Standards of Practice

Practice Standards outline the minimum acceptable practices which have been approved by the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Newfoundland & Labrador that are enforceable under the inquiry and discipline process of the Council.

Certain actions may deserve sanction, such as damage to the organs and body, serious infection caused by unclean instruments, or treatment beyond one's knowledge and restrictions. While any practice in contravention of the *Health Professions Act* (or other enactment applying) *of Newfoundland & Labrador, Bill 17* or the By-laws of the College of Chinese Medicine Practitioners and Acupuncturists would be enforceable under the inquiry and disciplinary process of the Newfoundland and Labrador Council of Health Professionals.

We present four Practice Standards where serious misconduct issues may arise.

- Consent to Treatment
- Sexual Misconduct
- Draping for Patients
- Patient Records

CONSENT TO TREATMENT

It is the responsibility of each CTCMPANL registrant to read and be familiar with the consent requirements as set out in the *Health Professions Act of Newfoundland & Labrador, Bill 17*, (or other enactment of government applying) and the By-laws of the College of Chinese Medicine Practitioners and Acupuncturists of Newfoundland & Labrador. Consent rights and elements of consent are clearly and completely outlined in

This Practice Standard which is to be read in conjunction with the above noted *Acts,* and this College By-law is not a substitute for reading the *Acts.*

1. Obtaining informed consent from a patient or a person appointed under the *Adult Guardianship Act as a* substitute requires ongoing communication whereby the practitioner provides the patient with the information needed to make an informed choice about how to proceed. Clear and ongoing communication between the practitioner and the patient is necessary to obtain valid patient consent. If the treatment plan is altered, patient consent must be renewed to include the altered treatment.
2. The practitioner may obtain consent from their patient in several ways. Consent to treatment may be expressed orally, in writing or may be inferred from the patient's words, writing, and or actions.
3. Written consent form includes the patient's name and signature, the date, a brief description of the treatment or procedure and the name of the practitioner who will perform it, and any other relevant information communicated to the patient. Having the patients' signature witnessed may strengthen the reliability of the consent form.
4. The clinical record must contain documentation that informed consent has occurred.
5. The practitioner must ensure that the patient has been given adequate information on the nature, purpose and risks of the treatment, alternative treatments and the consequences of refusing treatment. Consider what information about risks, benefits, side effects, or consequences of treatment a reasonable person would need to make an informed decision on how to proceed.
6. The practitioner must ensure that the patient has the capability to consent to treatment. The decision as to the patient's capability must be based on whether or not the patient demonstrates to the practitioner that he or she has understood the information provided.
7. The practitioner must communicate in a manner appropriate to the patient's skills and abilities. Be aware of language barriers which may require a translator to facilitate accurate communication.
8. All patient records, including signature, must in permanent (e.g. ink) form.

SEXUAL MISCONDUCT

These College By-laws forbid a sexual relationship between a registered practitioner and a patient. There exists an imbalance of power, authority and control in all

patient/practitioner relationships. The CTCMPANL registrant is responsible for maintaining professional boundaries.

Professional misconduct of a sexual nature includes:

(a) sexual intercourse or other forms of physical sexual relations between the registrant and the patient,

(b) touching, of a sexual nature, of the patient by the registrant, or

(c) behavior or remarks of a sexual nature by the registrant towards the patient

(d) but does not include touching, behavior and remarks by the registrant towards the patient that are of a clinical nature appropriate to the service being provided.

A CTCMPANL registrant must:

1. maintain a professional relationship when dealing with patients in all circumstances.
2. explain all procedures thoroughly and obtain informed consent.
3. respect the patient's right to withdraw consent at any time.
4. respect an individual's sensitivity to personal space, religious and cultural beliefs, values and lifestyles.
5. stop the procedure if the patient demonstrates unease and only proceed if patient consent has been re-established.
6. ensure that there is an ongoing level of understanding and the patients' continued consent.
7. refrain from entering into a close personal relationship with a former patient unless:
    - a reasonable period of time has elapsed since the patient was discharged from treatment.
    - the practitioner is reasonably satisfied that the power differential inherent in a therapeutic relationship no longer exists.
    - the practitioner reasonably believes the patient is not dependent on him or her.

