

CTCMPAO – Self-Assessment Form and Professional Development Log

Name (First, Last)	Member Number
For Calendar Year	r (Jan 1-Dec 31):
	F REGISTRATION (Check One): General Student Inactive R. Applicable): R. TCMP R. Ac
What TYPE OF F	ACILITY do you work in, based on your primary site of practice?
	Multi-disciplinary Clinic
	Acupuncture Clinic
	Solo Practice Office / Home office
	Spa / Wellness Centre
	Other, please specify:
As an R. TCMP, o	do you maintain an inventory of herbs? □ Yes □ No
	e College, including those in the Inactive and Student Class, must participate in the Program's Self-Assessment and continuing professional development activities on
Keep a record of least 3 years.	the completed Self-Assessment and professional development records for at
Updated February 2024	



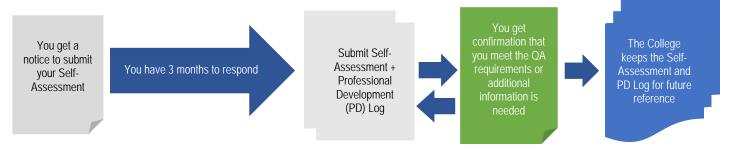
Why do a Self-Assessment?

Self-Assessment is a way for you to review how your performance meets the College's Standards of Practice. You can use the Self-Assessment to record your strengths and identify practice areas you'd like to learn more about. The Self-Assessment is a tool to support your self-reflection, goal-setting and continuous improvement. Use areas you want to learn more about as the basis for your professional development activities during the following year.

The College requires that each member completes at least 15 hours of Professional Development activities each year. Every year, the College selects a random sample of members to submit their Self-Assessment and Professional Development (PD) Log. The information you share in your Self-Assessment is confidential.

QA Program Structure

Here is a description of the process for completing and submitting your Self-Assessment Tool and Professional Development Log:



Please note that the random selection for Self-Assessment is different from a Peer and Practice Assessment selection.

- If you are selected for a Peer and Practice Assessment, an assessor(s) appointed by the College will visit you at your practice to discuss what is working well, what tasks or procedures you could improve on to ensure that your knowledge, skill and judgment are meeting the standards of practice of the profession.
- Please note that a Peer and Practice Assessment is not meant to be punitive, but an opportunity
 to identify and discuss areas where the College can support you. It is based on similar criteria
 as the Self-Assessment and will generally include discussion about your Self-Assessment and
 Professional Development Log.

Estimated Time to Complete the Self-Assessment

The total estimated time to complete the Self-Assessment tool is approximately 90-120 minutes. Note, however, that you can complete the Form section by section. The estimated time for completing each section is noted in the table below. You can check each section once completed to keep track of your progress:

Self-Assessment Section	Estimated time to complete
1. Communication	5 minutes
2. Consent	10 minutes
3. Diagnosis and Treatment	15 minutes
4. Infection Control	15 minutes
5. Professional Boundaries	10 minutes
6. Preventing Sexual Abuse	10 minutes
7. Record Keeping	20 minutes
8. Advertising	5 minutes
9. Legislation, Standards and Ethics	5 minutes
Self-Assessment Summary and Action Plan	15 minutes
Optional: Self-Awareness Exercise to Define Professional Development Goals	15 minutes
Optional: Feedback to the College and Your Experience	10 minutes

Self-Assessment Section	
Professional Development Log	

Self-Assessment Rating

On the following pages you will find statements that describe knowledge, skill or practice areas that you are required to know and/or be able to do based on the College's Standards of Practice. To read the Standards of Practice in detail, see www.ctcmpao.on.ca/regulation/standards-of-practice/.

Assess your knowledge and performance of each statement by marking the appropriate box next to it. The Self-Assessment rating categories are defined as follows:

I do this well	= I consistently meet the standard of practice in this area
I'd like to improve	= I would like to build my knowledge and skills to do better
N/A	= This is not applicable to my role as an R. TCMP or R. Ac

You can also add notes in the right-hand side column in the table, next to each statement and its rating. Your notes may include professional development priorities, current or future plans, or anything else you think is useful to note.



Remember that the Self-Assessment Tool and Professional Development Log's purpose is to benefit you, your practice, and your professional goals.

Structure of the Self-Assessment Sections

In each section of the Self-Assessment, you will find:

- Section Objective
- **Background and Instructions:** defines what the section is about, and how to complete the Self-Assessment questions.
- Task/Procedure Self-Assessment Questions

Application Questions: includes scenario-based questions to apply your understanding and compliance with the Standards of Practice. Note that these questions are provided for learning purposes only and are not an examination or test. An answer key is provided at the end of the form.



Section 1: Communication

Objective: Effectively communicate with all individuals to build relationships and provide or obtain relevant information necessary for establishing safe and effective treatment.

Background and Instructions

As a healthcare provider, you communicate daily with patients, families, and other healthcare professionals. Effective communication skills will enable you to gather all the relevant health information from the patient, so that you can form an appropriate treatment plan. You must explain what you will do, the reasoning for doing so, and ensure the patient understands the TCM procedures you will perform before obtaining consent. Finally, you must be able to communicate with other healthcare professionals to facilitate a shared plan of care.

How well do you communicate? Think of a typical situation with a new patient. Can you tell if they trust you? Do they understand what you tell them?

