Submission to the chiropractic Board of Australia with regard to the consultation draft code of conduct for Chiropractors

Released by the Chiropractic Board of Australia on May 7th 2010

17th May 19, 2010

Attention: Chair, Chiropractic Board of Australia.

I again find myself compelled to write to you with respect to the latest draft version of the code of conduct for chiropractors. I appreciate the immense effort and undertaking involved in trying to prepare such a significant document in such a limited time frame, I have high regard for the Board members and their dedication as I certainly don't know how they find the time to practice and be so involved in this mammoth task. I still however, have some concerns with aspects of the draft code that I feel are offensive and demeaning to chiropractors and the chiropractic profession. I believe that these guidelines will limit the profession and the capacity of many chiropractors to provide the high level health care that they provide now, and especially into the future. Many of the guidelines are duplicitous, and overly proscriptive. Given that such regulatory documents will no doubt endure revisions , additions, addendums, appendixes, subsections and modifications over the ensuing years, this is an opportunity to create a code of conduct that will hold Chiropractors to a high level, without reducing the scope of the profession (just so that we fit into someone else's model of health care). If the time frame is too tight I would rather see very basic document put forward (that did not belittle or restrict the profession) and that, as mentioned above, could be refined with proper consultation in due course. I believe that the National Board has a wonderful role to play in helping chiropractic to grow and deliver an empowering health care model to Australians.

I have read the submission from Dr Peter Cowie, and whilst he is far more logical than I in his ability to present his concerns categorically, I believe he quite succinctly states many of the concerns that I have with this document. I submit that each of these recommendations be adopted. The submission from Dr Mark Postles also raises many concerns for me and, as I've already stated I believe the deletion of many subsections will give a more general document and allow the profession scope for growth whilst still allowing the board to ensure that Chiropractors maintain a high level of professional competence and conduct. I also submit that these recommendations are of merit and should be adopted.

My more specific concerns, whilst not limited to, lie with the following:

The definitions used are confusing.

The continual references to *"within an ethical framework"* and *"ethical and trustworthy"*, I find to be demeaning and paints a poor picture of the profession.

Many of the points under section 2.2 are common sense and not necessary:

2.2 b. is obsolete as this is covered in section 8.2.

2.2 o. Must be deleted or amended to "practice in accordance with what is currently accepted by peers" The evidenced based restrictions would prohibit the profession significantly and only serves those who prefer the medical model of health.

The notion that chiropractors provide *"unnecessary services"* in section 2.6d is insulting and demeaning and should be removed.

Section 3.2 parts a,b,c,d on page 5 is not necessary and is only relevant if the board expects that patients will be required to read the code.

Section 3.3 d This is confusing??? Is this just in the chiropractic context? I am a chiropractor, not a surgeon or a dentist, so I cannot speak to their areas of expertise Let alone *"possible positive or adverse outcomes"*, and it would be "unethical" to do so. This should be omitted as I believe the intent of this section is already covered under Sections 2.2 d and k

I wasn't aware that chiropractic involved gathering of genetic information (section 3.4e), this clause should be omitted

Section 3.7 should be deleted as it is covered under the *effective communication, informed consent* and *good practice* sections of the Code. To imply that Chiropractors would provide substandard care to any specific group of society, be it children, the elderly, migrants etc is demeaning. If the board wished to nominate an *"age of consent"* to clarify the informed consent confusion of 3.7d, then just state it.

In fact without being specific I feel that a lot of section 3 is not necessary as it is already summed up by the first four words in section 2.2d Good Care: … *"practicing patient-centered care"*. Again, as I stated in my opening discussions would urge the Board to adopt a more succinct/ minimalist approach to achieve their intent.

I again feel confused by the statement in section 6.1. I have always felt that the "Health care system" in australia (i.e the medical system) has dictated how IT will use chiropractic, I have never felt that chiropractic is part of the "health care system" and more importantly, my patients would agree that they feel that chiropractic is not part of the health care system, it is something they do themselves to take responsibility for their own health.

Section 6.4 should be deleted. As far as I am aware there is no "evidence base" for chiropractic as a method for disease control (guess I was sick that day at school). Unless this is a typo and should read "Dis-ease prevention and control" in which case this would make some sense.

I don't believe section 9.11d and e are relevant to chiropractic. They should be omitted.

I question the relevance of section 10.2 c. If this is to imply that Chiropractors should support mass vaccination programs, then I strongly object! I feel this would breach section 1.2 of this code (last paragraph) *"Chiropractors should be committed to safety and quality in health care."* In fact Section 10.2 should be deleted. Most of this is either implied elsewhere, unnecessary or common sense and needn't be regulated.

I respectfully submit that the Chiropractic board of Australia opt for a far simpler generalized code (as other professions are doing) or that the code is amended to reflect the concerns of myself (as listed above), and my aforementioned peers.

Yours sincerely,

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P.S. I ask that the board consider this submission is also representative of the opinions of my business partner and wife, Victoria Bartram BHsc.M.Chiro (chiropractor) who shares these concerns and contributed to this submission.