu.au)>

**Subject:** Traditional Chinese Medicine

Hello all

The Provost has approved the suspension of intakes of international students into the Bachelor of Traditional Chinese Medicine for 2019 while the program is reviewed. Domestic students will continue to be accepted.

Students currently in the pipeline from Insearch for entry to UTS in 2019 will be accepted (I understand there is one student at the moment).

The Provost requests that Insearch suspend intakes of students for this pathway to UTS.

As the TCM review is underway, UTS will not be making any announcements regarding the program and would ask that this suspension be managed discretely.

Advice on the position for 2020 will be available early next year.

Regards

Margaret

**Margaret Connolly**

Executive Officer

**Provost's Office**

University of Technology Sydney

T. +61 (02) 9514 1658

PO Box 123 Broadway NSW 2007 Australia



**From:** Peter Meier <Peter.Meier@uts.edu.au>  
**Sent:** Friday, 30 November 2018 5:07 PM  
**To:** William Gladstone <William.Gladstone@uts.edu.au>; Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Subject:** RE: Update on timeline

Thanks for the update. I will consider if we should start offering in early December rounds or just leave to the main round. Ill need to talk to admission about how this is done. I will also let international know as I think there are possible 4 conditional offers in train.

regards

Peter

-----  
Peter C Meier  
Associate Dean (Teaching and Learning)  
Faculty of Science

---

**From:** William Gladstone  
**Sent:** Friday, 30 November 2018 12:49 PM  
**To:** Christopher Zaslowski <[Chris.Zaslowski@uts.edu.au](mailto:Chris.Zaslowski@uts.edu.au)>  
**Cc:** Peter Meier <[Peter.Meier@uts.edu.au](mailto:Peter.Meier@uts.edu.au)>  
**Subject:** RE: Update on timeline

Dear Chris and Peter

I met with the Provost yesterday, and he agreed to extend the deadline for the submission of the options paper to the end of February. This allows for consultation with staff to occur between December and February.

The Provost also approved a 2019 intake of commencing students.

I will ask Doreen to arrange a meeting for me with the TCM staff next week. Doreen is on leave today so she won't be able to do this until Monday. I will provide more details about the consultation timeline and process at the meeting.

Can you please advise the TCM staff.

Thanks very much

Bill

**Professor William Gladstone GAICD**  
Interim Dean

**Faculty of Science**

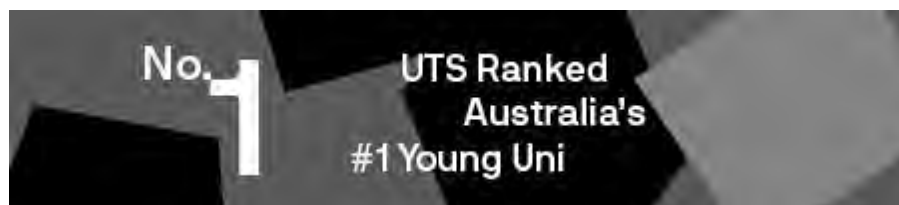
University of Technology Sydney

T. +61 (02) 9514 8272

M. +61 (0) <sup>s.2.1.3.</sup> [REDACTED]

PO Box 123 Broadway NSW 2007 Australia

[uts.edu.au](http://uts.edu.au)



---

**From:** Christopher Zaslowski  
**Sent:** Friday, 30 November 2018 9:22 AM  
**To:** William Gladstone <[William.Gladstone@uts.edu.au](mailto:William.Gladstone@uts.edu.au)>  
**Subject:** Update on timeline

Dear Bill  
Is there any update on the timeline for the options paper?  
Thanks Chris



**From:** Christopher Zaslowski  
**To:** IR-1.3.  
**Subject:** RE: Wellbeing support  
**Date:** Thursday, November 29, 2018 1:09:00 PM

---

Hi IR-1.3.

Those options were said to me as part of the discussion with Bill. They are not official until the options paper is developed.

---

**From:** IR-1.3.  
**Sent:** Thursday, 29 November 2018 1:07 PM  
**To:** Christopher Zaslowski <Chris.Zaslowski@uts.edu.au>  
**Cc:** IR-1.3.  
**Subject:** RE: Wellbeing support

Hi Chris,

I have been thinking further to the information provided below and wish to express, and certainly have 'captured' in the email system, my thoughts to this very belated and strangely convoluted messaging being received.

First of all, the lateness of this – I would argue this level of support is likely 18 months overdue.

Second, the assumption that options 1 and 2 are bad, and hence the need for wellbeing assistance, where option 3 could pose a problem, but my sense that the expression of support below, is something that is very much akin to option 4. Further, this is the first time an official notice of this form has been sent – hence the strangeness of receiving this messaging below. For myself, options 1 and 2 are great opportunities and hence the oddness of the 'wellbeing' support message, which indicates to me that these really are not options. A pessimistic view, but the process and consultative engagement to date from the Faculty is less than reassuring.

The question I have here also, is it the course being targeted, or the people as well?

Best wishes,

IR-1.3.

