

**Registrant Information Manual for
B.C. Chiropractors**

April 20, 2019

Welcome

Whether you are a new graduate or have recently relocated your practice to British Columbia, it is our pleasure to welcome you to BC and to the College of Chiropractors of British Columbia (CCBC).

Setting up a practice can be a difficult, challenging and sometimes daunting task. This manual will assist you to understand the rules and regulations applicable to the practice of chiropractic in BC. This is not intended to provide practice management or business information as those are outside the College mandates and objective.

The Chiropractic profession was first legislated in BC in 1934. Subsequent BC legislation including Workers Compensation (WorkSafe BC), Medical Services Plan, ICBC and other government authorities reference health services from chiropractic doctors. The Chiropractic board of the first statutory agency set standards for education, registration, and practice for chiropractic doctors.

During the years 1934 and 2009 government made periodic amendments to legislation in keeping with the administration of health services for British Columbians. In 1995 the College of Chiropractors began its participation with the submissions and public hearing of the Health Professions Council as part of government's review and reform of health legislation.

Effective March 01, 2009 the College of Chiropractors of BC (CCBC) transitioned from the original Chiropractors Act of 1934 to a College under the Health Professions Act.

This process is intended to improve the regulatory role and responsibilities of the College and its provision of health services to British Columbians.

The CCBC's mission is to serve and protect the public, and govern the delivery of chiropractic health care by:

- (i) Ensuring the highest professional standards;
- (ii) Advancing continued education and research;
- and (iii) Promoting and enhancing collaborative relationships..

Inside this Registrant Information Manual for BC Chiropractors you will find information and links to the various Acts, Regulations, Rules and Handbooks that govern you and your practice.

Please familiarize yourself with them fully. Should you have any questions do not hesitate to contact the College office for assistance.

In addition to this manual, there are rules and regulations related to business operations, such as license, taxes, payroll, Canada Revenue, WorkSafeBC and many more, which are not administered or under the direction of the CCBC. Accountants, lawyers and professional associations should be able to assist you with these.

Again, welcome to the CCBC and we wish you success in your practice.

Dr. Johnny Suchdev
Chair, CCBC Board

Ms. Michelle Da Roza
Registrar, CCBC

For questions and addition information, please contact Dr. Douglas Wright, Deputy Registrar deputyregistrar@chirobc.com

Note: For navigating the Manual, open the Bookmarks tab in your pdf reader program.

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Part A: Introduction – using this manual

This manual is intended to assist BC chiropractors in navigating the various rules and regulations of the College with quick access to various aspects of practice that registrants often seek advice. This manual is not intended to replace the full rules and regulations.

References throughout this manual will be made to the rules and regulations along with advice and explanations. Each College registrant should be familiar with all rules and regulations and recognize that their professional mission is similar to the College's, to protect the public by acting in an ethical and professional manner at all times.

The manual is intended as a guide for standards, limits and conditions for the practice of chiropractic and standards of professional ethics. It is not a comprehensive code. Simply because a duty or right may not be specifically considered in the manual does not preclude its existence, or the possibility that it might be enforced by the Inquiry Committee or the Discipline Committee. It is always open to those Committees to decide on a case-by-case basis what constitutes professional misconduct, incompetence or practising beyond the scope of chiropractic.

Further, the Board anticipates that aspects of professional ethics and conduct and scope of practice will continue to require clarification as the profession evolves. Additions and amendments to the manual may be published and distributed from time to time.

Lastly, registrants are reminded of their obligation to know and abide by the Health Professions Act (the HPA), the Chiropractic Regulation, the CCBC Bylaws and Professional Conduct Handbook along with other legislation that governs the practice of chiropractic in British Columbia.

Part B: The College of Chiropractors of BC (the CCBC)

1. CCBC Overview:

The College of Chiropractors of British Columbia (the CCBC) is the regulatory body that licenses chiropractors in our province and sets standards of practice to protect the public.

The mandate of a Health Professions College is set out in the Health Professions Act Section 16 (1):

1. It is the duty of a college at all times
 - a. to serve and protect the public, and
 - b. to exercise its powers and discharge its responsibilities under all enactments in the public interest.