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
 I ask the patient to describe their complete medical history, current complaints, and reason for choosing TCM treatment. 					
2. I describe to the patient what I will do and why before, during and after treatment. I do this using clear language to make sure the patient understands. If needed, I provide this information to the patient's substitute decision maker or to an interpreter.					
3. I ask the patient, or the patient's substitute decisionmaker, if they have					



questions. I answer my patients' questions,			
 I refer my patients to another healthcare professional if they have questions or requests that are outside my scope of practice. 			
5. I work together with other health care providers to provide the best possible care to my patients.			
6. I use a full range of effective communication skills, including active listening, empathy, clear writing, observation, and positive feedback.			

A patient arrives in your practice saying that a physiotherapist has recommended ice to treat their back pain. If you feel that a different treatment should be considered, what would you say to the patient?

Select all that apply.

- a) Stop what the physiotherapist recommends so that we can set up our own treatment plan.
- b) I don't want to interfere with the current treatment, so you should just continue with what the physiotherapist recommends.
- c) We can also consider an additional approach. If we do, let me know what feels best to you.
- d) I cannot treat you while you are seeing a different healthcare provider.



Section 2: Consent

Objective: Recognize the right of patients to make treatment decisions and take all necessary steps to obtain informed consent for all treatments and procedures.

Background and Instructions

The <u>Health Care Consent Act, 1996</u> requires members of the College to obtain informed consent for all treatment they provide. **Informed consent** means that patients:

- Have all the information they need to make an informed decision and
- Know they have the right to decide to receive treatment, refuse treatment, or withdraw consent for treatment.

According to the <u>Health Care Consent Act, 1996</u>, Section 11(subsections 2 and 3), a consent to treatment is informed if, before giving it:

- a) The person received the information about:
 - the nature of the treatment,
 - the expected benefits of the treatment,
 - the material risks of the treatment,
 - the material side effects of the treatment,
 - alternative courses of action,
 - the likely consequences of not having the treatment.
- b) The person received responses to his or her requests for additional information about those matters.

Reflect on your experience with patients and the requirement to have informed consent from them before you examine and/or treat them. Have you been in a situation where a patient could not provide informed consent? What did you do to assess whether the patient could consent or not? How did you get consent for treatment that involves contact with sensitive areas?

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
I ask for consent before and throughout treatment.					
 I can determine if a patient understands the information that I communicate to him or her in order to provide informed consent. 					
If a patient does not understand treatment information, I identify a substitute decision maker who can consent for them.					
 4. I provide the information required for informed consent: The nature of the treatment The expected benefits of the treatment 					
 The material risks of the treatment The material side effects of the treatment Alternative courses of action The likely consequences of not having the treatment 					
5. I always discuss treatments involving sensitive areas with my patients and get written consent for the first treatment that involves contact with sensitive areas. In subsequent treatments for the same sensitive area, I remind patients of the written consent and obtain verbal consent.					
 6. I know what steps to take if a patient withdraws consent to treatment, including: Stop the treatment Remove any equipment Document that the patient has withdrawn consent 					



Question 1

A patient is suffering from lower back pain and severe sciatic pain on the right side that travels down the leg into the ankle and you need to assess Gallbladder 30 (GB30), or Huantiao. This is a returning patient who has provided general consent to treatment. This is the first time you will perform treatment on GB30 (Huantiao) for this patient. How should you obtain consent?

- a) You have implied consent, so nothing additional is required.
- b) Ask for the patient's consent verbally.
- c) Ask the patient for written consent.

Question 2

A patient comes back for a follow-up treatment for heartburn and indigestion. All symptoms have improved, and the patient is happy with the last treatment and would like the same one. However, they have a temporal headache. You would like to add Taiyang (EX-HN5) on both sides. Which part of the treatment is implied and which part should you obtain expressed consent for?

- a) You have implied consent for both treatments
- b) You have implied consent for the heartburn and indigestion treatment but require verbal consent for the Taiyang (EX-HN5) acupuncture point
- c) You require written consent for both treatments



Section 3: Diagnosis and Treatment

Objective: Demonstrate clinical competency by making effective and safe diagnosis and treatment decisions.

Background and Instructions

Traditional Chinese Medicine Practitioners (TCMPs) are authorized to practice Traditional Chinese medicine (TCM) by providing patients a combination of therapies including TCM Herbal Medicine and Acupuncture, within the scope of traditional Chinese medicine practice.

Controlled Acts:

Under the Traditional Chinese Medicine Act, R. TCMPs and R. Acs are authorized to perform two controlled acts:

- 1. Performing a procedure on tissue below the dermis and below the surface of a mucus membrane for the purpose of performing acupuncture
- 2. Communicating a traditional Chinese medicine diagnosis identifying a body system disorder as the cause of a person's symptoms using traditional Chinese medicine techniques

No controlled acts should be performed unless the conditions under the <u>Regulated Health Professions</u> <u>Act, 1991</u>, the <u>Traditional Chinese Medicine Act, 2006</u> and their respective regulations have been met.

TCM Therapies and Techniques

The following table includes a list of traditional Chinese medicine therapies and techniques that R. TCMPs and R. Acs are authorized to use to treat a patient. Check which ones you feel you do well, which ones you need to improve on (would like to do better), and which ones are not applicable in your practice (i.e., you do not perform them). Note if you are interested in learning more about a procedure or technique.

Name of therapy or technique	l do this well	I would like to improve	N/A in my practice	Notes/Comments (Interested in Learning more)	Priority for Professional Development
Chinese Herbal Medicine (R. TCMPs only)					
Acupuncture					
Moxibustion					
Cupping					

Gua Sha			
Tui Na			
Diet and Lifestyle Guidance			
Qi Gong			
Blood Letting			

Diagnosis and Treatment: R. TCMP and R. Ac Tasks and Procedures

Are you making effective and safe diagnosis and treatment decisions? Reflect on your practice as you assess your performance on the list of tasks or procedures in the table below.

