

## ACUPUNCTURE



**Standard of Practice S-017**

**Quality Assurance Committee**

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*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.

**Note: This standard of practice applies to members of CCO when they are providing acupuncture under their chiropractic certificate of registration, and not to members of CCO who may be also members of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario, providing acupuncture services as a traditional Chinese medicine practitioner or acupuncturist.**

### 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

#### Scope of Practice

Members are authorized under Regulation 107/96 of the *Regulated Health Professions Act, 1991 (RHPA)* to perform acupuncture, a procedure performed on tissue below the dermis, in accordance with this standard of practice and within the chiropractic scope of practice. Regulation 107/96 creates a specific exemption for specific regulated health professionals, including chiropractors, to perform the controlled act of a procedure performed on tissue below the dermis, in accordance with the standard of practice and within the scope of practice of the profession.

Therefore, a member may **only** perform the controlled act of performing acupuncture, a procedure below the dermis, as an adjunctive treatment, within the chiropractic scope of practice, and in accordance with this standard of practice.

The chiropractic scope of practice is defined in the *Chiropractic Act 1991*, as follows:

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.

See Standard of Practice S-001: Chiropractic Scope of Practice for further information.

For the purposes of this standard of practice, the performance of dry needling is considered as performing the controlled act of acupuncture, a procedure performed below the dermis, and has the professional responsibilities outlined in Regulation 107/96 and this standard of practice.

### **Titles**

Members who use acupuncture as an adjunctive therapy are reminded that they are restricted from using certain titles and representations to the public as outlined in section 8 of the *Traditional Chinese Medicine Act, 2006*:

**8(1) “No person other than a member (of the College of Traditional Chinese Medicine Practitioners and Acupuncturists) shall use the titles "traditional Chinese medicine practitioner" or "acupuncturist", a variation or abbreviation or an equivalent in another language.”**

**8(2) “No person other than a member shall hold himself or herself out as a person who is qualified to practise in Ontario as a traditional Chinese medicine practitioner or acupuncturist or in a specialty of traditional Chinese medicine.”**

Therefore, members may not make any misrepresentations to the public that they are a traditional Chinese Medicine Practitioner or acupuncturist. Members must clearly communicate to the public, including advertising, signs websites and social media and billing and business practices, that they are a chiropractor who performs acupuncture as an adjunctive treatment, and not an acupuncturist or a member of the College of Traditional Chinese Medicine Practitioners or Acupuncturists.

A member shall consider whether their overall representation of their use of acupuncture as an adjunctive treatment is misleading to a reasonable member of the public. In addition the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario has the jurisdiction

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to address any inappropriate representation of someone who is not a member of their college holding themselves out as a person who is qualified to practise in Ontario as a traditional Chinese medicine practitioner or acupuncturist or in a specialty of traditional Chinese medicine.

For example, CCO considers the use of the titles “acupuncture provider” and “acupuncture clinic” to be a variation of the title “acupuncturist”, contrary to the *Traditional Chinese Medicine Act, 2006*, if the member is also not a member of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario. It would be more accurate for a member to list acupuncture as an adjunctive therapy that is provided, in the context of providing chiropractic care.

### Assessment and Care Related to Acupuncture

A member shall ensure that they are providing acupuncture within the chiropractic scope of practice and in accordance with CCO standards of practice.

In providing acupuncture, a member must perform a chiropractic consultation and examination, communicate a diagnosis or clinical impression within the chiropractic scope of practice, obtain informed consent and deliver a plan of care, which may involve acupuncture as an adjunctive treatment, consistent with the chiropractic scope 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 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.

Members are required to achieve, maintain and be able to demonstrate clinical competency in any diagnostic or therapeutic procedure that they use in practice. As such, members who are authorized to perform acupuncture are required to participate in ongoing continuing education activities in the performance of acupuncture as an adjunctive therapy within the chiropractic scope of practice.

## Billing Practices for Acupuncture as an Adjunctive Treatment

The financial record and invoice for acupuncture must reflect the clinical delivery of acupuncture as an adjunctive treatment. Therefore, the records must reflect that the member performed acupuncture under their certificate of registration as a chiropractor, within the chiropractic scope of practice, and in accordance with this standard of practice as an adjunctive procedure.

## 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.

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

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

1. Introduction to traditional Chinese acupuncture
2. Acupuncture points
  - 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.
3. Applications of acupuncture in modern Western medicine
  - principal clinical conditions in which acupuncture has been shown to be beneficial;
  - 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.
4. Guidelines on safety in acupuncture
5. Treatment techniques
  - general principles;
  - specific clinical conditions.

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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

#### *Health Professions Procedural Code (The Code), Schedule 2 of the Regulation Health Professions Act, 1991*

The QA program is defined in section 1 (1) of the Code as “a program to assure the quality of the practice of the profession and to promote continuing evaluation, competence and improvement among members.”

#### **Objects and Duties of CCO – Section 3 of *the Code***

**Section 3(1):** The College has the following objects:

5. To develop, establish and maintain standards of practice to assure the quality of the practice of the profession
6. to develop, establish and maintain standards of knowledge, skill and programs to promote continuing competence among the members

**Regulation 107/96 of the *RHPA*: Controlled Acts**

**Section 8(2)**

Subject to subsection (4), a person who is a member of a College listed in Column 1 of the Table is exempt from subsection 27(1) of the Act for the purpose of performing acupuncture, a procedure performed on tissue below the dermis, in accordance with the standard of practice and within the scope of practice of the health profession listed in Column 2.

Table

	Column 1	Column 2
1.	College of Chiropractors of Ontario	Chiropractic
2.	College of Chiropractors of Ontario	Chiropractic
3.	College of Massage Therapists of Ontario	Massage Therapy
4.	College of Nurses of Ontario	Nursing
5.	College of Occupational Therapists of Ontario	Occupational Therapy
6.	College of Physiotherapists of Ontario	Physiotherapy
7.	Royal College of Dental Surgeons of Ontario	Dentistry

**Titles**

Members who use acupuncture as an adjunctive therapy are reminded that they are restricted from using certain titles as outlined in section 8(1) of the *Traditional Chinese Medicine Act, 2006*:

**Section 8(1)**

No person other than a member (of the College of Traditional Chinese Medicine Practitioners and Acupuncturists) shall use the titles "traditional Chinese medicine practitioner" or "acupuncturist", a variation or abbreviation or an equivalent in another language.

***Chiropractic Act, 1991***

**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: Chiropractic Scope of Practice, S-003: Professional Portfolio, S-011: Members of More Than One Health Profession, and S-013: Consent.

