

## Chiropractic Board of Australia – update for ICRS

April 2022

### Chiropractic registrant data

The Chiropractic Board of Australia (the Board) publishes quarterly data profiling Australian chiropractic workforce, including a number of statistical breakdowns about registrants.

#### Registration type by principal place of practice (as at December 2021)

Registration types	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP	Total
General	64	1,869	25	915	367	66	1,490	761	62	5,619
Limited										0
Non-practising	4	97	3	53	17	1	104	35	139	453
<b>Total</b>	<b>68</b>	<b>1,966</b>	<b>28</b>	<b>968</b>	<b>384</b>	<b>67</b>	<b>1,594</b>	<b>796</b>	<b>201</b>	<b>6,072</b>

The Board shares this data with the profession, community and stakeholders [here](#).

The 2020/21 Annual report can be found [here](#).

### Advance copy: Revised Code of conduct

The Board, together with eleven other National Boards have published an advance copy of the revised shared [Code of conduct](#). The code is an important part of the Board's regulatory framework and helps to keep the public safe by outlining the Board's expectations of professional behaviour and conduct for registered health practitioners. The code is shared across twelve professions which supports interprofessional practice and contributes to safety and quality in healthcare.

The public can also use the code to better understand what they can expect from practitioners and if the care they provide meets expected standards.

An advance copy of the code is available now to help practitioners and the public understand the changes in the revised code which comes into effect on 29 June 2022.

### Check your advertising: Chiropractic examples

Advertising is an important way for chiropractors to promote their services to the public. To help chiropractors comply with their obligations, practical tools and examples have been developed to help understand and apply the advertising requirements.

The Board has recently updated its [chiropractic examples](#) of advertising claims that don't meet the legal requirements of the [National Law](#) including examples of how to make them compliant. The examples are specific to chiropractors and are some of the most common mistakes we see.

There is more information and advertising resources available in the [Advertising hub](#)

### **Supervised practice framework**

The [Supervised practice framework](#) was developed by the Board along with twelve other National Boards. The framework outlines the Board's expectations and supports supervisors and employers to understand what is necessary to effectively carry out supervised practice.

### **Forum – Evaluative judgement**

As part of its ongoing commitment to explore professional frameworks with chiropractors and stakeholders, the Board held a virtual forum on 3 November 2021. This forum explored the concept of evaluative judgement in learning in professional practice and its applications to the health professions.

Further information, including the recording and forum resources can be found [here](#).

### **Keep in touch with the Board**

- [Visit our website](#) for news about the profession and for registration standards, codes, guidelines, policies and fact sheets.
- Address mail correspondence to: Dr Wayne Minter AM, Chair, Chiropractic Board of Australia, GPO Box 9958, Melbourne VIC 3001 or via email at [chiropracticboard@ahpra.gov.au](mailto:chiropracticboard@ahpra.gov.au).

April 6, 2022

## **Update from CCEB to ICRS**

Dear all,

March 11, 2022, officially marked the two-year anniversary of the CCEB COVID-19 adaptation. It was on that date in 2020 that the 'work from home' guidance was provided by the public health officer and the entire CCEB staff shifted instantaneously to a remote work environment. I am so proud of our team, both board and staff, for their swift and open-minded response to the pandemic. CCEB operations never missed a beat and, in fact, the CCEB became a leader in the testing world, being called upon to share our resources and pointed to as a success story in a field of not-so-positive media. We continue to be called upon to share our experience with colleagues at conferences and in webinar presentations. The short story is that candidates continued to have testing opportunities and our year-over-year testing capacity was not limited.

While managing the tumultuous COVID-19 response, the team had other priorities on the go and has continued to move forward with these initiatives and projects, including upcoming revisions to our website and enhancements to our candidate and volunteer database platforms. The CCEB continues to work toward the launch of our revised examination blueprint as well. The pace has been impacted by the COVID-19 pandemic as some of the key work related to examination item creation is, optimally, conducted in person. We are, however, committed to continuing with this work as it becomes possible to again meet in person, and to preparing for the launch of the new examination blueprint and, by extension, the new examination.