The College Mission statement is:

We serve and protect the public, and govern the delivery of chiropractic health care by:

- Ensuring the highest professional standards;
- Advancing continued education and research; and
- Promoting and enhancing collaborative relationships.

The CCBC Board is composed of four appointed Board Members and eight elected Board Members, all of whom are accountable to the College.

Election of Directors are held annually. Nominations procedures are found in the Bylaws.

2. College Committees

If you wish to be considered for appointment to a Committee, information can be found on the CCBC website: [Become a Committee Member](#)

The College of Chiropractors of BC has eight committees, five of which are statutory committees established under the Health Professions Act and the CCBC Bylaws. Each committee maintains at least one third public representation to ensure that the voice of the public is present. Both public and registrant committee members work on a volunteer basis to provide their time, skills and expertise to the work of the CCBC.

Statutory Committees

Registration Committee (Bylaws s. 15):

To ensure that a person meets the conditions or requirements for registration as a registrant of the college and to grant registration on that basis.

Inquiry Committee (Bylaws s. 16):

The Inquiry Committee is charged with the investigation of complaints received at the College regarding registrant conduct and disposes of the matters in accordance with the Health Professions Act.

Discipline Committee (Bylaws s. 17):

The mandate of the Discipline Committee is to hear and make a determination of a matter referred to the Committee following a Citation being issued by the Registrar at the direction of the Inquiry Committee or Board regarding a registrants conduct, competency and or ability to practice, pursuant to legislation.

Quality Assurance Committee (Bylaws s. 18):

The mandate of the Quality Assurance Committee is to ensure that registrants are competent to practice and to promote high practice standards amongst registrants.

Patient Relations Committee (Bylaws s. 19):

The purpose of the Patient Relations Committee is to ensure that registrants have a clear understanding of appropriate patient boundaries and to prevent misconduct of a sexual nature.

Special Committees

Executive Committee:

The Executive Committee provides guidance on emerging issues, strategic direction and governance/staffing decisions and makes recommendations to the Board.

Finance and Investment Committee:

The Committee is established by the Board of Directors to assist it in fulfilling its oversight responsibilities for financial management of the College.

Research and Bursary Committee:

The Research and Bursary Committee is responsible for providing recommendations for awards for chiropractic students and registrants who have completed publishable quality research papers.

3. Legislation, Regulations and Rules

All College registrants should be familiar with the rules and regulations that govern the practice of Chiropractic in BC. Each item below is linked and will be referenced further in this Manual.

[The Health Professions Act \('the HPA'\)](#)

The Act is umbrella legislation that provides a common regulatory structure for BC's health professions. The Act empowers the CCBC to regulate the practice of chiropractic in BC.

[The Chiropractors Regulation \('the Regs'\)](#)

The Chiropractors Regulation defines the scope of practice, reserved titles and restricted activities for chiropractic doctors.

Subsequent sections of this Manual will refer to sections of these Regulations.

[The Bylaws of the CCBC \('the Bylaws'\)](#)

The CCBC Bylaws provide important information to registrant concerning responsibilities of the chiropractor and prescribe the manner in which the College conducts its business.

Registrants should be familiar with the Bylaws and in particular:

- Registration (part 4)
- Quality Assurance (part 5)
- Inspections, Inquiries and Discipline (part 6)
- Registrant Records (part 7)
- Health Profession Corporations (part 8)
- Delegation and Supervision (part 9)
- General (part 10)
- The Schedules and Forms used by the

College. The BC government approves Bylaws.

[The Professional Conduct Handbook \('the PCH'\)](#)

The Professional Conduct Handbook outlines the standards of practice that chiropractors must abide by as registrants of the College. Standards are approved at the Board level.

The Board of the College establishes rulings for members that include matters relating to clinical activities, billing, and member conduct.

Note: The College is in the process of updating the PCH to Professional Standards and Guidelines. Registrants will be notified when the documents are complete.

PCH Table of Contents:

Code of Ethics

Standards, Limits & Conditions of Practice

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Part 3. Provision of Care and Privacy

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Part 6. Sexual Conduct with a Patient

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SCHEDULE "1" – suggested withdrawal letters

APPENDIX "B" – Notes on Record Keeping and Office Maintenance

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APPENDIX "N": Acceptable Evidence

APPENDIX "O": Billing insured claims

4. The Registrant Portal

The Registrant Portal is your gateway into the College IT systems.