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ comments	Priority for professional development
1. I accurately interpret patient information in making treatment decisions. For example, if a patient has severe back pain but also suffers from hot flashes due to menopause and is unable to sleep, I am able to prioritize and account for both when deciding on a treatment.					
 All my treatment plans include: A TCM diagnosis based on the patient's medical history, current complaints and information collected using four diagnostic methods (inspection, 					



listening and smelling, inquiring, palpation) - A treatment principle guided by TCM theory and one or more treatment modalities based on the treatment principle - Expectations of the treatment will last (e.g., how many treatments and how often they will occur) - What the patient can expect after the treatment 3. I perform only the controlled acts that have been authorized under the legislation.
- A treatment principle guided by TCM theory and one or more treatment modalities based on the treatment principle - Expectations of the treatment - How long the treatment will last (e.g., how many treatments and how often they will occur) - What the patient can expect after the treatment 3. I perform only the controlled acts that have been authorized under the
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logislation.
4. I do not prescribe Chinese
herbs if I am an R. Ac.
Horbo II Faill all IX. 7 to.
5. I clean the treatment area by
using aseptic techniques and
infection control procedures
as required by the College's
Safety Program Handbook
before I examine or treat a
patient.
6. I know the location of the
World Health Organization-
approved acupuncture points
and I insert needles
accurately only in those
defined locations.
7. I account for every needle
that is inserted, removed,
and disposed of during
acupuncture treatment.
O. Harava what to all aluminan on
8. I know what to do during an
emergency: for example, if a



patient has sudden chest pains and faints.			
In addition, as an R. TCMP (if ap	plicable):	·	
9. When I recommend herbal medicines in a treatment plan, I always consider the patient's physical, medical and health history and any precautions and any potential interactions between herbs, herb and drug/medication and herb and nutritional supplements.			
10. I explain to patients how herbal medicines should be used, how much, how often and what effects to expect.			
11. I ensure the safety of all substances used in my practice by regularly checking expiry dates, avoiding contamination, ensuring packaging isn't damaged, and keeping a log to record expiry dates and ensure sufficient quantities.			

A patient comes into your practice and asks you to realign/re-set their shoulder as it has fallen out of the shoulder joint. What do you tell them?

- a) I can begin your treatment right away.
- b) This falls outside the scope of my practice. I would recommend going to a hospital as soon as possible.
- c) This isn't normally the type of treatment I provide but we can try a combination of acupuncture and other TCM treatments.



Section 4: Infection Control

Objective: Understand and apply evidence-based procedures to minimize the risk of transmitting infectious agents.

Background and Instructions

You are responsible for maintaining a safe and clean work environment. To do that, you must follow evidence-based infection control procedures that will minimize the risk of transmitting infectious agents. Infectious agents are micro-organisms that cause infection or disease. The four most common types of infectious agents are viruses, bacteria, fungi, and parasites. Examples include staph infections, influenza and Covid-19.

How do you minimize transmission of infections in your practice? Assess how well you meet the infection control requirements listed in the following statements.

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
I keep up to date on infection control procedures as described in resources such as the College's <u>Safety Program Handbook.</u>					
 When I assess infection risks in my practice, I take into consideration: The type of treatment planned for the patient The patient's overall health and medical condition The health and immunization status of other patients, practitioners, and staff in the practice 					
When I assess external risks that may affect infection					



control in my practice, I consider: - The time of year (for example, winter months will likely have an increase in colds and the flu) - Outbreaks of infectious diseases in the community (for example, influenza or Covid-19) - Information released by public health officials (Public Health Agency of Canada, Ontario Public Health, municipal health authorities)		
 4. I have infection control procedures in place for: - Hand washing and personal hygiene - Using personal protective barriers (such as gloves, gowns, and masks) - Cleaning, disinfecting, and sterilizing equipment and the practice environment - Safely using and disposing of sharps and other biohazard waste 		
 5. I have the materials needed for infection control, including: Sinks, liquid soap, and alcohol-based hand rubs Disinfectants Personal protective barriers Sharps disposal containers Biohazard waste containers 		
6. I make sure that all practitioners, staff, and		



patients know and obey infection control procedures.			
7. My infection control procedures are easy to access for all practitioners and staff.			
8. I would inform Public Health Ontario if I discover a transmittable infectious disease.			

After removing a needle, you notice a small amount of blood. This particular patient rarely bleeds after acupuncture. What steps should you take to stop the bleeding?

Select all that apply.

- a) Put on gloves.
- b) Apply pressure on the skin at the insertion site with a clean cotton swab.
- c) Dispose of the swab immediately.
- d) Clean the area with an alcohol wipe.
- e) Apply a band aid if the bleeding did not stop.
- f) Communicate what happened, that any swelling or bruising will subside naturally after a few days, and that the patient can contact you if they have any additional concerns.
- g) Following treatment, thoroughly wash hands to reduce the risk of cross-infection with subsequent patients.



Section 5: Professional Boundaries

Objective: Establish professional boundaries to build trust and respect and to protect patients from any abuse of power.

