STANDARDS OF PRACTICE

Approved by the Transitional Council on January 14- January 15, 2013
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Introduction

The Standards of Practice have been developed by the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO) to determine whether a registered Traditional Chinese Medicine Practitioner (R. TCMP) and Acupuncturist (R. Ac) can perform at an acceptable level. The Standards of Practice reflect the knowledge, skills and judgement R. TCMPs and R. Ac need in order to perform the services and procedures that fall within the scope of practice of the profession.

The Regulated Health Professions Act and the companion health professions Acts govern the practice of regulated health professions in Ontario.

The Regulated Health Professions Act (RHPA)

The RHPA consists of different parts: a Main Part and a Procedural Code that includes the administering bodies, the controlled acts and requirements for all the Colleges. These parts constitute the RHPA proper and apply to, or are deemed to apply to, all the regulated health professions. The health profession Acts list profession-specific provisions, such as the profession’s scope of practice statement and authorized acts. The health profession Act for R. TCMPs and R. Ac is the Traditional Chinese Medicine Act.

The primary body responsible for administering the RHPA, and the companion health profession Acts, such as the Traditional Chinese Medicine Act, is the regulatory College of profession. For R. TCMPs and R. Ac, this is the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO).

Scope of practice / controlled acts model

This model enhances public protection and choice by specifically identifying and controlling the performance of those procedure that pose risk of harm (the 14 controlled acts), without giving any profession an exclusive or licensed area of practice. Instead, each profession has a scope of practice statement, which describes in general terms what the profession does. The controlled act procedures are authorized for specific health professions. Procedures that are not controlled acts are in the “public domain” and may be performed by regulated health professions or by unregulated individuals. In this model, therefore, controlled act procedures may be likened to “licensed” procedures, because only persons authorized under the RHPA may perform them. The scope of practice statements, however, are not “licensed”, and elements of the scope statements may overlap between professions. The regulated health professions, therefore, are registered, not licensed.

The intent of this model is to provide the public with protection and choice amongst regulated health care professions who may provide a range of health care services, subject to scope, standards and competence.
Elements of the model

This model consists of a number of elements, the main ones being:

Scope of Practice Statement:

The scope of practice statement corresponds to what members of the profession learn in their programs of preparation and sets out the areas of expected competence. It establishes the foundation for the practice of the profession and serves as a frame of reference for such things as entry to practice requirements, the performance of authorized acts, and the standards of practice of the profession. The scope of practice statements do not establish a licensed area of practice (i.e., the area of practice is not restricted to a particular profession), and elements of the statements of the different health professions overlap, so that various professions may provide similar health care services.

Controlled Acts:

There are 14 procedures, listed in Section 27 of the RHPA, that are deemed to pose risk of physical harm if performed by unqualified persons. Under the profession-specific health profession Act, the professions are authorized to perform, either in full or in part, the controlled acts, depending on the profession’s scope of practice and expected competencies. In addition to permitting performance of controlled act procedures, the RHPA also gives the option to delegate or transfer the authority to perform the controlled acts from those authorized to perform them under their health profession Act to others who are not. Therefore, professions have the option to delegate procedures within their authorized acts to others and to accept delegation from other health care professionals of controlled act procedures, either through legislation or delegation.

Authorized Acts:

An authorized act is a controlled act, or portion of a controlled act, that is authorized for a specific profession to perform under its health profession Act. Each regulated health profession is authorized to perform from 0 to 13 of the 14 controlled acts, either in full or in part, depending on the scope of practice and competencies of the profession. As an example, in relation to Controlled Act 2, “performing a procedure on tissue below the dermis, below the surface of a mucous membrane, cornea, surface of the teeth, including scaling”: physicians are authorized to perform all of this controlled act except for scaling.

Prior to the passing of the Traditional Chinese Medicine Act in December of 2006, acupuncture was entirely exempt from the controlled act of “performing a procedure below the dermis” and anyone was able to perform this activity. However, with the passing of the Traditional Chinese Medicine Act, acupuncture is no longer entirely exempt from this controlled act.
The following health care professions are exempt from the prohibition against performing the controlled act of acupuncture, under an exemption for controlled acts contained in a regulation made under the authority of the RHPA (Ontario Regulation 107/96, Controlled acts).

