Draft regulations commments
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'Attention: Chair,
Chiropractic Board of Australia'
natboards@dhs.vic.gov.au

Dear Chair,
Please consider my comments on the Code of Professional Practice document.

I found the document produced, disappointing and infuriating, it was a chance to shape the profession for the benefit of the public health, a chance to inspire all chiropractors to raise their level of service above that that deserves the title Doctor. Instead it is prejudice of all chiropractor based on the actions of so few. It is also full of contradictory statements, and ambiguous titles lacking definition. I cai see many problems in this document and to say they will be reviewed 3 years is insufficient, 12 months would be more appropriate, prior to being enforce even more so.

I am also disgusted with the amount of time allowed for review, 1 week is insufficient, considering the guidelines say 3 weeks, when really the document requires at least 3 months to read and compile a response that is well referenced with scientific and statistical data.

2.3 Advertising *For the purpose of this code of practice, advertising includes any form of public or private communication that could reasonably be seen as an intention to promote the profession, the individual practitioner or chiropractic practices.*

This prevents Chiropractors from using any scientific evidence to support the advice that has been given. Providing a meta-analysis that states that chronic back pain may take up to X number of weeks to respond to care and even longer to control, could be seen as promoting the profession. Telling someone that I may be able to help them can be seen as promoting myself or my practice.

Also, this definition is not intended to apply to material issued by a

person or organization for the purpose of public health information or as part of a public health program.
Please define "public health information" and "public health program".

Professional obligations
Persons who advertise services should always consider how members of the public will receive their advertising and be mindful that some consumers may have particular vulnerabilities in relation to the advertising and the provision of services.

I can not be expected to be responsible for peoples opinions or preconceived ideas. If I simply put an add in the yellow pages that I am a Chiropractor, there will be people with neck pain, back pain, or head aches that think I can help, because they believe that that is what we do. I stated nothing to the sort but they were vulnerable due to their situation.

5. What is unacceptable advertising?
f). claim that the services provided by a particular regulated health profession are better or safer than others.
And if it is true ie research showing efficacy of chiropractic over other disciplines – do we not have a right to report the truth? Remember that your definition of advertising is "*advertising includes any form of public or private communication that could reasonably be seen as an intention to promote the profession*"

8.12 Financial and commercial dealings
c). not accepting gifts from patients or clients other than tokens of minimal value such as flowers or chocolates and if token gifts are accepted, making a file note or informing a colleague where possible.
Is this meant to be a joke, my CA's and I often receive gifts from many of our satisfied patients, because we are a team. More then half the time I don't know that a gift has been given till then end of shift or even a staff meeting.

What defines minimal value, flowers they can range in price into the hundreds of dollars. Besides who am I to tell my patients not to be generous, this may be part of their healing process. Not accepting gifts

can be considered rude and damage the healing relationship.

d). not becoming involved financially with patients or clients; for example, through loans and investment schemes.
I agree that professional position should not be used as leverage. This prohibits all business relationships with any friend or family member whom you may wish to buy an investment property or another totally separate business.

9.2 Practitioner health
Good practice involves:
a).attending a general practitioner or other appropriate practitioner to meet health needs
c) .understanding the principles of immunisation against communicable diseases and being immunised against relevant communicable diseases
What ever happened to Autonomy of healthcare. I may have religious or cultural reasons for not doing either of the above. Are you telling me I can't be registered as a healthcare practitioner, if I am not immunised?

2.7.3 The findings of diagnostic tools/ tests should not be used in marketing and advertising, as members of the public may be misled as to the value of those findings in relation to their own situation.

Your definition of advertising states "*For the purpose of this code of practice, advertising includes any form of public or private communication".* There fore discussion of any diagnostic test or procedure or the results of would be advertising and could be misleading.

2.10.7 In planning chiropractic management of children, practitioners should consider:
frequent chiropractic checks or treatment of children without symptoms or signs has not been supported by current available evidence and is currently not recommended, except for assessing developmental milestones. Should a parent elect to have their child undergo regular chiropractic examination or treatment in the absence

of any clinical justification then it is the responsibility of the practitioner to provide the parent with a balanced view of the factual evidence relating to such examination or treatment as part of the informed consent process;

Define any clinical justification. Define balanced view of factual evidence, if I find 50 papers supporting what I am recommending do I need to search out 50 opposed. And just because one paper, organization, or fraternity believes one paradigm of health, why do I have to subscribe to it, lord know that they aren't out there showing that we are just as good as them.

2.11 Duration and frequency of care

2.11.1 These frequency and duration of care guidelines are provided to assist chiropractors in their clinical decision-making. The primary goal of chiropractic care is to promote and optimise good health and function, maintain it, and prevent the recurrence of injury and dysfunction.

Who did you consult with to get this definition, not the CAA or WFC.

5.1 Spinal postural assessment and public place marketing

5.1.2Practitioners should not tout for business. Business cards may be provided to participants upon request, but neither obtaining of contact information from participants nor the making of appointments at the time of an assessment is permitted. Practitioners should not make unsolicited contact with participants subsequent to an assessment.

My office provides many spinal screenings a year and we hear over and over again this is such a great service. It would be unethical for me to inform someone that they may have a problem then not offer them a way for it to be followed up and investigated. Making this easy for them not only makes sense, but for some will be the only way they ever have it investigated before it hits the crisis stage. They are of free will they can refuse if they want to. To not be able to offer to call them if they like, is poor service. This rule verges on being anti-competitive in behavior, if it was brought forth by any other board it would be. It is an example of all Chiropractors being brushed with the same brush, based

on the actions of a very small minority.

5.1.4 No fee is permitted to be charged for such assessments; however participants may make donations to a charitable organization nominated by the practitioner.
A chiropractor should be permitted to conduct his/her business and charge a fee. What is your justification for saying that chiropractors must work for nothing by making the charging of a fee unprofessional conduct?
Please consider the ramifications of your actions.

Further more

No other National Professional Board has seen fit to include such broad-ranging restrictions and defining guidelines on their specific professions as has the Chiropractors Board of Australia

Every other National Board has left their professions open to regulation under the terms of the cross professional code of conduct which are fair and general.

Rather than providing the National Board with a broad brush to guide the profession such proscriptive guidelines restrict its ability to deal with emerging problems and it will find itself caught up in the merry-go-round of adding more and more restrictions to try to catch up with the emerging complaint trends.

The Chiropractors Board of Australia should have the confidence in its complaints handling mechanisms and procedures to deal with emerging trends by intelligent use of the cross - professional code. This can be kept up to date by the extensive use of peer reviewers in the complaints handling process.

The inclusion of this proscriptive device reflects a lack of confidence in its own procedures and abilities.

The Chiropractors Board of Australia appears to have relied heavily on pre-existing guidelines that were developed in an attempt to control historical local complaint trends.

It is unreasonable for the Chiropractors Board of Australia to inflict punitive guidelines on the entire profession assuming that they need "further guidance"

In Australia's largest jurisdiction; NSW with over 1400 chiropractors, a simple code of conduct in a similar vein to the cross – professional code has sufficed to guide the profession to a very low number of complaints for over thirty years.

The complaints handling procedures in NSW begin with talks to students, talks to the profession at association meetings, items in the bulletin about matters that have arisen and the provision of advice and recommendations to chiropractors who have been found to have developed management procedures that have caused a complaint.

The National Draft guidelines have been adopted from those developed defensively in specific jurisdictions to attempt to stop the particular activities of a small number of individuals in those jurisdictions at a particular time.

Ryan Seaman, Chiropractor

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