Background and Instructions

Professional boundaries are the physical and emotional limits placed on the patient-practitioner relationship. Patients share personal information with you. They also depend on your professional knowledge for their care. This results in a power imbalance in favour of the R. TCMP or R. Ac. You must establish professional boundaries to prevent the abuse of this power and to promote trust and respect. Breaching a professional boundary can harm the patient and damage the therapeutic relationship.

- 1. Members should refrain from treating people with whom they have a close personal relationship, such as a friend, relative, or business partner. Strong personal, emotional, or business ties can impair a member's professional judgement.
- 2. Set and maintain professional boundaries with each patient. You are the patient's healthcare provider. Not their friend. Keep the relationship professional NOT personal.
- 3. Safeguard the privacy and dignity of your patients.

Pause and think: Do you clearly understand what it means to set professional boundaries with your patients? Are you able to identify and address a potential conflict of interest? Can you relate sensitively and professionally to a patient whose cultural values are different from yours?

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
I make sure the relationships with all my patients (or potential patients) are kept strictly professional.					
2. I tell patients if I cannot treat them because of conflicts of interest, when personal interests interfere with professional interests (personal relations, business relations, emotional connection etc.)					



c: a ic m u tc	am sensitive to my patients' ultural background, gender, ge, beliefs, values, sexual dentity and physical and/or nental ability. For example, I understand the meaning of buch and eye contact in my eatient's culture.			
p p	understand how to maintain professional boundaries with patients who have a history of trauma.			
re in F p so p	know what actions or emarks are not acceptable a professional relationship. For example, offering personal assistance or a ervice beyond the scope of professional practice. I make the ure this does not happen in any practice.			
co a p p e	keep records of communication with patients as evidence of the professional patient-cractitioner relationship. For example, a patient who asks ou to spend time together a treatment.			

If a patient asks personal questions (e.g., Are you married? Are you single? Do you have children? What do you do for fun outside work?), how should you respond in a way that maintains professional boundaries?

Select all that apply.

- a) Respond concisely to the patient's questions you are comfortable answering and then redirect the conversation back to the patient, their treatment, and TCM.
- b) Provide thorough and personal answers to each of the patient's questions
- c) Document if something potentially inappropriate occurred between you and a patient (e.g., any questions, statements or actions that were unprofessional and made you feel uncomfortable).



Section 6: Preventing Sexual Abuse

Objective: Demonstrate ethical behaviour by preventing sexual abuse and taking appropriate action upon recognizing sexual abuse.

Background and Instructions

The Regulated Health Professions Act, 1991 prohibits sexual relations between members and patients. Sexual relations between a member and a patient are considered sexual abuse. The Act defines sexual abuse as:

- Sexual intercourse or other forms of physical sexual relations
- Touching of a sexual nature
- Behaviour or remarks of a sexual nature

Touching, behaviour, or remarks that are clinically appropriate and related to the service being provided are not included in the definition of sexual abuse.

Members must:

- Not sexually abuse their patients.
- Always get expressed consent for treatment that involves contact with sensitive areas. For the
 initial treatment, the expressed consent must be written. Even if written consent is obtained
 initially, verbal consent must be obtained in subsequent treatments.
- Report sexual abuse.

Reflect on the following questions: Do I always take the necessary precautions to prevent sexual abuse? What can I do to improve my practice on preventing sexual abuse? If you have reason to believe that another regulated health professional has sexually abused a patient, you must file a report.

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
1. I know that sexual relations between a patient and a practitioner are never allowed and are considered sexual abuse. This includes any physical sexual relations, touching of a sexual nature and any actions or remarks of a sexual nature.					
 I do not start sexual relationships with patients or former patients. Members may only enter into a sexual relationship with a former patient under the following conditions: 					
 At least one year has passed since the last patient visit or the date that the patient-practitioner relationship ended The sexual relationship is not based on the trust and intimacy developed during the patient/practitioner relationship, and there is no longer a power imbalance in favour of the Member 					
3. If a patient tells me they were sexually abused by another healthcare professional, I am prepared to discuss what happened and am obligated to file a mandatory report to the Registrar of the regulated college that the professional belongs to including the following information:					
 My name and contact information Name of the regulated health professional who is the subject of the report An explanation of the alleged sexual abuse 					



The name of the patient, only if written consent has been obtained from the patient			
4. I ask the patient to remove clothes and items only from areas I will need to touch during an examination or procedure. I provide patients with covers to place over areas where clothing was removed.			
I touch patients only in areas I need to diagnose or treat.			

A patient comes to you with indigestion, asthma, pain in the chest, palpitation, insufficient lactation, and difficulty swallowing. You would like to use the acupuncture point Conception Vessel 17 (CV17), or Shanzhong. What type of consent should you obtain for CV17 (Shanzhong) if this is your first treatment with the patient?

- a) You have implied consent
- b) You need verbal consent
- c) You need written consent



Section 7: Record Keeping

Objective: Ensure that all records and reports are maintained in an accurate, complete, legible, and timely manner.

Background and Instructions

Record-keeping is important for both public safety and for the safety of your practice. Records and reports document the care and services you provided to your patients and demonstrate the professional judgment and critical thinking used in your practice. Your records also provide information to other health care professionals, if needed, for the continuity of care.

Your records must be accurate, complete, legible, and timely. They must be written in English or in French.

Think of a patient you have been treating. Do you have that patient's record? Does it include the patient's completed consent form? Did you keep a record of the patient's medical history? Your diagnosis? Treatment plan? Reaction to therapy? Log of appointments? Record of herbal prescriptions including dosage and instructions (when/ how often to take)? Billing information? And – are you able to easily access the record and provide it to another healthcare professional in a health emergency?