As a brief history, in November 2018 the Federation of Canadian Chiropractic (FCC) published "[Entry-to-Practice Competency Profile for Chiropractors in Canada](#)". This timely document became a pivotal source as the CCEB began work toward an updated examination blueprint. We engaged David Cane PhD, an outcome-based learning consultant, and assembled a team of subject matter experts including experienced chiropractors and chiropractic educators from across Canada. They have been working diligently for the past several years to craft indicators of competence, conduct national surveys related to the competencies, review existing examination content to generate a gap analysis and map exam items to the new competencies under the guidance of Anthony Marini PhD and Matthew Marini JD PME of Martek Assessments Ltd., the CCEB psychometric consulting firm. Additionally, the CCEB conducted a survey of our member regulators in the summer of 2020 to better understand the regulatory language

used to describe the examination and any other pertinent exam-related matters. This information has been synthesized and we are working through the final important logistics to provide an exact timeline for the new blueprint and examination launch.

The move to a competency-based examination provides an opportunity for the CCEB to significantly enhance our focus on practice-relevant content by including case-based written examination items. This is an exciting shift and an opportunity to develop more complex written items that dive deeply into clinical competence and readiness for practice in Canada. These items are more nuanced and require a demonstration of important clinical discernment and understanding within the Canadian context, critical aspects of public protection. We strongly believe that this shifted exam focus will be a critical benchmark for both new graduates as well as experienced practitioners from other jurisdictions as the focus is entirely on content relevant to Canadian practice. As the title of the FCC document implies, the competencies are not simply entry to chiropractic practice, but they are specifically the bar to entry to practice in Canada.

Additionally, there is a move to increasing the interactive elements of the clinical examination. A significant portion of the FCC competencies are most readily assessed in the clinical environment through the objective structured clinical examination (OSCE). As such, the length and station format of the OSCE are being reviewed to meet these testing needs. These are all exciting opportunities to strengthen and evolve the CCEB examination and continue to meet our strategic objective of examination excellence.

Continuous improvement and agile adaptation have been the cornerstones of the CCEB's 30+ year history and certainly the impetus for our unique success during the pandemic. We are excited to continue to be leaders in high stakes entry-to-practice testing in Canada and a valued partner to our members, the provincial regulators, in their critical work in public protection.

Kind regards,

A handwritten signature in black ink, appearing to read 'Gemma Beierback', with a long horizontal flourish extending to the right.

Gemma Beierback, CEO



The Councils on Chiropractic Education International

# CCEI Update

April 22 2022

The Councils on Chiropractic Education International (CCEI) is an organisation of chiropractic accrediting bodies worldwide. CCEI is committed to excellence in chiropractic education and aims to define and promote consistent, high-quality standards for chiropractic educational programmes worldwide.

## Mapping project

The CCEI has posted the Mapping Project report comparing each member agency's Standards, Competencies, and Procedures of Accreditation onto our website under 'important documents'. These summary documents demonstrate at a high level, via tick marks, appropriate mapping of each member agency's Standards to the CCEI Framework 'Standards'. CCEI members have agreed to prepare a full paper outlining the rigorous processes used to conduct this mapping project, along with details of each member agency's mapping documentation. This paper has been submitted to the Journal of Chiropractic Humanities for publication and CCEI is presently addressing minor comments. This work will also be submitted to be presented as a poster or presentation at this year's World Federation of Chiropractic (WFC) Education conference. The mapping process undertaken ensures that each member agency's Standards, competencies, and procedures meet or exceed those described in the *International Framework for Chiropractic Education and Accreditation* and will be used for to determine eligibility of future CCEI Members.