In the table below, Column 1 lists the Colleges and Column 2 lists the professions who can now perform acupuncture procedures on tissue below the dermis. However, acupuncture performed by members of the Colleges listed in Column 1 must do so in accordance with the standards of practice established by the Colleges and within the scope of practice of the professions.

### TABLE

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For example, the scope of practice of occupational therapy from the *Occupational Therapy Act (1991)* reads:

“The practice of occupational therapy is the assessment of function and adaptive behaviour and the treatment and prevention of disorders which affect function or adaptive behaviour to develop, maintain, rehabilitate or augment function or adaptive behaviour in the areas of self-care, productivity and leisure.”

The College of Occupational Therapists of Ontario has developed acupuncture standards of practice for Occupational Therapists. Members of the College of Occupational Therapists of Ontario can only apply acupuncture as it relates to their scope of practice and the procedure must be in compliance with the standards for acupuncture as established by the College.

The Traditional Chinese Medicine Act, 2006 sets out the scope of practice statement as follows:

“The practice of traditional Chinese medicine is the assessment of body system disorders through traditional Chinese medicine techniques and treatment using traditional Chinese medicine therapies to promote, maintain or restore health.”

The *Traditional Chinese Medicine Act* also sets out which of the 14 controlled acts as set out in the *Regulated Health Professions Act* R. TCMPs and R. Acs are authorized to perform. These are known as authorized acts. The *Traditional Chinese Medicine Act* states:
1. Performing a procedure on tissue below the dermis and below the surface of a mucous membrane for the purpose of performing acupuncture.

2. Communicating a traditional Chinese medicine diagnosis identifying a body system disorder as the cause of a person’s symptoms using traditional Chinese medicine techniques.

The Standards of Practice for R. TCMPs and R. Acs are intended to be generic. The indicators following each Practice Standard are examples of the application of that Standard of Practice in a specific dimension of practice. The Standards of Practice are referenced to the following documents:

- Entry-Level Occupational Competencies for the Practice of Traditional Chinese Medicine in Canada, Canadian Alliance of Regulatory Bodies of TCM Practitioners and Acupuncturists. Recommended to the Provincial Regulatory Authorities October 17, 2009.
- Entry-Level Occupational Competencies for the Practice of Traditional Chinese Medicine in Canada (October 2009), Performance Indicators, Submitted by PLACED, The G. Raymond Chang School of Continuing Education Ryerson University to the Transitional Council/College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (TC/CTCMPAO) in completion of the Memorandum of Understanding between PLACED and TC/CTCMPAO, Approved by the Transitional Council January 25, 2010.
- Entry-Level Occupational Competencies for the Practice of Traditional Chinese Medicine in Canada, Canadian Alliance of Regulatory Bodies of TCM Practitioners and Acupuncturists, May 2010.
- Canadian Alliance of Regulatory Bodies of Traditional Chinese Medicine Practitioners and Acupuncturists (CARB-ACOR), Pan-Canadian Standards for Traditional Chinese Medicine Practitioners and Acupuncturists: Performance Indicators and Assessment Blueprints for the Entry-Level Occupational Competencies, Recommended to the Provincial Regulatory Authorities, October 24, 2010.
- Safety Program for Traditional Chinese Medicine Practitioners and Acupuncturists, British Columbia and Ontario, June 2012.
- Jurisprudence Course Handbook Important Legal Principles Practitioners Need to Know, College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario, August 2012.

In the Standards of Practice the term “legislation” refers to both statutes and regulations. In the Standards of Practice there is reference to the Code of Ethics. This refers to the code of ethics for CTCMPAO members (Code of Ethics for Members). It is intended that the Code of Ethics be used in conjunction with the Standards of Practice. Together, these documents provide a model for ensuring safe, effective and ethical professional performance to ensure safe, effective and ethical outcomes for patients.

Under the College’s Standards of Practice R. TCMPs and R. Acs are expected to be:

**Competent**: meaning to have the necessary knowledge, skills and judgement to ensure safe, effective and ethical outcomes for the patient. This means that R. TCMPs and R. Acs must maintain competence
in their practice, must refrain from acting if not competent, and must take appropriate action to address the situation.

