20th May 2010

Attention: Chair, Chiropractic Board of Australia
natboards@dhs.vic.gov.au

Submission to the Chiropractic Board of Australia
Consultation Draft Code of Conduct for Chiropractors dated May7th 2010

I recognize that the board has a difficult and important job in protecting the public and giving clear guidance to the profession and that drafting a Code of Conduct that is clear enough to give guidance while not being overly prescriptive is challenging. However I feel that the Draft Code, as it stands now, has significant deficiencies and should not be enacted as it stands.
I have outlined my concerns following in the order in which they appear in the Draft and offer suggestions as to how the guidelines could be improved.

1. **Definitions**

The definitions chosen for "Patient", "Providing care" and "Practice" are not those used broadly in the profession or in common use. These definitions should be amended.

'Patient' includes client, health consumer or carer".
Comment: In the context of chiropractic services there are many roles assumed ranging from patient (sick) to client, customer, consumer etc at higher levels of lifestyle care.
I suggest that this definition should be revised.

"**Providing Care"**
Comment: The definition here seems to cover a very broad range of interactions that a chiropractor could have. Arguably, when I act as coach's assistant to my son's football team, which contributes to their "physical and mental health" then the code would apply to me.
I suggest that this definition should apply to the actual provision of care that a chiropractor provides.

"Practice"
Comment: This definition is broader than is needed. If this is a code to protect the public it should give guidance in the clinical environment.
I suggest that this definition should describe the actual clinical practice of chiropractic.

2 Introduction
1.1 Use of the Code

"… within an ethical framework"
Comment: This statement is insulting in that it implies that chiropractors are not ethical.
I suggest that this phrase should be removed.

1.3 Australia and Australian health care

Comment: This section is a statement of the obvious, is politically correct but does not add anything to the boards' charter
I suggest that this section be deleted

1.4 Substitute decision makers

Comment: This section is redundant
I suggest that this section be deleted

2 Providing good care

2.1 Introduction

b) "ensuring that the diagnosis is relevant, justifiable…"
Comment: Diagnosis is relevant to symptomatic treatment however it is not to asymptomatic care.
I suggest that this section should refer to diagnosis/analysis/clinical assessment or similar.

2.2 Good care

h) "providing treatment options based on the best available information"
Comment: "treatment" is one level of care offered by chiropractors. The term best is also not defined- if guidelines are to be useful they need to be clear and this lacks clarity.
I suggest that treatment should be changed to care and that "best" should be deleted"

j) "taking steps to alleviate the symptoms and distress of patients, whether or not a cure is possible".
Comment: This is fundamentally incompatible with the traditional chiropractic principles and should be deleted.
I suggest that this sub-section should be deleted

n) "ensuring that the chiropractor's personal views do not affect the care of a patient adversely"
Comment: The presumption that chiropractors would let their personal views affect the care of a patient adversely is insulting and patronising and should be deleted.
I suggest that this sub-section should be deleted

o). "practicing in accordance with the current and accepted evidence base of the chiropractic profession, including clinical outcomes"

Comment: Sackett defines EBM as using the best available evidence, clinical experience and patient preference to inform decision making. This sub-section shows the bias of the writers in promoting the use of evidence in isolation of the clinicians experience and the patient's preference. This is not patient centred practice, evidence informed practice or ethical. It is also unclear in that it doesn't define who the evidence base should be "accepted" by.
I suggest that this sub-section should be deleted

3.7 Children and young people
This whole section could apply to any other member of the community.
I suggest that this section should be deleted

b) …clinically relevant information for chiropractic management of certain conditions in children"
Comment: This is unclear- what conditions does this relate to and why is this specific to children?
I suggest that this subsection should be deleted.

4.2 Use of diagnostic tools, tests and procedures
d). when using tools, tests and procedures for diagnostic and prognostic purposes these should be for conditions where there are demonstrated acceptable levels of reliability and validity"
Comment: This is unclear. It doesn't give clear advice as to what the acceptable levels of reliability and validity are or who is to judge them. This would leave chiropractors open to action if they chose to use almost any of the orthopaedic or neurological tests taught at all chiropractic colleges. I think this is a worthwhile aim for all health care but currently almost impossible to achieve.
I suggest that this subsection should be deleted.

5 Working with other practitioners

5.1 Respect for colleagues and other practitioners
a). communicating clearly, effectively, respectfully and promptly with colleagues and other practitioners caring for the patient"
Comment: As written this could be construed as a requirement to communicate in all situations which would create a massive amount of work for the chiropractor.
I suggest that this sub-section should read: communicating clearly, effectively, respectfully and promptly with colleagues and other practitioners caring for the patient **when clinically indicated.**

5.4 Coordinating care with other practitioners

a) "communicating all relevant information in a timely way"
Comment: See 5.1 above

I suggest that this sub-section should be deleted.

9.4 Health records
a) "keeping up-to-date and legible records that report relevant details of clinical history, clinical findings and determinations, investigations, information given to patients, medication and other management"
Comment: This is impractical for a chiropractor to constantly record (up-to-date) details of all information and medication given to a person from any source. Any information and medication that a patient has received that the chiropractor doesn't know about or hasn't recorded will be grounds for board action against the chiropractor.

9.12 Financial and commercial dealings
c) "not accepting gifts…"
Comment: Notifying a colleague of the receipt of a gift is an unnecessary impost
I suggest that this sub-section be deleted

10.2 Chiropractor health
a) "attending an appropriate practitioner to meet health needs"
Comment: This is patronising and unclear- patient centred care would dictate that, when I am a "patient" who is appropriate is up to me.
I suggest that this sub-section should be deleted

c) "understanding the principles of immunization against communicable diseases"
Comment: I can't imagine there is a chiropractor who doesn't understand the principles of immunity. If this section is intended to imply that chiropractors should support vaccination against communicable diseases then it is unclear.
I suggest that this sub-section should be deleted

d) "for chiropractors who are able to prescribe…"
Comment: Chiropractors aren't able to prescribe.
I suggest that this sub-section be deleted

Appendix 1
Guidelines in relation to Spinal Screenings

c) providing the participant with a business card at their request, but should not include obtaining contact information from participants or the making of appointments at the time of the screening"
Comment: This is an unnecessary intrusion into the relationship between the chiropractor and a prospective patient. It is also contrary to the principles of patient centred care- if the patient wishes to make an appointment why should this be prohibited?
I suggest that this sub-section be deleted

I respectfully submit that the Chiropractic Board of Australia amends the revised code to reflect the changes I have suggested.
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Yours sincerely,

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