The types of records you must keep are addressed in the table below. Check the statements listed under "Task or Procedure" and note which ones you do well, which ones you'd like to improve on and areas you would like to learn more about through professional development activities.

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
 I keep a daily log of all patient appointments including date, name of patient and time of appointment. 					
 I keep a confidential and secure file of records for each patient, as paper or electronic documents. My patient files include all the documents specified in the College's <u>Safety Program Handbook</u> pages 53-61 and <u>Record-Keeping Guideline</u>. Examples include: Patient history Record of informed consent 					



 Treatment plan including any updates Record of therapies and procedures provided Response to treatment 			
3. I keep complete and accurate billing and payment records according to the College's Standard for Fees and Billing . Examples include:			
 Date and duration of service An accurate description of the services and products provided Names of all people involved in the care, such as staff or students Records for fees and billing kept in English or French Patient files including financial records stored for 10 years after the patient's last visit, or 10 years after minor patients turn 18 			
4. I keep equipment and supply records as required by the College and by manufacturers' guidelines, to make sure equipment is serviced as needed and to monitor the status of supplies in my practice. My equipment and supply records include:			
 Every instrument or piece of equipment used for any service to patients Sterilization of equipment when used Any other service or maintenance as necessary 			
5. I keep all records in English or French.			
6. I follow the Standard for Record-Keeping guidelines and			



the Regulated Health Professions Act, 1991 on retention and destruction of records. 7. I keep all patient information confidential except when needed for the assessment or treatment of the patient, or when legally obligated or allowed to disclose such information.			
8. I know what counts as a privacy breach, have a process to detect when one happens, and know what to do if they occur. For example, a privacy breach could include emailing personal health information to the wrong patient or transferring files to a physical device that is lost or stolen, such as a laptop or USB drive.			
In addition, as an R. TCMP (if appli	cable):		
 I keep an accurate record of herbs in my practice, including purchases, supply and prescriptions to patients. 			
10. I only use herbs before their expiry date.			
11. I make sure herbs are safely stored, labelled and handled so that there is no risk of contamination and the herb quality is maintained, as required according to the Natural-non-prescription -health-products-directorate (NNHPD) and the College's guidelines Safety Program Handbook, page 97			
12. I keep records of quality control tests for substances			



recommended in treatment plans.			
13. I make sure all herbal prescriptions are written clearly and include information needed to identify the correct herb and dose, use of the herb, and its effects.			

Which of the following steps do you take to keep your records secure and confidential? Select all that apply.

- a) I keep records in a secure storage area to restrict unlawful or unauthorized access. I back up files and establish restore protocols and processes.
- b) If I keep paper records in a secondary storage area (off-site) or scanned and saved electronically, they need to be retained securely.
- c) I destroy or shred records in a secure environment.
- d) Contractors agree to and follow confidentiality requirements and agreements.
- e) I keep a log of the records that have been destroyed.



Section 8: Advertising

Objective: Ensure that all advertising is factual, accurate, verifiable, clear, and objective.

Background and Instructions

Advertising is any message under your direct or indirect control that communicates information about you, your practice, your professional services and fees. Advertising must be factual, accurate, easily verified, independent of opinion, understandable and professionally appropriate. It must not include any information that is misleading by either leaving out relevant information, or including non-relevant, false or unverifiable information.

Advertisements impact how the public will perceive the profession. Members must take reasonable steps to ensure that the public and patients are protected. This includes making sure that advertisements placed by others (i.e., employees, marketing consultants, etc.) meet these standards.

Task/Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
I use the name I registered with the College in all advertising of my practice.					
I make sure all statements in my advertisements are factual and can be verified.					
I do not post testimonials, comments or pictures of my current or past patients.					
I make sure patients know my fees before I start treatment.					



Question 1

In a member's fee schedule, you see "Purchase 10 treatments for \$850 and receive 12 treatments." Is this acceptable according to the College's Standard for Advertisement?

- a) Yes
- b) No

Question 2

A member is known as the "Cancer Doctor" and advertises in a local newspaper that they can "cure" all kinds of cancer. Why is this improper?

Select all that apply.

- a) Members may not use the title of Doctor
- b) Members cannot guarantee results
- c) Members may not include information about the services they offer in advertisements
- d) Members may not imply specialization in a particular area or treatment



Section 9: Legislation, Standards and Ethics

Objective: Comply with the legislation governing the practice of the profession, and the College's Standards of Practice, Code of Ethics and by-laws to provide safe, competent and ethical care to patients.

Background and Instructions

Only registered members of the College can practise as Traditional Chinese Medicine Practitioners (TCMPs) and Acupuncturists (Acs). Registration ensures that members have met the professional and educational requirements to provide safe, competent, and ethical care.

R. TCMPs and R. Acs must understand and comply with the legislation governing the practice of the profession, and the College's <u>Standards of Practice</u>, <u>Code of Ethics and by-laws</u>.

Assess how well you understand and can apply the legislative requirements, standards, and other professional resources in your practice. The relevant documents are linked in the list of tasks or procedures in the table below.

Task/ Procedure	l do this well	I would like to improve	N/A in my practice	Notes/ Comments	Priority for professional development
I keep up to date on the knowledge, skill and judgment I need to perform TCM procedures.					
2. I practice according to the provincial and federal legislation, municipal law and guidelines that are relevant to my practice, including the:					
 Regulated Health Professions Act, 1991, and its regulations. Occupational Health and Safety Act and its regulations World Health Organization (WHO) Standard Acupuncture Point Locations. 					



