

The Code of Ethics for Members

The Code of Ethics for Members sets out guidelines for ethical acupuncture, traditional Chinese medicine herbology and traditional Chinese medicine practice. The Code is based on a set of core values, which Members must uphold in their relationships with their clients, members of their own profession, other health care providers, and the public.

Members are professionals who act in a manner that enhances the reputation of, and inspires public confidence in the profession. They have a responsibility to follow this code of ethics, and to keep informed about the laws and developments in professional standards that affect ethical health care practice.

Health and well-being

Responsibility to clients

Members hold the health and well-being of their clients as a primary responsibility.

Members provide care within their scope of practice to assist their clients to achieve their optimum level of health at all stages in life.

Members seek additional information or knowledge and refer the client to another health care provider, or when aspects of the care required are beyond their level of competence.

Responsibility to the public

Members address institutional, social and political factors influencing health and health care in ways that are consistent with their professional role and responsibilities.

Members provide the best care circumstances permit even when the need arises in an emergency.

Members participate, to the best of their abilities in research and other activities that contribute to the ongoing development of acupuncture and traditional Chinese medicine knowledge.

Responsibility to other health care providers

Members respect and value the knowledge and skills of other health care providers and cooperate with others so that maximum health benefits to their clients can be realized.

Choice

Responsibility to clients

Members fully inform their clients about the effects and risks of treatment, and of the scope and limitations they are entitled to practise.

Members ensure that care is authorized by informed consent and practice within relevant law governing consent and choice.

Members find out their clients' health needs and values and help them to obtain appropriate information about their care and the services available to them.

Members involve clients in health planning and health care decision making, in order to promote their clients self determination and ability to act on their own behalf in meeting their health care needs.

Responsibility to clients of diminished capacity

Members involve clients of diminished competence in decision-making to the extent that those clients are capable.

Members seek to obtain consent for care from a substitute decision-maker when clients lack the capacity to make decisions about their care, did not make their wishes known prior to becoming incompetent, or for any reason it is unclear what the client would have wanted in a particular circumstance. When prior wishes of an incompetent client are not known or are unclear, care decisions must be in the best interest of the client and based on what the client would want, as far as is known.

Respect

Responsibility to the client

Members are sensitive to, and respectful of the client's individual needs, values, dignity, and choices.

Members do not exploit clients' vulnerabilities for their own interests or gain, whether sexual, emotional, social, political, financial, or any other way.

Members respect the privacy of clients when care is given.

Members protect the client's confidentiality, and the confidentiality of their health care information.

Responsibility to the public and members of the profession

Members act in a manner that is respectful of other Members as well as the practice of acupuncture and traditional Chinese herbology and traditional Chinese medicine.

Fairness

Members apply and promote principles of equity and fairness to assist clients in receiving unbiased treatment and a share of health services and resources proportionate to their needs.

Accountability

Responsibility to the client

Members practise only while their ability to do so is unimpaired.

Members do not compromise care for reasons of personal or institutional expedience.

Members strive to ensure that their clients receive and understand complete and accurate information about their treatment.

Members take preventive as well as corrective action to protect clients from unsafe, incompetent or unethical care.

Members whether they are engaged in clinical, administrative, research, or educational endeavors have professional responsibilities and accountabilities toward safeguarding the quality of care their clients receive.

Responsibility to the profession

Members acquire new skills and knowledge in their area of practice on a continuing basis, as necessary for the provision of safe, competent and ethical care.

Responsibility to other health care providers

Members refer only to other health service providers whom they do not suspect of unethical conduct or incompetent or unsafe care.

Responsibility to the public

Members represent their qualifications honestly, clearly and in a way that is not misleading to the public, other professionals and to their clients.

Members provide information to the public about acupuncture and traditional Chinese herbology and traditional Chinese medicine that is fair, accurate, and objective.