**Accountable:** meaning to take responsibility for decisions and actions. This means that R. TCMPs and R. Acs must accept the consequences of their decisions and actions and act on the basis of what they in their clinical judgement, believe is in the best interests of the patient.

**Collaborative:** meaning to work with other members of the health care team to achieve the best possible outcomes for the patient. This means that that R. TCMPs and R. Acs are responsible for communicating with other members of the health care team, and taking appropriate action to address gaps and differences in judgement about care provision.

1. **Legislation, Standards and Ethics**

**Description**

R. TCMPs and R. Acs are members of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario. This ensures that they have met the professional education requirements of the College and that they continue to educate themselves about practical, legal, ethical and other matters pertaining to the profession.

**Standard of Practice (1) - Legislation, Standards and Ethics**

R. TCMPs and R. Acs must understand, and adhere to, the legislation governing the practice of the profession, the Standards of Practice set by the College, the Code of Ethics set by the College and the By-laws.

**Performance Indicators**

R. TCMPs and R. Acs **must:**

a) maintain the knowledge, skills and judgement to perform procedures undertaken in the course of practicing the profession;

b) adhere to all relevant provincial and federal legislation and municipal law and guidelines governing the practice of the profession;

c) adhere to the Standards of Practice set by the College;

d) adhere to the Code of ethics;

e) adhere to all regulations made under the *Traditional Chinese Medicine Act* including:

   I. professional misconduct;
   II. registration; and
III. quality assurance.

2. Diagnosis and Treatment

Description

R. TCMPs and R. Acs are health care professionals who possess a fundamental body of knowledge, skills and judgment following traditional Chinese medicine principles which are directed to effective patient care in the diagnosis and treatment of patients. R. TCMPs and R. Acs use the essential principles of traditional Chinese medicine to assess patients and promote their health, and prevent and treat common disease. Their care is characterized by ethical and safe clinical practice as well as with effective communication in partnership with patients and other health care providers.

R. TCMPs and R. Acs are authorized to perform two controlled acts, which they have been authorized to perform within their scope of practice under the Traditional Chinese Medicine Act. The two controlled acts that R. TCMPs and R. Acs are authorized to perform are:

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

Under the Regulated Health Professions Act, R. TCMPs and R. Acs may delegate the two controlled acts authorized to R. TCMPs and R. Acs under the under the Traditional Chinese Medicine Act provided they comply with the Regulated Health Professions Act, and the professional misconduct regulation made under the Traditional Chinese Medicine Act.

Standard of Practice (2) - Diagnosis and Treatment

R. TCMPs and R. Acs must be able to accurately assess body system disorders through traditional Chinese medicine techniques. R. TCMPs and R. Acs must be proficient in providing treatment using traditional Chinese medicine therapies to promote, maintain or restore health. R. TCMPs and R. Acs must be skilled in the application of acupuncture and must adhere to the World Health Organization (WHO) standard for the location of acupuncture points. R. TCMPs must be able to accurately select and recommend herbal medicines based on the Traditional Chinese Medicine diagnosis and treatment plan and make modifications based on the patient’s physical, medical and health history as necessary.

R. TCMPs and R. Acs must be able to perform the two controlled acts authorized to R. TCMPs and R. Acs as required in the course of engaging in the practice of the profession. They must not perform the authorized acts, or any exempted controlled acts, unless the conditions under the Regulated Health Professions Act, the Traditional Chinese Medicine Act and their respective regulations have been met.
Performance Indicators