 Workplace Hazardous Materials Information System (WHMIS). Healthcare Consent Act and the College's guidelines pertaining to consent. Personal Health Information Protection Act and the College's guidelines pertaining to privacy. The Traditional Chinese Medicine Act, 2006. 		
 3. I comply with the standards and by- laws of the College, including: Professional misconduct Registration Quality assurance Standards of Practice Code of Ethics and by- laws pages 49-50 		
4. I provide care to patients regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family status or disability.		
5. My fees are published and posted, and I always bill my patients accurately for the services I provide. I only charge for services the patient consented to have and I include accurate receipts for all payments.		

I can use the title and designations of R. TCMP and R. Ac in all provinces and territories of Canada if I am registered with CTCMPAO.

- a) True
- b) False



Self-Assessment Summary and Action Plan

The purpose of the Self-Assessment Summary and Action Plan is to record the areas you identified in your Self-Assessment as ones that you would like to learn more about and set priorities for your professional development. This form should be completed and submitted to the College together with your Self-Assessment tool and Professional Development Log, if you are randomly selected to submit it.

Instructions

Follow these steps to complete the Summary and Action plan:

- 1. Highlight statements you marked in your Self-Assessment tool as "I would like to improve" and list them in the summary and action plan form provided below, under "Areas of Improvement or Interest".
- 2. Highlight notes you made in your Self-Assessment about areas you would like to learn more about (e.g., Alexander method, Yoga) and add these areas also under "Areas of Improvement or Interest" on the form below.
- 3. In the Goals column on the form below, **specify at least one goal**: state what you would like to improve or learn how to do e.g., "Improve record keeping in my Practice" or "Expand my practice by learning how to perform the Alexander method". For the goal(s) you specified, note how it will support and/or enhance your practice.
- 4. In the Action steps column, outline how you plan to achieve your goals (e.g., I will participate in a webinar about record keeping; and I will attend a course about the Alexander Method)
- 5. Finally, in the "Completion Target Date" column, indicate the target date for achieving each goal.

The completed form below is an example of how to fill in the Summary and Action Plan to record your priority areas for improvement and/or enhancement of your practice.

If you need assistance identifying your professional development goals, we have included an optional self-awareness exercise in the following section to guide you.

Example

Areas of improvement or interest	Goals	Action Steps	Completion target dates
Record keeping	Transition from paper to electronic records for secure and easy access.	Attend workshop on electronic record keeping.	June 30, 20XX
Alexander method	Learn how to use this method to be able to treat patients by using it to help alleviate pain.	Attend a course	October 30, 20XX

Self-Assessment Summary and Action Plan Form

Areas of improvement or Interest	Goals	Action Steps	Completion target dates



Optional: Self-Awareness Exercise to Define Professional Development Goals

We recognize it can be difficult to identify areas you would like to develop in your work. The following approach will help you identify your main interests, concerns and needs, which should form the basis of your planned development opportunities. Lasting development and growth generally happens when it's based on what you are interested in and/or care about.

1.	Think back on your past year of work. List a few examples for each of the following categories:
	Positive experiences, work I loved doing, major milestones and accomplishments:
	Negative experiences, challenges, things I was uncertain about, unresolved questions:
2.	Summarize your experiences noted above into a top 3 list:
	Top 3 positive experiences at work:
	Top 3 challenges at work:



Decide on one challenge you want to improve on.				
Positive experience I want to learn more about:				
Challenge I want to get better at:				

3. Decide on one positive experience that you want to learn more about, or continue to grow in.

- 4. Identify an educational resource that can support you in learning more about what you're interested in and build your skills in your identified challenge. Record both in your Self-Assessment Summary and Action Plan Form.
- 5. Over the next 3-6 months, complete two or three educational resources you've identified.
- 6. After 3-6 months, return to your list of positive feelings/experiences and challenges/concerns. Record the educational resources you've completed in your Professional Development Log. Then identify the next area you are interested to learn more about. Repeat the process and return after 3-6 months.
- 7. Repeat that cycle once or twice more to complete a full year. After the year, revisit your list of positive feelings/experiences and challenges/concerns. Have you deepened your experience/knowledge in the areas you were drawn to? Do you feel more confident in the areas that were challenging?
- 8. Complete the self-awareness exercise again, looking back at your past year. Identify new areas of concern/challenge and positive experiences/milestones.



Optional: Feedback to the College and Your Experience

The following section is an optional part of the Self-Assessment that allows you to provide feedback to the College about where you might need additional support, as well as additional details about your experiences.

Are there any areas of the Self-Assessment that you would like additional support with, or have additional questions about?

- a) Legislation, standards and ethics
- b) Communication
- c) Consent
- d) Diagnosis and treatment
- e) Infection control
- f) Preventing sexual abuse
- g) Professional boundaries
- h) Record keeping
- i) Advertising

Anything additional:
Did you encounter any situations in the past year where you weren't sure what to do? If so, can you describe them:
Have you experienced anything over the past year that made maintaining your personal wellness and practice challenging?
a) Burnoutb) Financial stabilityc) Mental health
d) Balancing work with other responsibilities (e.g. family)
Anything additional:



Do you have any additional feedback you'd like to share with CTCMPAO?		

If there's anything else you'd like to discuss, you can contact the Quality Assurance Program:

Email: qa@ctcmpao.on.ca

Phone: 416-238-7359 ext. 3334

If you have any questions about the Standards of Practice, you can also refer to the <u>College's FAQ Section</u>.