The Portal includes registrant information & profile and allows a registrant access to most functions and information necessary for changes and updates to their information. It also archives updates, news, reminders and other information relevant to a registrant.

Additional information can also be found on the public portion of the College website under [CCBC News](#)

To login to the Registrant site:

1. Go to www.chirobc.com/
2. Click on “Registrant Login” from the top right corner of the page.
3. Enter your email address and password, then click login.

If you cannot remember your password, click on the password recovery link on the login page and follow the steps to reset your password.

The College communicates directly with a registrant through email and with the public through our website.

We strongly recommend you log into the Registrant Portal regularly.

Part C: Practice Information

5. Registration with the CCBC

Important: It is the responsibility of each registrant to ensure their contact information and profile are up to date and correct (Bylaws s. 56). All correspondence from the College is sent by email to the address in your profile. If you are not receiving College emails, first check your contact information online through the Registrant Portal. Then check your email spam settings and spam/junk folders and mark College emails as 'safe'.

Receiving, responding and replying to College emails is your responsibility. Failure to do so could result in disciplinary action and/or cancellation of your registration status.

The CCBC has four categories of registrants:

1. Full (Bylaws s. 44)
2. Student (Bylaws s. 46)
3. Non-Practicing (Bylaws s. 47)
4. Temporary (Bylaws s. 48)

Renewal of Registration:

Every Full and Non-Practicing registrant must renew their registration by July 31 each year. Failure to complete the renewal process and forms or to pay the full fee amount by July 31 will result in automatic and immediate cancellation of your license to practice.

Should your license to practice be cancelled or expired, you are unable to practice chiropractic in BC until you complete the reinstatement procedures and pay the fees applicable. This may take several days to weeks to complete.

There are no exceptions to the renewal dates and deadlines, or to the reinstatement requirements and processes.

Renewal notices are emailed each year beginning June 1. The necessary documentation is completed and payments made online. Monthly Pre-Authorized Payments (PAP) may be arranged, contact the College for information and forms. For more information on PAP, see the [PAP FAQs](#)

All fees and charges are listed in the CCBC Bylaws Schedule "C".

For changing your status from Full to Non-Practising, the CCBC Bylaws s. 47(1) and (2) apply. The forms required are Schedule 11 and 12 are available in the Registrant Portal under the "Change Status" tab.

For changing your status from Non-Practising to Full, the CCBC Bylaws s. 47(4) apply. The forms required are Schedule 10, outlines the necessary information and is available for completion online in the Registrant Portal.

Student registration is only valid for up to four consecutive months and expires then or at graduation date, whichever comes first.

Temporary registration is only valid for 90 days.

Reinstatement: returning to Full registrant status:

Note that there are specific requirements for reinstatement to full registrant status. Information on Reinstatement after being expired is found in the Bylaws s. 54 (d) or (e) and from Non-Practicing status in s. 47(4)(b) and/or (c). These conditions and terms are in place to ensure clinical competency, proficiency and qualifications of the registrant.

6. Liability Protection or Insurance Coverage

The Bylaws Section 84 explains the requirements for liability protection or insurance coverage.

- (1) All full, limited, student and temporary registrants, and all employees of registrants or health profession corporations to whom aspects of practice involving patient assessment or treatment are delegated under Part 9, must obtain and at all times maintain professional liability insurance coverage in an amount of at least \$2,000,000 per claim in a form that is satisfactory to the college.
- (2) For a period of 5 years following the grant of non-practising registration under section 47(1), a non-practicing registrant must maintain insurance coverage in the amount and form specified in subsection (1) against liability arising from the practice of chiropractic while he or she was a full, limited or temporary registrant or a member of the college under the *Chiropractors Act*

To ensure safety of the public, failure to maintain adequate insurance may result in an immediate suspension from practice.

Not all insurance providers forward a copy of your insurance certificate to the College.

It is the registrant's responsibility to maintain insurance, to ensure the College has a copy of the current coverage and to notify the College if their insurance is cancelled, modified or elapsed.

Proof of liability protection or insurance coverage must be submitted every year in the registration Renewal Form 4.

7. First Aid/CPR-C

Further to our mandate to serve and protect the public, the CCBC [Bylaws](#) require all full registrants to obtain Standard First Aid/CPR-C certification. Registrants will also be required to maintain this certification while registered as full with the CCBC.

