



College of
TRADITIONAL
CHINESE MEDICINE
PRACTITIONERS +
ACUPUNCTURISTS
of British Columbia

900-200 Granville Street
Vancouver, BC, V6C 1S4
ctcma.bc.ca

T (604) 742-6563
Toll Free 1-855-742-6563
F (604) 357-1963
E info@ctcma.bc.ca

Practice Standard on Ethical Practice and Professional Accountability

(Draft Version –Last Edited 2022-10-07)

Practice Standard of the College of Traditional Chinese Medicine Practitioners & Acupuncturists of British Columbia (the “College”) set out minimum expectations for the professional conduct of TCM professionals practising in British Columbia. Together with the *Jurisprudence Handbook* and relevant legislation and case law, they will be used by the College and its Committees when considering a practitioner’s practice or conduct.

Within the Practice Standard, the term ‘must’ is used to indicate a College requirement and the term ‘advised’ is used to indicate that the practitioner can use reasonable discretion when applying this expectation to practice.

Preamble

This Practice Standard is founded on the fundamental principles and values of medical ethics: compassion, beneficence, non-maleficence, respect for persons, justice, and accountability.

It is the responsibility of each CTCMA practitioner to be familiar and strictly comply with the Bylaws, including **Schedule A Code of Ethics**¹ and **Schedule B Standards of Practice**². Practitioners are also expected to be familiar with the CTCMA Jurisprudence Handbook and to comply with the BC Human Rights Code³. This practice standard is intended to be read in conjunction with, and not be a substitute for, these other documents and statutory requirements.

Ethical Practice and Professional Accountability recognizes the full scope of TCM practice accountabilities extend beyond the provision of direct patient care to the professional and administrative activities, which support that care. This practice standard applies to clinical patient care situations as well as to other professional interactions.

¹ The Code of Ethics deals with the ethical obligations of practitioners. These ethical principles include being honest at all times, respecting the confidentiality of a patient, treating clients with sensitivity, maintaining one’s competence and allowing patients to make informed choices as to their health care.

² Practice standards deal with ways in which to practise safely, effectively and professionally.

³ [BC Human Rights Code](#) ensures protection for individuals who are actual or perceived members of certain protected groups. Such groups are classified by characteristics or protected grounds and include race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, and age.

Standards

General Principle

1. The practitioner must act in their patients' best interests.

In doing so, the practitioner must strive to create and foster an environment in which the rights, autonomy, dignity and diversity of all patients, or those seeking to become patients, are respected.

Ethics

2. The practitioner must:
 - a. make the patient the primary concern in providing care;
 - b. provide care in a manner that preserves and protects patient dignity;
 - c. demonstrate honesty and integrity;
 - d. clearly and accurately represent self with respect to name, title and role;
 - e. protect patient privacy and confidentiality;
 - f. recognize and respect the patient's right to be informed and make informed choices;
 - g. maintain respectful communication in all professional interactions;
 - h. treat colleagues, students and other health care workers in a respectful manner and address concerns related to disrespectful behaviour in the workplace;
 - i. recognize and respect the contribution of others on the health care team and work collaboratively with them;
 - j. identify the effect of one's own values, beliefs and experiences in carrying out clinical activities;
 - k. recognize potential conflicts of interest and takes action to prevent or resolve potential or actual conflicts of interest;
 - l. identify ethical issues and take action to resolve them, consulting appropriate body or persons where appropriate; and
 - m. initiate, maintain and terminate practitioner-patient relationships in an appropriate manner.

Accountability

3. The practitioner must:
 - a. adhere to all applicable laws, regulations and standards governing the practice of the profession;
 - b. ensure they function within the limits of their own level of competence, within the legally recognized scope of practice and in compliance with all relevant legislation;
 - c. assess their own practice and undertakes activities to improve and enhance practice and meet identified learning goals on an ongoing basis;
 - d. take action to promote the provision of safe, appropriate and ethical care to patients;
 - e. maintain current and proper registration while engaged in practice;
 - f. maintain their own physical, psychological and emotional fitness to practice; and
 - g. understand the role of the regulatory body and the relationship of the regulatory body to one's own practice.
4. The practitioner must take responsibility for their own
 - a. clinical practice and the patient care that they provide, including the assessment, diagnosis, treatment, advice given and referral of the patient.
 - b. professional conduct.

5. The practitioner must take responsibility for the following:
 - a. all non-regulated staff supervised by the practitioner by (if applicable):
 - i. setting appropriate roles and responsibilities;
 - ii. ensuring appropriate qualifications; and
 - iii. overseeing performance and providing adequate supervision;
 - b. all regulated staff participating in the practice by ensuring (if applicable):
 - i. they have appropriate qualifications; and
 - ii. they are engaging in effective collaboration in a team-based setting;
 - c. billing for clinical practice;
 - d. advertising and promotion of services related to their practice;
 - e. quality assurance and quality improvements;
 - f. clinical record documentation and management;
 - g. infection prevention and control; and
 - h. premises, equipment, furnishings, or other property (if applicable).

While some tasks that do not involve clinical judgement in a clinical practice may be delegated to a non-practitioner, CTCMA will hold the practitioner ultimately accountable for all aspects of care provided in their clinical practice. The practitioner is responsible for ensuring their staff have sufficient training and experience to provide delegated tasks in the clinical practice.

Adapted from and thanks to:

BC College of Nurses and Midwives

- [Professional Responsibility and Accountability \(bccnm.ca\)](http://bccnm.ca)
- [Ethical Practice \(bccnm.ca\)](http://bccnm.ca)

College of Physicians and Surgeons of Ontario

- [CPSO - Professional Obligations and Human Rights](http://cpso.org)

College of Physicians & Surgeons of Alberta

- [Responsibility for a Medical Practice](http://cpsa.ca)

Resources

College of Traditional Chinese Medicine Practitioners & Acupuncturists of British Columbia

- [TCM Bylaws – CTCMA](#) (Schedule A Code of Ethics and Schedule B Standards of Practice)
- [Jurisprudence Handbook](#)

Relevant Legislation

- [Human Rights Code - BC Laws](#)