R. TCMPs and R. Ac must:

a) perform only those controlled acts that have been authorized, under the legislation;
b) not perform any procedure which may result in serious physical harm, unless that procedure is within the scope of practice of the profession or the R. TCMP and R. Ac is authorized or permitted to do so by legislation;
c) carry out assessment and treatment only with the informed consent of the patient, or the patient’s substitute decision maker;
d) use appropriate aseptic techniques and infection control procedures in the course of examinations and treatment;
e) instruct the patient to remove only the clothing and items that would interfere with the examination or treatment procedures;
f) provide use of appropriate draping materials to cover areas where clothing was removed;
g) explain to the patient when and where the R. TCMP and R. Ac might touch the patient and why;
h) touch the patient in only those areas needed to facilitate the carrying out the procedure;
i) effectively perform a physical assessment of the patient for the purpose of health promotion, diagnosis and/or management that is relevant and accurate.
j) effectively analyse the information to determine a diagnosis and establish an effective treatment plan;
k) adhere to the World Health Organization (WHO) standard for the location of acupuncture points;
l) apply safe and accurate procedures and processes in implementing the treatment plan;
m) account for every needle that is inserted, removed, and disposed of during treatment;
n) initiate emergency response procedures as required if a patient suffers any adverse reaction to a treatment;
o) communicate a traditional Chinese medicine diagnosis identifying a body system disorder as the cause of a person’s symptoms;
p) assess the patient’s condition during the course of the treatment or procedures and respond accordingly;

In addition R. TCMPs must:

q) take into account all precautions and contradictions of the herbs and formulas recommended to the patient;
r) select, recommend and combine herbal medicines based on the Traditional Chinese Medicine diagnosis and treatment plan and make modifications based on the patient’s physical, medical and health history as necessary; and
s) advise patients about the use of herbal treatment including the dosage route of administration, and schedule for administration.
3. **Safe Practice**

**Description**

R. TCMPs and R. Acs assess body system disorders through traditional Chinese Medicine techniques and treatment using traditional Chinese medicine therapies to promote, maintain or restore health. To ensure protection to patients, the general public, members of the health care system, as well as practitioners R. TCMPs and R. Acs endeavor to reduce the risk of harm by engaging in safe practices, and continuing to maintain and upgrade their safe practice skills by referencing agencies such as the CTMPAO and federal and provincial government health ministries.

**Standard of Practice (3) - Safe Practice**

R. TCMPs and R. Acs must have the knowledge, skills and judgement to practise safely by adhering to the relevant provincial and federal legislation and guidelines and manufacturers’ directions pertaining to health and safety. In the event of any unexpected problems or emergencies, R. TCMPs and R. Acs must be competent and prepared to handle the management of the situation.

**Performance Indicators**

R. TCMPs and R. Acs must:

a) observe all relevant municipal, provincial and federal legislation and guidelines pertaining to health and safety, such as the:

i. *Regulated Health Professions Act* and its regulations;
ii. *Traditional Chinese Medicine Act* and its regulations;
iii. *Occupational Health and Safety Act* and its regulations
iv. World Health Organization (WHO) standard for the location of acupuncture points;

b) determine risks and contraindications for acupuncture treatment;

c) determine risks and contraindications for moxibustion treatment;

d) take into account the patient’s physical and emotional limitations, and ensure that the patient will not be expected to perform any task or movement that would cause physical harm;

e) use sterile needle technique to reduce the risk of infections, diseases and transmissions such as Hepatitis B in performing the procedure of acupuncture in compliance with the CTMPAO guidelines pertaining to acupuncture;

f) use appropriate aseptic techniques and infection control procedures in the course of examinations or treatment;
g) protect themselves, their colleagues, staff, other members of the health care team, any other individuals who may be present, as well as any patient, from any communicable and infectious diseases;

h) conduct appropriate maintenance procedures for all equipment and substances to be used in an examination or treatment;

i) take corrective action if the maintenance procedure results are not within acceptable limits;

j) initiate emergency response procedures if a patient suffers any adverse reaction to a treatment or a substance administered orally;

k) initiate emergency response procedures in the event that a patient exhibits abusive or violent behaviour;

l) dispose of expired or contaminated substances or materials in accordance with legislation and all CTMPAO guidelines pertaining to waste management;

In addition R. TCMPs must:

m) determine risks, contraindications and risk of an adverse reaction for treatment with herbals.

4. Communication

Description

R. TCMPs and R. Acs effectively communicate with their patients, families, care givers, other professionals and other important individuals. R. TCMPs and R. Acs recognize that good communication skills are essential for establishing rapport and trust with the patient, formulating an assessment, delivering information, striving for mutual understanding, and facilitating a shared plan of care.