This standard will not only strengthen the core competency of practicing registrants, it also aligns with the public's expectation that regulated health care providers are equipped to handle basic health emergencies.

An overview of the certification and approved providers is found in the [Standard First Aid/CPR-C web page](#).

A registrant must upload their certificate through the [CCBC Registrant Portal](#).

8. Incorporation

If your practice (provision of services) is through a company incorporated under the Business Corporations Act, you must obtain a Health Profession Corporation (HPC) Permit through the College. This is explained in the HPA part 4 and the Bylaws part 8.

For assistance in incorporation or HPC Permits, a registrant should consult with a lawyer or accountant that is familiar with the health regulations. The HPA s. 43 details the specific requirements for shareholders, voting privileges and other details that must be correct for obtaining a permit.

HPC permits are valid to July 31 each year and must be renewed annually. Failure to renew by the deadline will result in expiry of the permit and a new application will need to be completed.

Application for a HPC permit and annual renewal is online through the [CCBC Registrant Portal](#).

9. Doctor-Patient Relationships

The HPA s. 19(3) directs that the Patient Relations Committee must:

- (c) develop and coordinate, for the college, educational programs on professional misconduct of a sexual nature for members and the public as required,
- (d) establish a patient relations program to prevent professional misconduct, including professional misconduct of a sexual nature,
- (e) develop guidelines for the conduct of registrants with their patients, and
- (f) provide information to the public regarding the college's complaint and disciplinary process.

The Committee has produced and published on the College website a reference guide:

[Clear Sexual Boundaries Between Chiropractors and Patients: Responsibilities of Chiropractors](#)

All chiropractors should be familiar with this document. As stated in the HPA s. 32(4):

Duty to report sexual misconduct

32.4 (1) If a registrant has reasonable and probable grounds to believe that another registrant has engaged in sexual misconduct, the registrant must report the circumstances in writing to the registrar of the other registrant's

college.

(2) Despite subsection (1), if a registrant's belief concerning sexual misconduct is based on information given in writing, or stated, by the registrant's patient, the registrant must obtain, before making the report, the consent of

(a) the patient, or

(b) a parent, guardian or committee of the patient, if the patient is not competent to consent to treatment.

10. Quality Assurance – Standards of Practice

From the Chiropractic Regulation: "chiropractic" means the health profession in which a person provides, for the purposes of promotion, maintenance and restoration of health, the services of:

(a) assessment of the spine or other joints of the body and the associated tissue, and the nervous system,

(b) treatment of nervous system, muscular and skeletal diseases, disorders and conditions through manipulation or adjustment of the spine or other joints of the body by hand or by using devices directly related to the manipulation or adjustment, and

(c) advice and counseling on matters related to the condition of the spine or other joints of the body and the associated tissue, the nervous system and the overall health of the individual.

Chiropractors are not simply authorized to provide “advice and counseling on matters related to ... the overall health of the individual”, rather the authority concerns “matters related to the condition of the spine or other joints of the body and the associated tissue, the nervous system AND the overall health of the individual” (emphasis added).

The words “the overall health of the individual” should be used by chiropractors in the context of the phrase in relation to the chiropractors’ area of expertise based on their education and experience; “condition of the spine or other joints of the body and the associated tissue, the nervous system”.

There are several sections of the Bylaws and the PCH that explain or expand on matters related to the practice of chiropractic. Practitioners should be very familiar with the Bylaws Parts 4 to 10 and the PCH in total.

The Quality Assurance Committee oversees both the Continuing Education requirements and the Practice Self-Review program.

For Continuing Education, see this link to [FAQ's](#)

It is important to note that new graduates and new some other registrants may be credited with a portion of their CE requirements depending on many factors including date of registration and timing within the CE cycle.

You may review your CE credits for the current cycle online in the [CCBC Registrant Portal](#).

For Practice Self Review, see this link to [PSR](#)

11. Continuing Education

Part 5 of the Bylaws, Sections 57 to 60 discusses continuing education. Currently, the requirements for Continuing Education (CE) are set in the Bylaws s. 57(2):

every 2 years of either full or limited registration, or any combination of both, a registrant must complete 40 hours of continuing education, including any mandatory courses required by the board.