---

**From:** Christopher Zaslowski  
**Sent:** Wednesday, 28 November 2018 4:06 PM  
**To:** Sean Walsh <Sean.Walsh@uts.edu.au>; Carolyn Michael <Carolyn.Michael@uts.edu.au>; Dale Elsdon <Dale.Elsdon@uts.edu.au>; Shuai Zheng <Shuai.Zheng@uts.edu.au>; Nancy Morgan

<Nancy.Morgan@uts.edu.au>; Chunlin Zhou <Chunlin.Zhou@uts.edu.au>; Huiling Yao  
<Huiling.Yao@uts.edu.au>; Xianqin Qu <Xianqin.Qu@uts.edu.au>; Mary Garvey  
<Mary.Garvey@uts.edu.au>

**Subject:** Wellbeing support

Dear CM staff member

As you know the Options paper discussion with the Dean will be rescheduled next week after he consults the Provost on the timeline. I did however meet with the Dean and Raelene La Ferla (HR Partner for Science). Given the circumstances the Dean wanted to assure and inform us there is support available for staff if they felt they required it. Please see the information below

**Raelene** can discuss any issues relating to your personal circumstances, HR process and the enterprise agreement and refer you to a Wellbeing Partner if needed. Raelene La Ferla, HR Partner for Faculty of Science 9514 1075 or [s.2.1.3](#)

### **Employee Assistance Program**

All UTS staff and their immediate family members have access to free, professional and confidential wellbeing coaching service through our contracted Employee Assistance Program (EAP) provider, PeopleSense. EAP can assist with personal or work related issues that may be impacting on your quality of life or sense of general wellbeing. EAP psychologists are available 24 hours a day, 7 days a week for emergency situations and critical incidents.

telephone icon CALL : 1300 307 912 for a confidential appointment

- Step 1 **Call PeopleSense** on **1300 307 912**. The number will take you to the intake line where a consultant will ask your name and contact details, your employers' name, available psychologist name who will be seeing you and preferred time, date and location.
- Step 2 PeopleSense will confirm appointment via email. Leading up to the appointment date you will receive a text message.
- Step 3 **Attend appointment**. On arrival to your appointment you will be asked to fill out a demographic data sheet which UTS aggregate data on a quarterly basis. This is use to design wellbeing programs suited to the needs of UTS staff.
- Step 4 Ongoing coaching and counselling sessions: further appointments arranged with the allocated consultant/psychologist

Chris, I would also like to highlight the we have a Manager Assist Program via EAP for you to call if needed. Details of the Manager Assist Program are:

**The Manager Assistance Program (MAP)** is an advice and guidance service to those in a leadership position and faced with people-related issues. MAP psychologists are available 24 hours a day, 7 days a week for emergency situations and critical incidents.

Contact **PeopleSense** on 1300 307 912 to arrange a telephone consultation or appointment.

The Dean also stated that there would probably be four options

- 1) Course stays in Science but is markedly changed
- 2) Course moves into the Faculty of Health
- 3) Course moves to WSU
- 4) Course is discontinued and taught out

I have attached the document that reviews the current activities of the discipline. Please feel free to add anything that may contribute to our benefit and send back to me.

I will keep you informed of any new developments.

Thanks Chris

**From:** Peter Ralph  
**Sent:** Tuesday, 18 June 2019 11:27 AM  
**To:** Dianne Jolley <Dianne.Jolley@uts.edu.au>  
**Subject:** confidential thoughts on CM discussion

Dear Dianne,

Firstly, I want to thank Bill Gladstone for taking the initiative to examine this long-standing/highly personal/complex situation and then investing time to provide a balanced and comprehensive review of CM. I'm pleased that the review didn't provide options and this was covered by the response from CM staff.

This decision is very difficult as we are impacting on the careers and lives of our long-term colleagues.

The review paper clearly shows a major issue with both CM courses that were found to be on the lower edge of the quality index and on the lower edge of profit margin – this would suggest there are systemic issues with the courses. On reflection of the options paper and given the data provided in the review paper, to me the key decision is *does the Faculty want to cross-subsidize CM to deliver a considerable community engagement measure at the expense of below average teaching load and research productivity?*. Further to this question, is how big is the relative importance of community engagement from CM – to me, this is a minor metric that has been elevated by UTS' recent interest in social justice. Whether the argument that CM delivers a large component of the Faculty's social justice would influence this decision. At this point in time, I'd suggest there is clear evidence of social justice in CM linked to the clinic, but it is no stronger than other disciplines that are now making claims of their activities leading to social justice across the Faculty.

The second point that has influenced my decision is the idea of "fit to the Faculty". I wasn't aware that staff in CM were not well integrated across the teaching of other programs. I appreciate that the option paper suggests changes that could address this; but reality is this type of change will not fundamentally alter the overall fit of CM. Furthermore, the contribution of CM to the total research of the Faculty was also very surprising. It was encouraging to see an increase from 0.09 to 0.33%, but this remains 1/10<sup>th</sup> of what is needed to maintain an average contribution to the Faculty's research income.

On balance, I would support the discontinuation of CM for the above reasons.

**Peter Ralph PhD**  
Executive Director C3 | Professor of Marine Biology  
Team Leader: Algae Biotechnology and Biosystems • Seagrass Health

**Climate Change Cluster (C3)**  
Faculty of Science  
University of Technology Sydney  
T. +61 (02) 9514 4203  
F. +61 (02) 9514 1656  
PO Box 123 Broadway NSW 2007 Australia

Location: Room CB04.06.34 | 745 Harris St, Ultimo NSW 2007 Australia