Professional Development Log

Every calendar year (January 1 – December 31), you are required to complete 15 hours of professional development activities to show that you are committed to enhancing your competency and continuing quality improvement in your practice.

The purpose of the Professional Development log is to record a description of your professional development activities, the date each activity is completed, the type of the activity, the length of time to complete the activity in hours, and a description of how the activity helped you in your practice.

If you are randomly selected for a Peer and Practice review, the Peer Assessor will review your Professional Development Log as part of the College's Quality Assurance Program. The information about your Self-Assessment and professional development will remain confidential and will only be used to help you achieve your professional goals and the College's Quality Assurance requirements.

Types of Professional Development Activities

The Quality Assurance Program recognizes a variety of professional development activity types and formats. Please visit the College's <u>Professional Development Guidelines</u> for full details.

You are encouraged to participate in a wide range of activities for your professional development hours. The activities you choose must meet your goals of improving your practice and enhancing your skills and knowledge.

All acceptable activities must pertain to one of the two subject matters:

- Category A: directly related to the scope of practice as defined by the College; or
- Category B: complementary to TCM but not directly related to the scope of practice.

Certain activities have a maximum number of hours that the member may claim towards their 15-hours of professional development. Refer to the Professional Development Guidelines for full details.

Upon request, members must be able to provide evidence of their participation in professional development activities. These include certificates of completion or summaries of professional reading. Hours will not be counted if evidence cannot be provided.



	Professional Development Log				
Re	porting Year (Jan 1 – Dec 31)				
Naı	ne (First, Last)				
Des	signation	□ R. TCMP □ R Ac			
1	Activity Name & Description e.g., name of webinar, articles read, subject, name of journal or book and description. Type of Activity	□ Seminar/Webinar			
		 □ Training course □ Workshop □ Professional reading (book, article) □ Other (specify) 			
	Date Activity Completed				
	Length of Activity (hours)				
	How this activity helps you in your practice				
	Additional notes				
2	Activity Name & Description e.g., name of webinar, articles read, subject, name of journal or book and description.				
	Type of Activity	 □ Seminar/Webinar □ Training course □ Workshop □ Professional reading (book, article) □ Other (specify) 			
	Date Activity Completed				
	Length of Activity (hours)				
	How this activity helps you in your practice				
	Additional notes				
3	Activity Name & Description e.g., name of webinar, articles read, subject, name				

	of journal or book and	
	description. Type of Activity	☐ Seminar/Webinar
	Type of Activity	☐ Training course ☐ Workshop ☐ Professional reading (book, article) ☐ Other (specify)
	Date Activity Completed	
	Length of Activity (hours)	
	How this activity helps you in your practice	
	Additional notes	
4	Activity Name & Description e.g., name of webinar, articles read, subject, name of journal or book and description.	
	Type of Activity	 □ Seminar/Webinar □ Training course □ Workshop □ Professional reading (book, article) □ Other (specify)
	Date Activity Completed	
	Length of Activity (hours)	
	How this activity helps you in your practice	
	Additional notes	



Application Answer Guide

Section 1: Communication Application

A patient arrives in your practice saying that a physiotherapist has recommended ice to treat their back pain. If you feel that a different treatment should be considered, what would you say to the patient?

Select all that apply.

- a) Stop what the physiotherapist recommends so that we can set up our own treatment plan.
- b) I don't want to interfere with the current treatment, so you should just continue with what the physiotherapist recommends.
- c) We can also consider an additional approach. If we do, let me know what feels best to you.
- d) I cannot treat you while you are seeing a different healthcare provider.

Question Feedback

If you are not in agreement with another healthcare provider, it's important to always remain professional. We should always show other professionals respect and avoid saying other treatments are wrong.

Empower the patient. Explain the different options they have and discuss what feels best to them.

Section 2: Consent Application

Question 1

A patient is suffering from lower back pain and severe sciatic pain on the right side that travels down the leg into the ankle and you need to assess Gallbladder 30 (GB30), or Huantiao. This is a returning patient who has provided general consent to treatment. This is the first time you will perform treatment on GB30 (Huantiao) for this patient. How should you obtain consent?

- a) You have implied consent, so nothing additional is required.
- b) Ask for the patient's consent verbally.
- c) Ask the patient for written consent.

Question Feedback

Gallbladder 30 (Huantiao) is a sensitive area. You must receive written consent before the first treatment of all sensitive areas. Describe the area you need to touch to perform the procedure, explain the reason for touching the area, and ask for the patient's consent before beginning.

If you see the same patient again, and want to perform the same treatment, you don't need written consent again. You can remind the patient about the form they signed previously, tell them you want to perform the same treatment, and ask for their verbal sensitive area consent.



Question 2

A patient comes back for a follow-up treatment for heartburn and indigestion. All symptoms have improved, and the patient is happy with the last treatment and would like the same one. However, they have a temporal headache. You would like to add Taiyang (EX-HN5) on both sides. Which part of the treatment is implied and which part should you obtain expressed consent for?

- a) You have implied consent for both treatments
- b) You have implied consent for the heartburn and indigestion treatment but require verbal consent for the Taiyang (EX-HN5) acupuncture point
- c) You require written consent for both treatments

Question Feedback

You have implied consent for the previous treatment because the patient told you they would like to receive it again.

The Taiyang (EX-HN5) acupuncture treatment requires expressed consent because it is a new treatment for the patient. Verbal consent is sufficient because the Taiyang (EX-HN5) point is not a sensitive area.

