

Standards of Competency and Practice

Standards of Competency and Practice | Acupuncture Committee

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1. Introduction

- 1.1 An acupuncturist is a person who, having completed an appropriate training program based on the principles of Traditional Chinese Medicine (TCM) and on basic biophysical science, has the knowledge and skills necessary to diagnose and treat a range of diseases and disorders using the insertion and manipulation of acupuncture needles and using the techniques of acupressure, cupping and moxibustion.
- 1.2 The Acupuncture Regulation establishes criteria for registration as an acupuncturist in Alberta. The purpose of these criteria is to ensure that acupuncturists have the knowledge and skills necessary for safe and effective practice.

2. Purpose of the Document

- 2.1 While the regulatory requirements for acupuncturists are outlined in the *Regulations*, the *Standards* of *Competency and Practice* provide more detail with respect to the knowledge and skills necessary for safe and effective practice as a registered acupuncturist in Alberta. **As such, these standards** should be read in conjunction with the *Regulation*.
- 2.2 For those already registered as acupuncturists in Alberta, this document serves to confirm the knowledge and skills they currently possess and as a guide for their continued practice. An acupuncturist will not only possess the knowledge and skills outlined in this document but demonstrate them in the course of their practice. It is incumbent upon the acupuncturist to maintain and improve competences as outlined in the *Regulation*.
- 2.3 One of the criteria for registration as an acupuncturist outlined in the *Regulation* is that an applicant has completed a training program approved by the Health Disciplines Board (the Board) for the purposes of registration as an acupuncturist or has completed a training program that is substantially equivalent to a program approved by the Board.
- 2.4 For those seeking registration, this document serves as a guide to the theoretical and experiential aspects they should be provided with in their education and training to prepare them with the minimum competencies (knowledge and skills) necessary to meet the minimum standard for practice as an acupuncturist. To date, a program consisting of 1,350 hours of theoretical instruction and 500 hours of clinical instruction/practice experience has been considered acceptable to attain this minimum level of competency.
- 2.5 Equally, any applicant who applies for registration who can demonstrate that their training has provided sufficient opportunity to learn the competencies in appropriate depth (i.e., the applicant's training program is substantially equivalent to a training program approved by the Board) will also be considered to have met one of the requirements of registration.
- 2.6 The Standards of Competencies and Practice for Acupuncturists will be reviewed on a regular basis and revised accordingly.

3. Standards of Competency

This section describes the competencies acupuncturists are expected to possess and maintain throughout their careers.

Competencies of Registered Acupuncturists

Foundations of Competencies

Acupuncturists have knowledge of:

- 1. The history and the development of TCM and acupuncture in China, North America, and worldwide, and of development of professional trends.
- 2. Basic theoretical concepts necessary to the practice of acupuncture including:
 - a. Yin/yang
 - b. Five elements
 - c. Fundamental body substances including:
 - i. Shen
 - ii. Jing
 - iii. Qi
 - iv. Blood/xue
 - v. Body fluids/jin ye
 - d. Zang-xiang/zang-fu
 - e. Channels and collaterals/jing-luo
 - f. Etiology and pathogenesis/bing yin and bingji, including:
 - i. External pathogenic factors (six pernicious factors) and internal pathogenic factors (seven emotional factors)
 - ii. Secondary pathogenic factors including:
 - iii. Miscellaneous factors
 - g. Prevention of diseases and principles of treatment
- 3. Basic theoretical concepts of biomedical science including:
 - a. Basic anatomy and physiology related to acupuncture
 - b. Basic pathology related to acupuncture

Specific Competencies

I. Acupuncture Points (Shu Xue)

Acupuncturists have the knowledge and skills necessary to:

- 1. Locate, identify, and use acupuncture points according to function, indications, precautions, and contraindications including:
 - a. Points of the 14 channels
 - b. Extra channel points/jing wai qi xue
 - c. World Health Organization (WHO) standard acupuncture nomenclature
 - d. Special groups of points including:
 - i. Auricular point
 - ii. Scalp points
 - iii. Hand points
 - iv. Face points
 - v. Five shu (five-transporting) points v11. channel meeting points

- vi. Lower he (sea) points
- vii. Yuan (primary) points
- viii. Luo (connecting) points
- ix. (Cleft) points
- x. Eight confluent points
- xi. Back-shu points
- xii. Front-mu points
- xiii. Eight influential points
- xiv. Forbidden points
- xv. Cautionary points
- 2. implement the principles of point selection and combination.