The 2-year CE cycle ends on March 31 of the odd numbered years. Registrants may not complete their annual renewal if their CE & QA requirements are not fulfilled.

For details and further information on the Continuing Education program and requirements go to [CCBC CE FAQ's web page](#)

You enter your CE credits online through the [CCBC Registrant Portal](#)
For information on submitting your CE credits, see [Continuing Education Submission Requirements](#)

The Quality Assurance or Patient Relations Committees may set mandatory CE courses or programs to ensure standards are being met. Registrants will be notified when these are required.

12. Criminal Record Checks

Under the *Health Professions Act (HPA)*, all registrants of the College of Chiropractors of BC (CCBC) are required to consent to a criminal record check (CRC) at least once every 5 years. Registrants who have not authorized a CRC within 5 years will be asked to consent to a new CRC during the renewal period. Registrants who wish to reinstate will also be asked to consent to a CRC.

The CRC is a requirement of the *Criminal Records Review Act (CRRRA)* and is applicable to applicants and registrants of all professional regulatory bodies governed by the *HPA*. The *CRRRA* is intended to help protect children from physical and sexual abuse or vulnerable adults from physical, sexual or financial abuse.

Consent to a CRC is **mandatory**. If an applicant or registrant refuses to provide consent, the College will not be able to register or renew their registration. Without registration, an individual cannot practise as a chiropractor.

Fingerprints

Due to changes from the BC Government, the Criminal Record Check process has changed significantly. The BC Government may require your fingerprints to complete the Criminal Record Check process if your date of birth and gender match those of a person with a criminal record. **If the Ministry of Justice notifies you that fingerprints are required, you must complete this step within 15 days.**

If it is determined that you are required to provide fingerprints to complete the CRC process, the Ministry of Justice - CRRP will mail you an information package to advise you how to complete this requirement.

The fingerprinting process is usually completed at your local police detachment, either RCMP or municipal police. **There are fees associated with fingerprinting.** These fees are set and collected by individual municipalities and their law enforcement organizations. The CCBC does not provide reimbursement for the cost of fingerprinting. Contact your local RCMP or police detachment in advance to confirm payment methods and determine the dates and times they are available for fingerprinting. The Ministry of Justice recommends that registrants **contact the CRC Program** after fingerprints have been submitted to confirm that you have completed this step.

Failure to provide fingerprints is deemed by the Ministry of Justice to be a failure to authorize a required CRRRA CRC, which will limit your ability to practice chiropractic in BC.

Criminal Record Checks for Staff

Under the Criminal Records Review Act, individuals working with children or vulnerable adults directly or potentially have unsupervised access to children or vulnerable adults must authorize a CRC for their employer or authorized organization. The CCBC does not monitor CRC requirements for non-registrants, such as office staff, as this falls under the responsibility of the employer.

13. Practice Arrangements

Office Sharing

A chiropractor will not enter into a contract with any individual or organization which jeopardizes professional integrity. A chiropractor may enter into office sharing arrangements with other health care practitioners in accordance with the "Guidelines for Office Sharing" attached as Appendix "E"

*** Note: This section is currently under development and PCH changes will follow.

Dissolution of Practice Arrangements

One of the most frustrating situations for registrants and especially for the patients is when a practice association 'splits up'. There are many types of practice associations and there is no possibility the CCBC could describe each type and provide advice on individual circumstances when someone is joining into a practice.

Consult with your lawyer and accountant for advice, ones that are familiar with health care contracts, rules and regulations.

A contract from the onset is always a good idea and it should include an "exit strategy". Conflict may later be avoided if the topic is discussed from the start of the practice association and written agreements are in place.

A contract is a civil matter between two parties. Contracts are not reviewed by the CCBC and contract disputes usually involve civil action in the courts.

From the CCBC perspective, our objective is to ensure continuity of care, that the patient is able to receive the treatment they wish, from the practitioner they wish, and that their clinical file follow them to the practitioner of their choice.

An overview on dissolutions of practice associations is contained in the PCH section 13 and Appendix "F" for guidelines, letters and examples.

These sections apply to all types of practice arrangements ("associations"), be it an associate practitioner, a partnership, a 'contractor', room rental, multi-discipline or multi-practitioner clinics, etc. All of these are "association arrangements".

