



College of Traditional Chinese Medicine  
Practitioners and Acupuncturists of Ontario

Ordre des praticiens en médecine traditionnelle  
chinoise et des acupuncteurs de l'Ontario

# TELEPRACTICE GUIDELINE

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## 1. Introduction

With a changing work and social environment, alternative methods to in-person service have become important considerations in providing healthcare. Telepractice is one of the methods that has grown in use in recent years.

In the Spring of 2020, the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO) developed a position statement on telepractice. The College developed the position statement as a temporary measure to provide guidance on telepractice as an alternative to in-person service during the COVID-19 pandemic. However, as technology evolves and is increasingly integrated into the provision of healthcare services, it is expected that telepractice will become a more prominent model of care. Building on the June 1, 2020 position statement, this guideline is designed to provide a more comprehensive overview that will help practitioners understand their responsibilities when providing care using telecommunication technologies.

Telepractice (also called virtual practice) can be defined as the use of telecommunications technology to deliver healthcare services without direct contact between the practitioner and the patient. While technology continues to change, some examples of technology used in telepractice include telephone, email and video conferencing.

It is important to note that this guideline cannot address all situations that may arise with the use of telepractice. Members engaging in telepractice are expected to stay informed on relevant changes to regulations, standards, and policies and to use their knowledge, skills and judgement to ensure they comply with the expectations of the College.

For the purposes of this guideline, members of CTCMPAO will be referred to as “practitioners.”

## Key points

- Practitioners engaged in telepractice are accountable for the care they provide to their patients. They must use their professional judgement to assess on a case-by-case basis if the use of telepractice is in the patient's best interest.
- Practitioners engaged in telepractice must comply with all existing practice requirements, including the profession's scope of practice, the standards of practice, and any relevant regulations.
- Practitioners who engage in telepractice must ensure they have the competencies (knowledge, skills, and judgement) to provide safe and effective virtual care to their patients.

The College would like to thank the members of the Quality Assurance Committee for their ongoing guidance and for providing the necessary vision for the development of this guideline.

## 2. Traditional Chinese Medicine (TCM) and Telepractice

The [Traditional Chinese Medicine Act, 2006](#), defines the scope of traditional Chinese medicine as the assessment of body system disorders through traditional Chinese medicine techniques and treatment using traditional Chinese medicine therapies to promote, maintain or restore health.

In the context of traditional Chinese medicine, the primary benefit of telepractice is ensuring the continuity of care and accessibility. Providing virtual care can improve accessibility when, for example, physical contact is discouraged due to a health pandemic, there is a shortage of practitioners in a geographical region, or when patients have transportation or mobility issues. However, it should be noted, telepractice has its limitations. For example, TCM practitioners and acupuncturists rely on several diagnostic methods to conduct patient assessments. This includes physically assessing patients by palpitation or pulse examination. In the case of telepractice, these physical assessment methods are not feasible. In addition, telepractice limits the number of modalities used in traditional Chinese medicine; these include, for example, acupuncture, cupping, gua sha, and tui na.

Taking into consideration both the limitations and benefits of telepractice, practitioners must use their professional judgement to determine on a case-by-case basis:

- If telepractice is appropriate and in the best interest of the patient?
- If the virtual examination is sufficient to formulate a TCM diagnosis and treatment plan? Or if other diagnostic methods are more appropriate for the particular patient?
- If treatments available through telepractice are the best options for the patient's condition?

Practitioners must also consider if they have the skills and competencies required to treat patients remotely. For example, do they have the communication skills to obtain the necessary information through questioning? Further, do they have the necessary technological equipment to effectively provide TCM care via telepractice?

If a practitioner determines that virtual care is appropriate for a particular patient, they will need to ensure that there is a plan in place to deal with unforeseen and adverse events such as medical emergencies or technological/connection problems.

The following list includes examples of TCM services that may be provided via telepractice:

- Initial assessment and monitoring - in addition to a review of the patient's medical history, diet, lifestyle and habits a practitioner, may use the TCM diagnostic technique of inquiry and observation to collect information to determine a TCM diagnosis.
- Home-based modalities - for example, in some cases, it may be appropriate to guide the patient to perform acupuncture or practice therapeutic exercises such as tai ji or qi gong.

- Herbal medicine – if the practitioner is able to collect the required information to determine a TCM diagnosis, a herbal prescription can be prescribed to proceed with an herbal treatment of the patient.
- Dietary therapy and lifestyle advice – similarly, when appropriate, practitioners may provide dietary and lifestyle advice remotely.

