

# ONTARIO CHIROPRACTIC ASSOCIATION ASSOCIATION CHIROPRATIQUE DE L'ONTARIO

March 24, 2008

Ms. Irene Klatt
Assistant Vice-President, Health Insurance
Canadian Life and Health Insurance Association, Inc.
1700 - 1 Queen St East
Toronto ON M5C 2X9

Re: Certification for the practice of acupuncture

Dear Irene:

You will be aware that Bill 50, the *Traditional Chinese Medicine Act*, provides for the regulation of acupuncture in Ontario. Certain health professionals, including chiropractors, are regulated in the practice of acupuncture by their existing regulatory college and <u>not</u> by the new College of TCM. In the case of chiropractors this is the College of Chiropractors of Ontario.

The CCO has established a Standard of Practice for chiropractors practicing Acupuncture. That standard is based on World Health Organization's widely accepted *Guidelines on Basic Safety and Training in Acupuncture* and is endorsed by the Ontario Chiropractic Association.

Prior to this, acupuncture was exempt from the provisions of the Regulated Health Professions Act and was therefore in the public domain. There was no legislated certification process for anyone practicing acupuncture. Because of this various payers, including the WSIB, sought assurance that practitioners were adequately trained by requiring membership in one of a number of training and certification organizations, i.e., the Acupuncture Foundation of Canada and the Acupuncture Council of Ontario.

The change in legislation means that, in the case of chiropractors, insurers should now rely on the College of Chiropractors of Ontario rather than ACO or AFCI certification. Given the Traditional Chinese Medicine Act and the CCO Standard of Practice, ACO certification or membership is no longer the standard to which chiropractors may be held in Ontario.

The Ontario Chiropractic Association raises this because we are aware that, in some instances, insurers are still asking chiropractors for ACO certification numbers. This is no longer appropriate. Insurers should instead seek assurance that a chiropractor meets the CCO Standard of Practice.

Enclosed is a letter from Jo-Ann Willson, Registrar, College of Chiropractors of Ontario which sets out the CCO's authority and responsibility, and which includes the following:

Pursuant to the legislative changes, members of CCO are authorized to provide acupuncture services provided they comply with CCO's standard of practice S-017: Acupuncture (which) does not require a member to be a member of any other organization, educational institution or certification body in order to include acupuncture in his/her practice.

Also enclosed is the CCO Standard of Practice S-017, Acupuncture.

It would be most helpful and greatly appreciated if the CLHIA would assist by advising its members of this important change.

Sincerely,

Dr. Bob Haig, DC Executive Director

**Enclosures** 

130 Bloor St. West Suite 902 Toronto, Ontario M5S 1N5

Tel: 416-922-6355 Fax:416-925-9610 cco.info@cco.on.ca www.cco.on.ca



March 4, 2008

Via facsimile (905-629-8214) and ordinary mail

Dr. Bob Haig Executive Director Ontario Chiropractic Association 5160 Explorer Drive, Suite 30 Mississauga, Ontario L4W 4T7

Re: Regulation of Acupuncture by the College of Chiropractors of Ontario (CCO)

Dear Dr. Haig:

As you are aware, CCO is regulatory body for chiropractors in Ontario with a statutory mandate pursuant to the *Regulated Health Professions Act, 1991* and the *Chiropractic Act, 1991*. CCO's responsibilities include establishing, developing and maintaining standards of practice to which the profession must conform. It is an act of professional misconduct under the Professional Misconduct Regulation to fail to comply with a standard of practice.

One of the topics on which CCO has developed a standard of practice, is acupuncture (a copy of S-017: Acupuncture is enclosed). This standard was developed by the Quality Assurance Committee after consultation with stakeholders, including all members.

Until the passage of Bill 50 in 2006, acupuncture was in the public domain. However, given the public interest issues involved, as well as the number of chiropractors who provide acupuncture services, CCO took the steps required to develop a standard of practice on the use of acupuncture by members. Pursuant to the legislative changes, members of CCO are authorized to provide acupuncture services provided they comply with CCO's standard of practice. S-017: Acupuncture does *not* require a member to be a member of or to be subject to any other organization, educational institution, or certification body in order to include acupuncture in his/her practice.



Please feel free to contact me if you have any questions or concerns. You may also distribute this correspondence as appropriate.

Yours very truly,

Jo<sup>L</sup>Ann Willson

Registrar and General Counsel

# **A**CUPUNCTURE

Standard of Practice S-017
Quality Assurance Committee
Approved by Council: June 22, 2007

Minor amendments approved by Council: September 11, 2007



Note to Readers: In the event of any inconsistency between this document and the legislation that affects chiropractic practice, the legislation governs.

#### INTENT

Chiropractors have been using acupuncture treatments for many years as an adjunctive therapy for their patients. The use of acupuncture, as an adjunctive therapy, requires a high degree of skill and is not without risk. This standard of practice outlines the elements necessary to maintain a high level of skill in the application of acupuncture as an adjunctive therapy in the chiropractic practice.