Informal summary on Dissolution of Practice Associations (legislation prevails)

Firstly, the clinic owns nothing or no one, the patient consents to treatment by a chiropractor who happens to work at a particular clinic. The patient is the one that decides who they wish to see for treatment. Under no circumstances does any practitioner or any clinic “own a patient”. The patient always makes the choice.

In summary, at all times both Doctors need to act reasonably and recognize some basic facts:

1. That each Doctor, acting professionally and responsibly, will always have the best interests of the patient in mind at all times and the Doctor readily accepts that it is the patient’s right to choose who provides their care.
2. That involving a patient in any way, apparently, inadvertently or intentionally, in any aspect of a separation dispute such as who retains the file, who provides care or any other negative aspects of the ‘practice separation’, is unprofessional and often this causes upset or grief to the patient who may then simply decide to move on to third chiropractor for care so they do not get involved in the apparent dispute.
3. A registrant cannot solicit the patients under care of another chiropractor and must provide the contact information for another registrant when asked by a patient to do so.
4. There is no possible way for the CCBC to predict, regulate or advise on every possible scenario, but if two Doctors are acting professionally, responsibly and with the patient interests at heart, they can and should be able to resolve any particular issue or complication arising from their practice separation. It is their duty to do so.

14. Financial – Fees and Billing Arrangements

For a complete outline of fees and billing arrangements see the PCH part 4 and Appendix “I” and Appendix “O”.

Appendix “I” outlines the Mandatory Terms and Conditions for Billing Arrangements.

Appendix “O” provides additional information and standards for Billing Insured Claims.

Your office intake forms should include a fee schedule and this should be explained in detail to the patient, especially when a new charge or service is

provided.

Office visits may be discounted or provided free, the PCH part 4 sets out the several points that ensure the fees are clear, fair and reasonable. Medical Services Plan BC (MSP) and most 3rd party private insurers have limits on coverage, payments, submission requirements, assignment of payment, etc. Insurance billing is not regulated through the College; however, instances of inappropriate billing or fraud are considered professional misconduct.

15. Advertising – Marketing

There are many sections relevant to marketing, set out in the Bylaws Section 85 and the PCH s. 14.

In general, any and all communications, handouts, articles, papers, business cards and educational materials provided by your office are marketing materials as defined in the Bylaws.

All materials must not be:

- (a) False,
- (b) Inaccurate,
- (c) Unverifiable,
- (d) Misleading,
- (e) Misrepresentative of the effectiveness of any technique, procedure, instrument or device
- (f) Undignified, offensive or in bad taste, or
- (g) Contrary to the ethical standards of the profession.

If you possess a Health Professions Corporation permit, all marketing materials must indicate that the services are being provided through a professional corporation

All Practitioners should be fully aware of all aspects of the Bylaws Section 85 and the PCH Part 14.

PCH Appendix “H” provides additional information on Guidelines for referencing designations, affiliations and awards.

The Efficacy Policy and related material outlines additional restrictions for marketing and is found here: [Efficacy Policy](#)

It is impossible to detail every instance of marketing, particularly as technology changes rapidly. If a practitioner is uncertain if their marketing material may violate the rules, they should submit it to the College PRIOR to releasing the material for publication.

Violations of the marketing rules may result in investigation by the Inquiry Committee.

16. Informed Consent

Informed Consent is required prior to beginning treatment, this is mandatory under the [Health Care \(Consent\) and Care Facility \(Admission\) Act](#) Obtaining consent to treat is much more than a signed form, it is a process.

As part of the informed consent process, prior to treatment chiropractors are responsible for disclosing to each patient:

1. The diagnosis and purpose for the treatment proposed
2. The nature of the proposed treatment or procedure
3. The potential risks including those that may be of a special or unusual nature

An updated Informed Consent form should be completed:

- When the patient presents with a new condition;
- When the proposed treatment is markedly different than what has been previously provided; and/or

The College can provide sample Informed Consent documents for use, your professional liability insurance provider may also be able to assist you.

Please contact the College or your insurance carrier if you have any questions.

Treatment of Family Members

A chiropractor may examine and treat his or her spouse and other family members so long as, in providing such care, the chiropractor meets all obligations pertaining to examination and the provision of treatment, including obtaining the patient's informed consent and keeping a patient file.