DRAPING FOR PATIENTS

The intent of this Practice Standard is to minimize the potential for misunderstandings that may compromise the patient or the practitioner. Good communication is of the utmost importance.

The CTCMPANL registrant practitioner must equip their practice with adequate, clean draping materials for patients.

When disrobing is necessary, the CTCMPANL registrant practitioner must;

Explain the purpose of requiring the patient to undress and options for draping.

1. give the patient the opportunity to refuse to undress and/or draping
2. leave the examining room while the patient undresses.
3. maintain the dignity of the patient at all times.
4. drape the patient appropriately, according to the pathology and the individual patients needs.

RECORD KEEPING

The intent of this Practice Standard is to prevent harm to the patient. Record keeping provides a means for plan of action and review based on patient benefit or otherwise. It provides an accurate record of care and does minimize the potential for misunderstandings that may compromise the patient or the practitioner. Good record keeping is of the utmost importance.

The CTCMPANL registrant practitioner must:

1. Respect the confidentiality of patient records and shall store records in a secure place.
2. Complete a record of patient management, in English, for each patient.
    1. Where English is not the first language of the practitioner, when required, translation of records is the responsibility of the practitioner.
3. Use the World Health nomenclature of acupuncture points.
4. Retain any and all informed consent forms for each patient as part of the patient record
5. Retain the patient record in the clinic for at least five (5) years after the patient receives treatment from or consults with the registrant
6. Obtain the consent of the patient prior to releasing patient records to another practitioner, an insurance company or any other agency or person, except where required by the *Health Disciplines Act* or any other enactment or by order of a court to disclose the information.

1. COMPETENT APPLICATION OF KNOWLEDGE

Bases practice on the distinct body of knowledge of Traditional Chinese medicine and on content from other related health sciences. Identifies client's actual or potential diagnoses, differentiates syndromes, plans interventions, performs planned interventions and evaluates client outcomes.

Knows how and where to find needed information.

Makes and justifies decisions with reference to knowledge and theories.

1.1 Presents an informed view of acupuncture and Traditional Chinese medicine to others.

1.2 Uses skills of observation. olfaction, inquiry, palpation and physical assessment to gather information about client status.

1.3 Distinguishes between relevant and irrelevant information when determining client diagnoses and differentiating syndromes, referring to other health care practitioners, or evaluating response to treatment.

1.4 States client diagnoses and potential health problems in practice setting terminology, using verifiable information.

1.5 Plans care based on assessment findings, diagnoses, differentiation of syndromes, cause and extent of disturbance.

1.6 Sets priorities when planning and giving care.

1.7 Performs planned interventions in accordance with the body of TCM theories, policies, procedures, and these practice standards.

1.8 Evaluates client response to interventions and revises the interventions as necessary

1.9 Documents timely and accurate reports of relevant observations.

1.10 Maintains a professional relationship throughout the course of treatment

1.11 Uses appropriate, professional communication

2. **RESPONSIBILITY AND ACCOUNTABILITY**

Maintains standards of acupuncture and Traditional Chinese medicine practice and professional behavior determined by the College of Registrants of NL. Regulations and Bylaws (insert link to bylaws), the *Health Professions Act 2010*, *the Acupuncturist Regulations 2012* and the practice setting.

2.1 At all times is accountable and takes responsibility for own actions.

2.2 Functions in accordance with relevant legislation and standards of practice of licensed Registrants.

2.3 Follows relevant facility, agency or department policies and standards.

2.4 Contributes to the development of the profession.

2.5 Delegates to those under their supervision, only those tasks that are appropriate commensurate with their skills, knowledge and abilities.

3. PROVISION OF SERVICE TO THE PUBLIC

In providing acupuncture and traditional Chinese medicine services, the practitioner;

3.1 Communicates with and refers to other health care professionals about the client's care when necessary and/or required.