Practice environments conducive to safe, competent and ethical care

Responsibilities to the client and members of the health care team:

Members establish and promote health care environments that are conducive to safe, competent, ethical practice and to the health and well being of clients and others in the setting.

Members share their knowledge with any members of a health team with whom they should work, for the benefit of clients.

Responsibilities to other Members;

Members provide responsible and respectful mentoring and guidance for the professional development of students of acupuncture and traditional Chinese herbology and traditional Chinese medicine and other Members.

Responsibilities to persons under supervision;

Members assume full responsibility for all the care they provide or delegate to persons under their supervision.

PTCMAAS Complaint Policy Guidelines

(NOTE: This policy may and will be reviewed, changed, and updated at the discretion of the Board members of the PTCMAAS at any time).

I) CONFIDENTIALITY & RECORDS:

*ALL complaints and complaint files will be kept confidential to the Board members and its designates, unless other arrangements are made that are acceptable to all parties, or are compelled by law. The Board's decision will be shared with the complainant and the defendant.

*All Initial complaints will be kept confidential unless further investigation is needed/ required.

*All complaints will be filed and kept on record for 10 years.

*All reasonable efforts will be made to address complaints within 60 days.

II) COMPLAINT PROCESS:

Board members will take into consideration all information provided via complaint form filled out IN FULL from the complaine. Additionally, the Board will provide the opportunity for each party involved to speak on their behalf and provide individual information and circumstances to the Board. The Board will hear both parties and compare and assess information provided in a respectful and fair manner as a means to arrive at a fair and professional conclusion. The Board will ultimately decide what further action is appropriate depending on the incident itself, the severity, and the overall nature of the complaint being reviewed. If numerous complaints are made against one individual, the Board will review, discuss, and vote on the member in question and their ability to remain a practicing member of the PTCMAAS. If the Board finds that one member has had numerous incidents/ complaints made against them of the same nature or otherwise, whether it be sexual, negligent, unprofessional or unbecoming, violating confidentiality (HIPPA), etc, they will be voted out as a member of the PTCMAAS, and will not be eligible for membership or membership renewal going forward.

III) OUTCOMES:

1) The complaint is found to be without merit. No action is taken and no discipline is set.

2) Investigation by Board Members is held and discussed, ultimately leading to disciplinary

action outlined by a 3 Tier system that is voted on by all Board members. (See Section IV).

VI) THREE TIER DISCIPLINARY SYSTEM:

First |Level Discipline- The member in question is formally reprimanded and given a written warning. The complaint and warning will be kept on file. If the member is brought to the attention of the Board once again, or another complaint is made and

found with merit, an immediate suspension may be warranted.

Second Level Discipline- The member in question is issued a suspension of membership for a period of time to be determined by the Board, depending on individual factors surrounding the complaint made against them. The member may or may not be able to re- apply as a member of the association after a to-be-determined period of time under the decision of the Board members.

Third Level Discipline- The member in question is expelled from the association and may not apply for renewal of membership to the association. It should be noted that the Board reserves the right and discretion to dismiss a member in question at any time as a means to protect the integrity and professional standing of the PTCMAAS.

*If you have any further questions or concerns about these guidelines, or any other questions regarding complaints and the disciplinary process, please do not hesitate to contact us via email.

Thank You.

Sincerely, Board Members of the PTCMAAS

[1]CTCMA gave permission to PTCMAAS on June 4, 2015 to use their Code of Ethics, CTCMA Bylaws Schedule A, March 13, 2014. CTCMA neither endorses nor assumes any responsibility for PTCMAAS's use of this Code of Ethics. This document is the entire CTCMA code with three minor changes:

1. The term "Registrants" is changed to "Members".
2. In section 1.a) iii., the phrase "in accordance with the requirements of the regulation" is deleted as this refers to the B.C. regulation.
3. In section 1.b) iii. the sentence "Members participating in research observe College sanctioned guidelines for ethical research" is deleted as this refers to the B.C. College guidelines.