**NOTE: Telepractice is not acceptable in the following two scenarios:**

- Clinical Experience Requirement - Applicants for registration are required to complete a program of clinical experience in the profession, which involves specified hours of direct patient contact. It is the College's position that all supervised clinical training must be provided in person. The clinical experience requirement cannot be satisfied through telepractice.
- Supervised Practice Requirements - Some members of the College may be required to practice under supervision. It is the College's position that the supervisor and the practitioner being supervised are, at all times, physically present at the treatment location. The supervised practice requirement cannot be satisfied through telepractice.

### **3. Jurisdictional Considerations and Registration Requirements**

The jurisdiction for the traditional Chinese medicine practice is dependant on a variety of factors, including the location of the patient and the practitioner. A practitioner must be registered with CTCMPAO to preform any of the controlled acts<sup>1</sup> authorized to the profession or use the protected titles in Ontario. Although acupuncture cannot be provided via telepractice, communicating a TCM diagnosis can occur. Therefore, a practitioner must be registered in Ontario to communicate a TCM diagnosis to a patient in Ontario. For example, if a practitioner based in British Columbia were to communicate a TCM diagnosis to a patient in Ontario, they would have to be registered with CTCMPAO.

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<sup>1</sup>CTCMPAO Members are authorized to perform two controlled acts:

1. Communicating a traditional Chinese medicine diagnosis identifying a body system disorder as the cause of a person's symptoms using traditional Chinese medicine techniques.
2. Performing a procedure on tissue below the dermis and below the surface of a mucous membrane for the purpose of performing acupuncture.

CTCMPAO members treating patients residing outside of Ontario must comply with the registration/licensing requirements in Ontario **and** the jurisdiction where the telepractice service will be provided. For example, if a CTCMPAO member were to provide remote care to a patient in British Columbia, the practitioner would be expected to abide by the regulations and standards in Ontario and British Columbia. Practitioners should also check with their professional liability insurance provider to ensure that they have proper coverage for providing care to patients located outside of Ontario.

#### **4. Privacy and Confidentiality**

Practitioners must maintain the privacy of all patient personal health information as required by the Personal Health Information Protection Act, 2004 (PHIPA) and the Personal Information Protection and Electronic Documents Act (PIPEDA). These requirements apply to both in-person and virtual care. Under PHIPA, practitioners are expected to take steps to ensure that personal health information is protected against theft, loss and unauthorized use or disclosure. Practitioners must also follow the law for collecting, using, and sharing personal health information. PHIPA sets out when a member must ask for consent to collect, use, and disclose personal health information.

Practitioners are ultimately responsible for ensuring virtual care is provided in a manner that protects patients' confidentiality and the privacy of their personal health information. To this end, practitioners must ensure that the technology and devices they use (e.g., laptops or phones) do not allow for accidental access of patient information to unauthorized parties. Practitioners should also evaluate if the patient's physical setting and their own setting provide a safe, secure and confidential environment. Phone calls and videoconferencing sessions should not be recorded unless the practitioner has the patient's consent and can ensure the recording is stored properly.

**NOTE:** Telepractice visits should only be conducted in a private space so that the privacy and confidentiality of the patient's personal health information are not compromised. Practitioners should take measures to ensure that an unintended third party cannot overhear their conversations with patients at either end of the conversation.

It is crucial that patients understand the risks of receiving treatment by telepractice and provide consent before proceeding. For more information, see the Consent to Treatment section below.

The Information and Privacy Commissioner of Ontario developed a fact sheet for Privacy and Security Considerations for Health Care Visits. Although, the fact sheet applies primarily to public sector and government organizations, many of the recommendations included in the document also apply to practitioners as health information custodians. Practitioners providing virtual care are strongly encouraged to review the guide.

**NOTE:** When providing clinical advice or treatment information by email, practitioners should consider whether it's appropriate for the patient to receive this information electronically. Using encryption and password protection, a secure internet connection, and limiting how much personal health information is sent, may help to improve the safety and security of transmitting patient health information. For more information, see the Information and Privacy Commissioner of Ontario (IPC) [Fact Sheet: Communicating Personal Health Information by Email](#).

At the start of the virtual visit, practitioners should verify the patient's identity. The practitioner's identity, location, and CTCMPAO registration status should also be confirmed. If anyone else is present with the practitioner, it is important to ensure that they are introduced and that the patient consents to them being present during the visit. Practitioners should also check if anyone is accompanying the patient and, if so, confirm the patient's consent.

## 5. Technology

The College cannot recommend a specific technology provider; practitioners are expected to choose the communication technologies that are most appropriate for their practice.