II. Diagnostic Process

Acupuncturists have the knowledge and skills necessary to:

- 1. Collect information from the patient using the four methods as follows:
 - a. Inquiry (Wen Zeng), including:
 - i. General information
 - ii. Family and personal medical history
 - iii. Current complaint(s)
 - iv. Sleep patterns
 - v. Bowel movements (frequency, volume, colour, texture of stool, accompanying symptoms)
 - vi. Urination (colour, volume, frequency, clarity, and accompanying symptoms)
 - vii. Appetite and digestion (food cravings, length of digestion, accompanying symptoms
 - viii. Thirst (volume of fluid intake and frequency, desire for temperature of fluid)
 - ix. Nutritional levels and patterns (eating or diet habits, body weight, sign and symptoms associated with diet)
 - x. Medication including prescriptions, non-prescriptions, herbals, and vitamins (type, dose, term of use, purpose, and their reactions)
 - xi. Chills and fever
 - xii. Perspiration (frequency, onset, extent, as related to eating, drinking and exertion)
 - xiii. Presence of pain (character, location, frequency)
 - xiv. Emotional state
 - xv. Use of alcohol, tobacco, caffeine, and narcotics
 - xvi. Exercise and physical activity
 - xvii. Sexual activity and birth control methods
 - xviii. Menstrual cycle and gynecological symptoms
 - xix. Sensations of body and extremities (hot, cold, numbness, pain, dizziness, tinnitus, palpitations, or chest constriction)
 - xx. Condition of skin, hair. nails, teeth, and sensory organs
 - b. Inspection (Wang Zeng), including:
 - i. Spirit (expression and general behaviour)
 - ii. Colour of face, skin, and excretions
 - iii. Body structure (balance and movement)
 - iv. Condition of tongue (colour, swelling, alignment, coating, shape, geographic location, movement, moistness)
 - v. Symptom site (colour, swelling, alignment, sensation, shape, location)

- c. Auscultation and olfaction (Wen Zeng), including:
 - i. Sound of voice including tonal qualities and volume
 - ii. Abdominal sounds
 - iii. Breathing and coughing sounds (quality and quantity)
- d. Palpation (Qie Zeng), including:
 - i. Qualities and positions of left and right radial pulses (rate, depth, rhythm, strength)
 - ii. Comparison of regional pulse sites (carotid, radial, femoral/umbilical)
 - iii. Temperature, moisture, texture, sensitivity and tissue structure of the chest, abdomen, ear, along the channels, at points and symptom sites
- 2. Organize and summarize the collected information into groups of symptoms using TCM theories of physiology and pathology including:
 - a. Eight principles
 - b. Zang-xiang (zang-fu) theories
 - c. Five elements
 - d. Sanjiao theory triple energizer
 - e. Qi, blood (Xue), essence (Jing) and body fluids (Jin Ye)
 - f. Etiology and pathogenesis
 - g. Channels/collaterals (Jing Iuo)
 - h. Four phases of febrile disease (Wei, Qi, Ying, Xue)
 - i. Six stages (Tai Yang, Yang Ming, Shao Yang, Tai Yin, Jue Yin, Shao Yin)
 - j. Natural progressions of illness and healing
- 3. Determine the pathogenesis exhibited by analyzing the groups of symptoms and identifying patterns among the groups of symptoms
- 4. Perform a differentiation of syndromes by comparing the patterns of symptoms against the patterns of known disorders and diseases
- 5. Make primary and secondary diagnoses based on the differentiation of syndromes

III. Treatment objectives and planning (Zhi Zhe and Zhi Fa)

Acupuncturists have the knowledge and skills necessary to select and formulate a treatment plan based on the diagnosis including:

- 1. Establishing appropriate treatment principles
- 2. Selecting specific treatment strategies to accomplish the treatment principles
- 3. Selecting appropriate points and point combination (e.g., Confluent Points of the Eight Extra Meridians, Meeting points, Entry and Exit points, Four Gates points, Xi-Cleft points, Source, and Luo points)
- 4. Considering the precautions and contraindication(s) of treatment and treatment modalities
- 5. Selecting appropriate therapeutic modalities (needles, moxa, cupping, acupressure, and/or gua sha, tuina)
- 6. Modify treatment when conditions warrant (i.e., children, pregnant women, weakened elderly, the terminally ill and acute emergency cases)
- 7. Evaluating effectiveness of treatment
- 8. Executing new or revised treatment strategy/plan based on evaluation of treatment
- 9. Making referral(s) where appropriate