# **OBJECTIVES**

- To assist members who intend to provide acupuncture services as an adjunctive therapy to their patients.
- To remind members of their duties, obligations and scope of practice when providing acupuncture services as an adjunctive therapy to their patients.

### DESCRIPTION OF STANDARD OF PRACTICE

# **Consideration of Public Safety**

Members are reminded that the use of any acupuncture procedure or protocol may have significant benefits for patients, but also carries some risk. As such, members must be:

- skilled at prevention of infection and familiar with clean needle techniques;
- aware of any and all contraindications to the use of acupuncture;
- trained in the appropriate responses to accidents and untoward reactions;
- aware of precautions necessary to prevent injury.

Members are required to obtain patient consent prior to treatment by acupuncture that is:

- fully informed;
- voluntarily given;
- related to the patient's condition and circumstances;
- not obtained through fraud or misrepresentation; and
- evidenced in a written form signed by the patient or otherwise documented in the patient's health record.

Members are reminded that this standard should be read in conjunction with standard of practice S-013: Consent. Members should refer to the World Health Organization's (WHO) *Guidelines on Basic Training and Safety in Acupuncture, 1999* (WHO Guidelines), for a more in-depth discussion of prevention of infection, contraindications, accidents and untoward reactions, and injury to organs.

# **Educational Requirements in Establishing Degree of Skill**

To practise acupuncture as an adjunctive therapy in the context of their chiropractic practice, members must have completed specific acupuncture training as taught in the core curriculum, post-graduate curriculum or continuing education division of one or more colleges accredited by the Council on Chiropractic Education Inc., or in an accredited Canadian or American college/university, or in an accredited school of acupuncture<sup>1</sup>.

CCO adopts the WHO Guidelines that a combined (clinical and academic) minimum of 200 hours of formal training<sup>2</sup> is required for those members who intend to use acupuncture as an adjunctive procedure in their primary practice.

<sup>&</sup>lt;sup>1</sup> Examination, certification or other proof of clinical proficiency is required.

<sup>&</sup>lt;sup>2</sup> The course should comprise at least 200 hours of formal training, and should include the following components:

<sup>1.</sup> Introduction to traditional Chinese acupuncture

<sup>2.</sup> Acupuncture points

<sup>•</sup> location of the 361 classical points on the 14 meridians and the 48 extraordinary points;

alphanumeric codes and names, classifications of points, direction and depth of insertion of needles, actions and indications of the commonly used points selected for basic training.

<sup>3.</sup> Applications of acupuncture in modern Western medicine

principal clinical conditions in which acupuncture has been shown to be beneficial;

<sup>•</sup> selection of patients and evaluation of progress/benefit;

planning of treatment, selection of points and methods of needle manipulation, and the use of medication or other forms of therapy concurrently with acupuncture.

<sup>4.</sup> Guidelines on safety in acupuncture

<sup>5.</sup> Treatment techniques

general principles;

<sup>·</sup> specific clinical conditions.

# **GRANDPARENTING CLAUSE**

Chiropractors who have actively practised acupuncture as an adjunctive therapy in their chiropractic practice for a minimum of five consecutive years immediately before the enactment of this standard of practice will be deemed to have met the qualifications to practise acupuncture as an adjunctive therapy, as outlined above.

Actively practising acupuncture as an adjunctive therapy means performing 150 acupuncture treatments per year for each of the last five years within a chiropractic practice.

## PROFESSIONAL LIABILITY INSURANCE

Members must provide evidence, satisfactory to the Registrar, of carrying professional liability insurance in the applicable minimum amount per occurrence and minimum aggregate amount per year, including coverage for claims after the member ceases to hold a certificate or membership in a protective association that provides equivalent protection unless, the applicant is, or will be when registered, an employee of a member, a health facility or other body that has equivalent professional liability insurance coverage or membership in a protective association that provides equivalent protection.

## LEGISLATIVE CONTEXT

#### **Controlled Acts**

Currently, acupuncture is exempted from paragraph 7 of subsection 27(2) of the *Regulated Health Professions Act*, 1991 (RHPA) dealing with controlled acts.

CCO recognizes that under existing legislation in which acupuncture is exempted by regulation from being characterized as a "controlled act," no one profession has exclusive jurisdiction over the technique or methodology, and that many chiropractors have and continue to provide acupuncture treatments to the benefit of their patients.

## **Scope of Practice**

Members who use acupuncture as an adjunctive therapy are reminded that the scope of practice of chiropractic is defined in section 3 of the *Chiropractic Act*, 1991:

3. The practice of chiropractic is the assessment of conditions related to the spine, nervous system and joints and the diagnosis, prevention and treatment, primarily by adjustment, of:

- (a) dysfunctions or disorders arising from the structures or functions of the spine and the effects of those dysfunctions or disorders on the nervous system; and
- (b) dysfunctions or disorders arising from the structures or functions of the joints.

## CONCLUSION

Identifying and complying with safeguards will ensure safer administration of this form of treatment. Therefore, risks to the public will be minimized and the benefits of safe, effective therapeutic treatment will be maintained.

This standard should be read in conjunction with standards of practice S-001: Professional Portfolio, S-011: Dual Registrants, and S-013: Consent.