Practitioners engaged in telepractice must understand the capabilities and limitations of the technology they choose such as security, data storage and technical trouble shooting. Any technology that is used to



provide virtual care must meet the Personal Health Information examples of different measures to safeguard privacy, for example:

- Administrative Safeguards: privacy and security policies and procedures, staff training and confidentiality agreements, using professional (not personal) email accounts
- Technical Safeguards: strong authentication and access controls, strong passwords and encryption, maintaining up-to-date software, firewalls and anti-malware scanners
- Physical Safeguards: controlled access to locations where personal information is stored, Keeping portable devices in secure location

For more information, please see the [Guide to the Personal Health Information Protection Act](#).

Practitioners must ensure that they have the skills and training in the use of the telecommunication technology and that they have access to appropriate technical support. Practitioners should also consider the patient's needs, reliability and security of their devices (e.g., home computer, laptop, tablet, or cellphone), internet access, and access to technical support.

**NOTE:** At the outset of a telepractice visit/session, practitioners should arrange for alternate means of contact in case of technical difficulties/connection loss.

## **6.Consent to Treatment**

The requirement for practitioners to obtain patients' consent for treatment is the same for telepractice and in-person patient care. However, in addition to receiving informed consent to provide treatment, practitioners should also obtain informed consent from patients to conduct an appointment via telepractice. In order to obtain informed consent before providing treatment through telepractice, practitioners must inform the patient about the risks, scope and limitations of telepractice. Practitioners must also have the patient's consent to

collect, use and disclose personal health information using telecommunication technologies.

**NOTE:** Before providing a telepractice treatment, practitioners should ensure that the patient is aware of the **risks associated with providing services in ways other than in-person interactions.**

Once the telepractice session begins, practitioners must obtain the patient's informed consent before treatment. Consent is an ongoing process; practitioners should re-confirm consent at each visit/session and ensure that patients understand their right to withdraw consent. Practitioners must document consent in the patient's file.

For more information, please see the [Standard for Consent](#) and the Health Care Consent Act, 1996.

## **7. Record Keeping**

Practitioners engaged in telepractice are required to maintain patient records in accordance with the College's Standard for Record Keeping. Practitioners must maintain comprehensive clinical records and document all patient encounters that take place through telepractice. If applicable, patient records should clearly indicate that a service was provided remotely.

For more detailed information, please see the [Standard for Record Keeping](#) and [Record Keeping Guideline](#).

## **8. Fees and Billing**

Practitioners are already required to advise patients of fees prior to providing treatment. Practitioners are also expected to advise their patients (upfront) of any additional fees associated with telepractice. The fee information must be clear and should not be misleading or hard to understand.

Invoices should be an accurate representation of the service provided to the patient. If applicable, an invoice should indicate that a service was provided remotely.

Practitioners should advise their patients to check that insurance providers cover services provided by telepractice.

For more information, please see the Standard for [Advertising and the Advertising Guideline](#).

## **9. Maintaining Professional Boundaries**

Practitioners must establish and maintain professional boundaries with their patients and be aware of the potential for boundary violations.

Telepractice may provide opportunities for more informal types of interaction, which may lead to potential boundary crossings. For example, suppose a practitioner allows for text messaging with patients. In that case, they should carefully consider their expectations of how and when they will use and respond to text messages from their patients. Members will also want to remember and consider how these text messages are incorporated into the patient record.

Practitioners should also pay attention to the environment where telepractice will occur and avoid any personal items that may increase the risk for boundary crossings or violations.

For more information, please refer to the [Standard for Maintaining Professional Boundaries](#).

## **10. Professional Liability Insurance**

Practitioners are required to maintain Professional Liability Insurance coverage as specified in the College By-Laws. When engaged in telepractice, practitioners must ensure that their PLI policies offer adequate coverage for that type of service delivery. For more information, please see the [Professional Liability Insurance Policy](#).

## REFERENCES

College of Naturopaths of Ontario

- [Regulatory Guidance: Telepractice - Providing Naturopathic Care at a Distance](#)
- [Telepractice Guideline](#)

College of Occupational Therapists of Ontario: [Guidelines for Telepractice in Occupational Therapy](#)

College of Optometrists: [Telehealth Policy for Optometrists](#)

College of Physiotherapists of Ontario

- [Virtual Practice](#)
- [Virtual Practice FAQs](#)

College of Traditional Chinese Medicine Practitioners and Acupuncturists of British Columbia

- [PRACTICE STANDARD: Tele-Practice During the Coronavirus \(COVID-19\) Pandemic](#)
- [College's Statement Regarding Tele-Practice During the COVID-19 Pandemic](#)

Information and Privacy Commissioner of Ontario

- [A Guide to the Personal Health Information Protection Act](#)
- [Privacy and security considerations for virtual health care visits](#)
- [Recent PHIPA Amendments and Privacy/Security Considerations for Virtual Care](#)

Ontario College of Social Workers and Social Service Workers

- [Frequently Asked Questions](#)



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