3.2 Exercises appropriate judgment in performing treatments.

3.3 Self-directs and/or participates in quality improvement initiatives.

3.4 Explains services to clients and, when required, to others.

4. CODE OF ETHICS

Adheres to the Code of Ethics of the CTCMPANL

4.1 Respect a client's right to autonomy, privacy, confidentiality, dignity and access to information.

4.2 Assumes responsibility for ensuring that relationships with clients are therapeutic and professional.

4.3 Ensures that practice is congruent with the Canadian Charter of Rights and Freedoms.

4.4 Demonstrates honesty, integrity and respect for their clients, members of their own profession, other health care providers, and the public.

4.5 Reports unsafe practice or professional misconduct to appropriate authority.

5. REGULATION

Assumes primary responsibility for maintaining competence, fitness to practice, and acquiring further knowledge and skills for professional practice

5.1 Invests time, effort, and other resources in maintaining knowledge and skills for practice.

5.2 Practices within own level of competence.

5.3 Maintains current licensure.

5.4 Maintains own physical, mental and emotional well-being.

6. CLEANLINESS

6.1 A Registrants clinic shall be maintained in a clean and sanitary condition at all times

6.2 A Registrants hands shall be cleaned thoroughly immediately before and after treating patients

6.3 A Registrant shall establish a clean field on a dry surface prior to providing an acupuncture treatment.

6.4 A Registrant shall clean acupuncture points where needles are to be inserted, with an appropriate antiseptic before insertion of the needle.

6.5 A Registrant shall use only pre-sterilized disposable needles and shall avoid contaminating the needle during therapy.

6.6 A Registrant shall dispose of all contaminated acupuncture needles immediately after use in a proper Biohazard container. Full containers shall be collected and disposed of by biohazard waste disposal services.

6.7 A Registrant shall ensure that all equipment and material to contact the patient's skin are maintained in hygienic condition.

7. PATIENT INFORMATION AND INFORMED PATIENT CHOICE

7.1 A Registrant shall advise the patient as to potential risks and potential discomfort of the treatment

7.2 A Registrant shall advise the patient as to the nature and the course of the treatment.

7.3 A Registrant shall communicate effectively with the patient and shall ensure the patient's understanding of language and concepts used.

7.4 A Registrant shall obtain informed consent for any treatment by having the patient sign a consent form confirming understanding of the risks and benefits of treatment, and shall obtain the patients' written consent to any significant changes to the treatment.

7.5 A Registrant shall not intentionally mislead the patient.

8. CONDITIONS REQUIRING PRECAUTION

8.1 A Registrant shall use good judgment and appropriate precautions when deciding whether to treat and when treating all patients and when determining whether to treat, consult with another appropriate health care provider or refer to another appropriate health care provider where a patient has a severely infectious or systemic disease, or a frail/medically complicated condition (for example AIDS, hepatitis, diabetes, severe skin disease, cancer, acute heart attack, severe hemorrhage, is currently pregnant, Is a child under the age of eight, or is elderly).

9. CONSULTATION WITH/REFERRAL TO OTHER HEALTH CARE PROVIDERS.

9.1 A Registrant shall know ones' own abilities and limitations in relation to the risks of treating diseases and make appropriate judgments about whether or not to treat, or refer to another health care provider where appropriate

9.2 The practitioner recognizes unusual difficult to resolve and complex situations which may be beyond his/her capacity. The practitioner takes appropriate and ethical steps to address these situations, which may include seeking consultation or supervision, reviewing research literature or referring the patient.

9.3 A Registrant shall not discourage the patient from consulting with another health care professional for a second opinion, at any time either before or during the course of treatment.

9.4 A Registrant shall consult with or refer a patient to another appropriate health care provider in a timely manner if the patient' condition for which the treatment is intended, fails to improve or worsens beyond reasonable expectations.

9.5 A Registrant shall immediately refer the patient to a physician or other appropriate health care provider, if immediate medical treatment is required, or any complication arising out of treatment.

10. USE OF INSTRUMENTS

10.1 A Registrant may use only non-invasive devices in the examination of a patient, including thermometers, stethoscopes, electrical devices used for location of acupuncture points, pulse rate monitors and flashlights. Lasers may be used in treatment.

10.2 A Registrant shall ensure that all equipment, including equipment associated with the techniques of moxibustion and cupping, is regularly inspected and maintained in good working order.