“Attention”, Chair, Chiropractic Board of Australia

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Submission to the Chiropractic Board of Australia.

Regarding the Consultation Draft Code of conduct for Chiropractors

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

Douglas Hart DC

20 May 2010

Because this is an historical document there will be no easy pathway to change once it becomes accepted legislation. I appreciate the work by the board on this re-draft and the effort entailed in making it available for further discussion with limited time resource. I do appreciate that the board members are also chiropractors like me, but have made themselves resolutely available to this purpose in their own time. Thanks for that commitment!

I have read the revised code and also some of the submissions made to the Board regarding this draft code. I have also left myself short of time to give credence to a serious submission of my own so have decided to submit some of my opinions and to support the opinions of others.

I note that this code incorporates the Code of Conduct and Code and Practice for chiropractors in Australia from the original Consultation Paper and this has resulted in reduction of the document size by approximately half. This is to be commended and I would welcome even further reduction in the document wherever possible.

- My initial observation is that compared to other Codes of Conduct this is considerably longer than the Physiotherapy, Dental or the Osteopathy Codes of Conduct. Why are we putting such limitations on ourselves? The profession should not have to accept guidelines more onerous than osteopaths or physiotherapists.

- There are still phrases demeaning to the profession in the document that can be removed without changing the intent of the Code.

- The document is still overly proscriptive and treats chiropractors with disdain and an underlying political agenda appears to undermine the document (although somewhat attenuated from the first draft).

- “Evidence based practice” is extremely difficult and limiting to most of the profession. It provides no room for growth for without people of vision developing and expanding the knowledge base what would researchers have to explore to provide the evidence? However I could live with practicing “Best Evidence” if it were included in the Code.

- Chiropractic has never been included in the health care system so why include “Section 6.2” now? Wait until we are included!
- Treatments in emergencies are best handled by paramedics and I would find myself inadequately prepared for anything but First-Aid. (Perhaps this needs further definition).
- Understanding the principles of immunization is not appropriate in this Code.
- Radiography is not appropriate in this document, is not in the Medical Code and regardless is controlled by state government legislation.

The board should adopt a minimalist approach to the code especially considering its awareness of the limited time available to prepare the final document. I would favour a broadly generic structure as adopted by the osteopathic and physiotherapy boards.

I also endorse the submissions by Drs Peter Cowie and Mark Postles who have spent considerable effort to objectively critique the Consultation Draft Code of Conduct for Chiropractors. Please seriously consider their submissions when preparing the final Draft Code.

Sincerely

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