A chiropractor may not bill for MSP benefit coverage for a family member as defined in the *Medical and Health Care Services Regulation S. 29*:

Personal services

29 (1) Services are not benefits if they are provided by a health care practitioner to the following members of the health care practitioner's family

- (a) a spouse,
- (b) a son or daughter,
- (c) a step-son or step-daughter,
- (d) a parent or step-parent,
- (e) a parent of a spouse,
- (f) a grandparent,
- (g) a grandchild,
- (h) a brother or sister, or
- (i) a spouse of a person referred to in paragraphs (b) to (h).

(2) Services are not benefits if they are provided by a health care practitioner to a member of the same household as the health care practitioner.

The various extended benefit insurance providers may have specific restrictions in regard to payments for services provided to, or by, a family member.

17. Clinical Records

Your patient records must be complete, detailed, and legible and retained for 16 years from the date of the last entry. See the Bylaws s.72 (2).

There are many sections relevant to clinical records including the CCBC Bylaws Part 7 (72, 73 & 74) and the PCH 2.1 and Appendix B.

The Quality Assurance Committee also conducts regular reviews of registrant records under the Practice Self Review program.

Good quality records benefit both the registrant and the patient and they may come under public scrutiny in civil proceedings.

Electronic records are becoming more popular and less costly.

Patient Access to Clinical Records:

In June 1992, the Supreme Court of Canada made a judgment regarding office medical records. While recognizing the practitioner's ownership of the clinical records, the case judgment states that the information in those records belongs to the patient and that the patient has a right to access that information upon request.

The ruling means that patients have the right to read and copy the information contained in their medical files, including material in the files from other practitioners but excluding medical legal correspondence and independent medical examinations. In practical terms, it is advisable to provide the requesting patient with photocopies of the contents of the medical record to ensure that the original office medical record remains intact.

The practitioner may refuse the patient access to the office medical record if it is the practitioner's judgement that the information may cause harm to the patient or to an innocent third party.

The registrant may charge a nominal fee for copying the records; the fee must not be prohibitive for the patient.

The records must be legible to third party readers who are not necessarily medical practitioners. If necessary, a registrant must provide a transcription of their records (at no additional cost).

18. Privacy and Protection of Information

Privacy and protection of information are regulated under many statutes and pieces of legislation both Federal and Provincial.

Practitioners must be cognizant and respect the privacy of any and all patient information. The Bylaws Section 73 provides an overview and references the '*Personal Information Protection Act*' which is applicable to practitioners.

Under the Canadian Anti-Spam Legislation (CASL), to contact a patient or potential patient directly, you must have specific consent to do so. Your legal counsel or professional association can provide information in relation to CASL requirements and obligations.

Direct Links:

- [Personal Information Protection Act](#)
- Canadian Anti- Spam Legislation (CASL):
 - [The Act](#)
 - [Fast Facts](#)
 - [FAQ's](#)

19. Diagnostic Imaging

All registrants who own or operate radiograph facilities must comply with the Bylaws Section 83 which states:

Radiation safety and procedure

83. (1) All registrants who operate a radiographic installation must obtain and at all times maintain a valid Certificate of Radiation Safety issued by a Radiation Protection Surveyor approved by the Radiation Protection Services of the Environmental Health Division, BC Centre for Disease Control.

(2) All registrants who operate a radiographic installation must display the Certificate of Radiation Safety specified in subsection (1) on, or at a location within 3 metres of, their radiographic equipment, and in a manner that is easily visible to patients receiving X-rays.

A Certificate of Radiation Safety must be current and valid at all times, the equipment must not be operated if the permit is expired.

The College is currently developing manuals to assist registrants with the ownership, registration and safety of imaging equipment. Details will follow.

Imaging from Other Sources

Where chiropractors order x-rays for purpose of computerized axial tomography, and electromagnetism for the purpose of magnetic resonance imaging, they must have the results interpreted by a qualified health professional and receive a written report documenting that interpretation.

Chiropractors are responsible for making an appropriate referral where they determine that imaging they have ordered includes findings or recommendations outside the scope of practice for chiropractic

All action taken and referrals made following on the receipt of ordered imaging must be documented in the patient file.