Section 3: Diagnosis and Treatment Application

A patient comes into your practice and asks you to realign/re-set their shoulder as it has fallen out of the shoulder joint. What do you tell them?

- a) I can begin your treatment right away.
- b) This falls outside the scope of my practice. I would recommend going to a hospital as soon as possible.
- c) This isn't normally the type of treatment I provide but we can try a combination of acupuncture and other TCM treatments.

Question Feedback

Bone-setting is outside the scope of the controlled acts that can be performed in Ontario. Due to the emergency nature of this situation, you need to direct the patient to an emergency clinic.

Section 4: Infection Control Application

After removing a needle, you notice a small amount of blood. This particular patient rarely bleeds after acupuncture. What steps should you take to stop the bleeding?

Select all that apply.

- a) Put on gloves.
- b) Apply pressure on the skin at the insertion site with a clean cotton swab.
- c) Dispose of the swab immediately.
- d) Clean the area with an alcohol wipe.



- e) Apply a band aid if the bleeding did not stop.
- f) Communicate what happened, that any swelling or bruising will subside naturally after a few days, and that the patient can contact you if they have any additional concerns.
- g) Following treatment, thoroughly wash hands to reduce the risk of cross-infection with subsequent patients.

Question Feedback

It's important to put on gloves to both protect yourself and to limit the risk of transferring an infection. Apply pressure until bleeding stops and clean the area around the point with an alcohol wipe. Apply a band aid if the bleeding does not stop.

Tell the patient that there is some bleeding but it's not a cause for concern. Inform them that there may be some swelling and bruising but that it should be gone within a few days.

Please consult the Safety Program Handbook Section 4.4.2 for more detail.

Section 5: Professional Boundaries Self-Reflection

If a patient asks personal questions (e.g., Are you married? Are you single? Do you have children? What do you do for fun outside work?), how should you respond in a way that maintains professional boundaries?

Select all that apply.

- a) Respond concisely to the patient's questions you are comfortable answering and then redirect the conversation back to the patient, their treatment, and TCM.
- b) Provide thorough and personal answers to each of the patient's questions
- c) Document if something potentially inappropriate occurred between you and a patient (e.g., any questions, statements or actions that were unprofessional and made you feel uncomfortable).

Question Feedback

If a and c are selected:

There are many valid ways to respond to a patient asking personal questions. In general, however, it's important to redirect the conversation back to the patient, their treatment, and TCM to ensure the relationship remains professional. It's also important to document if something potentially inappropriate occurs with a patient.

If a OR c are selected

Note also that best practice would be to respond concisely to the patient's questions, AND to document if something potentially inappropriate occurred between you and the patient. There are many valid ways to respond to a patient asking personal questions. In general, however, it's important to redirect the conversation back to the patient, their treatment, and TCM to ensure the relationship remains professional.



Section 6: Preventing Sexual Abuse Application

A patient comes to you with indigestion, asthma, pain in the chest, palpitation, insufficient lactation, and difficulty swallowing. You would like to use the acupuncture point Conception Vessel 17 (CV17), or Shanzhong. What type of consent should you obtain for CV17 (Shanzhong) if this is your first treatment with the patient?

- a) You have implied consent
- b) You need verbal consent
- c) You need written consent

Question Feedback

You require written consent to use point CV17 (Shanzhong) because it is a sensitive area located in the middle of the patient's chest, and the patient has not previously provided consent to use that area.

Section 7: Record Keeping Application

Which of the following steps do you take to keep your records secure and confidential? Select all that apply.

- a) I keep records in a secure storage area to restrict unlawful or unauthorized access. I back up files and establish restore protocols and processes.
- b) If I keep paper records in a secondary storage area (off-site) or scanned and saved electronically, they need to be retained securely.
- c) I destroy or shred records in a secure environment.
- d) Contractors agree to and follow confidentiality requirements and agreements.
- e) I keep a log of the records that have been destroyed.

Question Feedback

All the listed steps are required to keep your records secure and confidential.

Section 8: Advertising Application

Question 1

In a member's fee schedule, you see "Purchase 10 treatments for \$850 and receive 12 treatments." Is this acceptable according to the College's Standard for Advertisement?

- a) Yes
- b) No

Question Feedback

That is correct.



Members must refrain from offering a reduction of fees for prompt payment and advertising pre-paid treatment packages.

Question 2

A member is known as the "Cancer Doctor" and advertises in a local newspaper that they can "cure" all kinds of cancer. Why is this improper?

Select all that apply.

- a) Members may not use the title of Doctor
- b) Members cannot guarantee results
- c) Members may not include information about the services they offer in advertisements
- d) Members may not imply specialization in a particular area or treatment

Question Feedback

Members may only use titles authorized by law or by the College on all advertisements. Under the Traditional Chinese Medicine Act, 2006, S.O. 2006, c.27, there are two protected designations and titles:

- R. TCMP, Traditional Chinese Medicine Practitioner and/or Acupuncturist
- R. Ac, Acupuncturist

Members are unable to guarantee specific results with patients as each will respond to traditional Chinese medicine individually. In addition, members may not use titles that infer expertise or a specialty such as "Cancer Doctor."

Section 9: Legislation, Standards and Ethics Application

I can use the title and designations of R. TCMP and R. Ac in all provinces and territories of Canada if I am registered with CTCMPAO.

- a) True
- b) False

Question Feedback

The titles of R. TCMP and R. Ac may only be used in Ontario when you are registered with CTCMPAO.