IV. Treatment Techniques

- A. Acupuncturists have knowledge of:
 - 1. Basic Chinese herbology to determine how herbs complement health and disease and interact with acupuncture treatment
 - 2. Basic pharmacology to determine how prescription drugs, non-prescription drugs and vitamins interact with acupuncture treatment and how they can complement drug therapy
 - 3. Basic tui-na techniques
 - 4. Gua sha technique
- B. Acupuncturists have the ability to:
 - 1. Position the patient appropriately based on the location(s) of selected points
 - 2. Locate the selected points
 - 3. Select and use appropriate therapeutic technique(s) according to the indications, contraindications and precautions including:
 - a. Using needling techniques appropriately by
 - i. Inserting acupuncture needles
 - a) the appropriate depth
 - b) the appropriate duration
 - c) the appropriate angle
 - ii. Withdrawing acupuncture needles
 - iii. Using needle manipulation techniques including
 - a) tonifying
 - b) reducing
 - c) even method
 - b. Using moxibustion techniques appropriately including
 - i. direct
 - ii. indirect
 - c. Using acupressure and/or tuina
 - d. Using electro-acupuncture techniques appropriately including
 - i. tonifying
 - ii. reducing
 - iii. even method
 - e. Using cupping techniques appropriately
 - f. Using seven star needling technique appropriately
 - g. Using three edge needling technique appropriately
 - h. Using gua sha technique

V. Treatment of Diseases

TCM offers a perspective on the nature of illness and health that is uniquely different from, and is complementary to, Western Medicine. Proper diagnosis in accordance with TCM theories is critical for planning and carrying out effective treatment with acupuncture techniques. By correctly identifying the pattern of the disorder according to TCM and by applying the appropriate treatment to correct imbalance, acupuncturists have the knowledge and skills necessary to treat a broad range of internal and external diseases and disorders, including:

- 1. digestive diseases
- 2. uro-genital diseases
- 3. cardio-pulmonary diseases
- 4. infectious disease
- 5. disease of eyes, ears, nose and throat
- 6. musculo-skeletal diseases
- 7. neurological diseases
- 8. psychiatric diseases
- 9. dermatological diseases
- 10. gynecological diseases
- 11. pediatric diseases
- 12. geriatric diseases
- 13. addictions
- 14. immunological diseases
- 15. endocrine diseases

VI. Equipment and Safety

Acupuncturists have the knowledge and skills necessary to:

- 1. Appropriately select and maintain acupuncture equipment, including gauges, types, manufacturer quality, inspection for safe operation, cleanliness, sterilization, and disposal
- 2. Manage adverse reactions to acupuncture treatment (fainting, needle bending/breaking, emergency medical conditions during therapy) or initiate emergency measures and refer to physician or emergency care provider when appropriate.

VII. Communication Skills

Acupuncturists have the knowledge and skills necessary for:

- 1. Listening to, explaining to, and educating the patient about health and illness as it relates to acupuncture;
- 2. Educating the patient on taking preventative and self-care for one's own health;
- 3. Demonstrating compassion and respect toward patients.

VII. Collaboration with Other Caregivers

A. Acupuncturists have knowledge of:

The roles and responsibilities of other health care providers and their standards of practice,

B. Acupuncturists have the ability to:

Communicate effectively with other caregivers, facilitating referral, consultation and collaboration when appropriate;

C. Acupuncturists have the understanding where:

They shall not advise a patient to discontinue any treatment prescribed by a physician or other health care provider.

VIII. Professional, Legal, and Other Aspects

Acupuncturists have knowledge of:

- 1. The standards of practice for acupuncture,
- 2. The standards of conduct as outlined in the Acupuncture Regulation,
- 3. Legislation and health agency policies and procedures pertaining to acupuncture,
- 4. Legal responsibilities and obligations to clients and other health care provider,
- 5. Provincial documentation and reporting standards and requirements.

4. Standards of Practice

Philosophy and Principles of Acupuncturist Practice

- 4.1 The philosophical framework for the practice of acupuncture is grounded in TCM. TCM offers a perspective on the nature of illness and health that is uniquely different from, and is complementary to, Western Medicine. In TCM, human beings are deeply connected with all the phenomena of nature: formed from, and nourished by nature's essential elements, influenced by its rhythms and subject to its laws of growth and change. Health can be defined as a harmonious relationship between one's own internal condition and one's external environment; there must be a balance between one's body/mind/spirit and one's relationship with nature.
- 4.2 In TCM theory, the human body is an energetic system in which energy (Qi) flows along defined pathways (medians) throughout the body. When the body is in harmony and balance the flow is smooth. An imbalance disrupts the flow of Qi and manifests as pain, dysfunction, injury, disease, and/or disorders. Acupuncture is a therapy to restore the flow of Qi to promote health and balance.
- 4.3 The theories of Yin and Yang, the Five Elements, Qi and the Fundamental Substances, pathogenesis, and differentiation of syndromes and meridians and points provide the framework for the fundamental understanding of human health and illness and for the use of needle acupuncture, moxibustion, cupping, acupressure, and other TCM modalities. The main emphasis is prevention of illness by maintaining the balance and harmony within.