Standard of Practice (4) - Communication

R. TCMPs and R. Acs must be able to develop a trusting and therapeutic relationships with patients. They must have good communication skills to elicit and combine relevant information to assess the patient and develop and implement a treatment plan. R. TCMPs and R. Acs must be able to accurately convey relevant information and explanations to patients, families, colleagues and other professionals.

Performance Indicators

R. TCMPs and R. Acs must:

a) provide clear and understandable information to the patient, or the patient’s substitute decision maker, prior to, during and after treatment, using an interpreter if necessary;

b) give the patient, or the patient’s substitute decision maker, an opportunity to ask questions;
c) carry out examinations or treatment only with the informed consent of the patient, or the patient's substitute decision maker;

d) keep all patient information confidential, except when necessary to facilitate an assessment or treatment of the patient or when legally obliged or allowed to disclose such information;

e) observe all relevant legislation, such as the Health Care Consent Act, and all CTCMPAO guidelines pertaining to consent;

f) observe the Regulated Health Professions Act and all guidelines of the CTCMPAO pertaining to boundaries and the prevention of sexual abuse;

g) use a range of communication skills to develop and maintain effective professional relationships;

h) collaborate with other members of the health care team to promote the best possible outcomes for the patient;

i) use a range of relationship skills to address professional differences that may lead to conflict;

j) provide care to patients regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family status, or disability.

5. **Record Keeping**

**Description**

Creating and maintaining records and reports are essential components of the professional practice of all R. TCMPs and R. Acs as records and reports provide information to other health care professionals about relevant aspects of patient care, treatment and assessment.

**Standard of Practice (5) - Record Keeping**

R. TCMPs and R. Acs must have the knowledge, skills and judgment to create and maintain a daily appointment log, patient files and billing records and other records that attest to the treatment of the patient. R. TCMPs and R. Acs must be proficient in maintaining records that describe workplace and safety procedures that have been carried out. R. TCMPs and R. Acs must be skillful in producing records and reports that are always accurate, complete, legible and timely.

**Performance Indicators**

R. TCMPs and R. Acs must:

a) maintain a written or electronic daily appointment log that outlines the date, name, and the time of the appointment for each respective patient;

b) create and maintain a comprehensive file for each patient in accordance with the record keeping guidelines established by the CTCMPAO;

c) arrange and organize all material in patient records in a manner that allows for easy and prompt retrieval and ensures security and confidentiality;
d) comply with all relevant legislation such as the *Health Care Consent Act* and all CTCMPAO guidelines pertaining to consent;

e) comply with any privacy legislation such as the *Personal Health Information Protection Act* and all CTCMPAO guidelines pertaining to privacy;

f) maintain complete and accurate records related to billing or payment for goods or services provided by the practitioner to the patient in accordance with the record keeping guidelines established by the CTCMPAO;

g) maintain equipment and supply records to make determinations as to the equipment quality, serviceability and operability and take any corrective actions required to meet standards set by legislation, manufactures guidelines and all CTCMPAO guidelines pertaining to equipment;

h) ensure that all electronic and written records are managed according to the principles and guidelines established by the CTCMPAO;

i) implement record retention and destruction processes in compliance with the *RHPA* and all CTCMPAO guidelines pertaining to record retention and destructions;

**In addition R. TCMPs must:**

j) maintain an accurate inventory of herbs to record purchases, supply and prescriptions (TCM) to patients;

k) ensure safe storage, labelling and handling of herbs to guarantee that the herbs will be kept free from contamination and that the herb quality is maintained in compliance with a legislation such as the *Natural Health Products Directorate* and the CTCMPAO policies and guidelines related to the safe management of herbal products;

l) conduct appropriate quality control tests for all substances to be recommended in a treatment plan;

m) take corrective action if the quality control tests are not within acceptable limits;

n) only use herbs before their expiry time or date;

o) ensure that all herbal prescriptions (TCM) are legible, and contain all of the necessary information to allow the prescription (TCM) to be accurately and safely dispensed (TCM), used and tracked.

**Acknowledgements**

Thanks to the College of Medical Radiation Technologists of Ontario for its support and for the use of its materials.