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4.4 Proper diagnosis in accordance with TCM theories is critical for planning and carrying out effective treatment with acupuncture techniques. By correctly identifying the pattern of the disorder according to TCM and by applying the appropriate treatment to correct imbalance, the acupuncturist helps the patient to regain health and balance naturally. The acupuncturist may combine treatment with other TCM modalities such as the ingestion and topical use of herbs, dietary considerations, and cultivation of a positive life philosophy and lifestyle to enhance vitality.

5. Standards for Acupuncturist Practice

Cleanliness

- 5.1 An acupuncture clinic shall be maintained in a clean and sanitary condition at all times.
- 5.2 An acupuncturist's hands shall be washed thoroughly with antibacterial soap and running water immediately before and after treating patients or handling acupuncture needles and other instruments.
- 5.3 An acupuncturist shall establish a clean field on a dry surface prior to providing an acupuncture treatment and shall maintain this clean field throughout the treatment.
- 5.4 An acupuncturist shall clean acupuncture points, where needles are to be inserted, with an appropriate antiseptic before insertion of the needle.
- 5.5 An acupuncturist shall use only pre-sterilized disposable needles and shall avoid contaminating the needle during therapy.
- 5.6 An acupuncturist shall dispose of all contaminated acupuncture needles immediately after use in a sealed, unbreakable container marked "hazardous waste" or "sharp needle container".
- 5.7 An acupuncturist shall ensure that all equipment and material to contact the patient's skin are maintained in hygienic condition.

Patient Information and Informed Patient Choice

- 5.8 An acupuncturist shall advise the patient as to potential risks and potential discomfort of the treatment.
- 5.9 An acupuncturist shall advise the patient as to nature and the course of the treatment.
- 5.10 An acupuncturist shall communicate effectively with the patient and shall ensure the patient's understanding of language and concepts used.
- 5.11 An acupuncturist shall obtain informed consent for any treatment by having the patient sign a consent form confirming understanding of the risks and benefits of treatment and shall obtain the patient's written consent to any significant changes to the treatment.
- 5.12 An acupuncturist shall not intentionally mislead the patient.

Conditions Requiring Precaution

5.13 An acupuncturist shall use good judgment and appropriate precautions when deciding whether to treat and when treating all patients and when determining whether to treat, consult with another appropriate health care provider, or refer to another appropriate health care provider where a patient has a severely infectious or systemic disease, or a frail/medically complicated condition (for example, AIDS, hepatitis, diabetes, severe skin disease, cancer, acute heart attack, severe hemorrhage, is currently pregnant, is a child under the age of eight, or is elderly).

Consultation with/Referral to Other Health Care Providers

- 5.14 An acupuncturist shall consult with an appropriate health care practitioner in a timely manner if a condition that is beyond the acupuncturist's ability arises before or during acupuncture treatment.
- 5.15 An acupuncturist shall not discourage the patient from consulting with another health care professional for a second opinion, at any time either before or during the course of treatment.
- 5.16 An acupuncturist shall consult with or refer a patient to another appropriate health care provider in a timely manner if the patient's condition, for which the treatment is intended, fails to improve or worsens beyond reasonable expectations.
- 5.17 An acupuncturist shall immediately refer the patient to a physician or other appropriate health care provider, if immediate medical treatment is required, or any complication arising out of acupuncture treatment.
- 5.18 An acupuncturist shall know one's own abilities and limitations in relation to the risks of treating diseases and make appropriate judgments about whether or not to treat or referring to another health care provider where appropriate.

Use of Instruments

- 5.19 An acupuncturist may use only non-invasive measuring devices in the examination of a patient, including thermometers, stethoscopes, electrical devices used for location acupuncture points, pulse rate monitors, and flashlights.
- 5.20 An acupuncturist shall ensure that all equipment, including equipment associated with the techniques of moxibustion and cupping, is regularly inspected and maintained in good working order.

Patient Records

- 5.21 An acupuncturist shall respect the confidentiality of patient records and shall store records in a secure place.
- 5.22 An acupuncturist shall complete a record of patient management, in English, for each patient.
- 5.23 An acupuncturist shall use the nomenclature of acupuncture point by the WHO.
- 5.24 An acupuncturist shall retain any and all informed consent forms for each patient as part of the patient record.
- 5.25 An acupuncturist shall retain the patient record in the clinic for at least five (5) years after the patient receives treatment from or consults with the acupuncturist.

5.26 An acupuncturist shall obtain the consent of the patient prior to releasing patient records to another practitioner, an insurance company or any other agency or person, except where required by the *Health Disciplines Act* or any other enactment or by order of a court to disclose the information.

6. Version History

Date	Notes
April 20, 2005	SOP revised.
July 6, 2022	Updated for new branding and formatted and proofread the SOP.