## Meetings

The CCEI Board had two virtual meetings in 2021, in April and December and one virtual meeting in March 2022. Representatives of CCE-Latin America (CCE-LA) attended and



The Councils on Chiropractic Education International

participated in the December meeting as did the World Council of Chiropractic Students (WCCS). Much of CCEI's work can be carried out remotely, however face to face meetings are generally held annually, and timed to coincide with meetings and conferences relevant to CCEI members. The CCEI is investigating the possibility of conducting in-person meetings at the November 2 – 5, 2022 World Federation of Chiropractic (WFC) Education conference to be held in St. Louis, Missouri, USA.

### **Change of Board Members**

Dr Grayden Bridge stepped down as a Council on Chiropractic Education Canada (CCEC) member on the CCEI Board. In March 2022, we welcomed Dr Darryl Kashton to replace Dr Bridge's position, he is currently the vice-chair on CCEC. As with any transition, we express our gratitude to those who have dedicated their efforts and welcome their replacements with anticipation and high expectations. We look forward to working with Dr Kashton.

### **Inquiries**

Throughout the year, the CCEI responds to inquiries mainly from individuals wishing to study in another country or move their practice to another jurisdiction. We have also been receiving requests for information from potential future chiropractic programmes around the world. Documents such as the CCEI Framework, mapping, and policy documents have been useful in helping respond to the various inquiries. Further, the ability to reach out easily to the various member agencies helps us to respond to any inquiries effectively and efficiently.

The CCEI welcomes enquiries and input from international students, programmes, chiropractors, and other chiropractic stakeholders and will strive to answer such enquiries to the best of our abilities.

# Update Report April 2022

## Regulatory Reform

1. On 24 March 2021, the UK Government published a consultation on regulatory reform for healthcare regulators ([Regulating healthcare professionals, protecting the public](#)). The consultation document stated:

‘The UK model of regulation for healthcare professionals is rigid, complex and needs to change to better protect patients, support our health services and to help the workforce meet future challenges. In doing so, it needs to be faster, fairer, more flexible and minimise costs to registrants.’
2. Additionally, the Government signalled their intent to introduce a new Health and Care Bill in the next session of Parliament, coming into effect in 2022. The Bill includes additional powers for the Secretary of State for Health and Social Care to make changes to the regulation of healthcare professionals through secondary legislation.
3. An independent review was commissioned, to explore the potential use of these additional powers, and including a review of the number of regulators. The independent review commenced in June 2021 and concluded in December 2021. As yet there have been no significant developments.
4. As part of this larger reform programmes draft legislation is being developed which would apply to the GMC, initially. This legislation takes forward the policy proposals that were subject to the consultation earlier in 2021 and applicable to all regulators. The Department is working with all regulators to draft this and it intends to consult on the Medical Professionals Order 2022 over summer 2022, expecting to lay the order before Parliament towards the end of next year.
5. In summary the reform programme includes:
  - a. The Health and Care Bill provisions to enable changes to the regulation of healthcare professionals through secondary legislation. The Bill has completed its Committee stage in the Commons;
  - b. The KPMG review of how the healthcare professional regulatory landscape might be simplified. The report of the review is expected to be submitted to the Department by the end of this year;

- c. A consultation in early 2022 on the criteria for deciding which professions should be statutorily regulated.

## GCC Strategy 2022-24

6. Following changes to the external health and social care landscape, including the significant impact from COVID-19 pandemic and more immediate prospects of regulatory reform, Council agreed to the development of a new GCC strategy in summer 2021.
7. The new three year strategy was subject to consultation and approved by Council in September 2022 and is on the GCC website.
8. The Strategy sets out the GCC's statutory functions and four new aims supported by 12 new objectives. The aims each focus on patients/public; chiropractors; the profession; and the GCC.
9. The business plan for 2022 will begin the implementation of the new strategy. Projects include the recent launch of a new patient portal on the GCC website with information and resources developed with patients for patients.
10. We will be undertaking a full consultation on a remote hearings protocol, continue to take a proactive approach to handling complaints about misleading advertising and have begun to review our Consent guidance.

## Guidance

11. Following extensive development and consultation, new and formal GCC guidance on diagnostic imaging has been issued, effective from 1 March 2022, and is available from the [Registrant Resource Centre](#) (Diagnostic Imaging tab) on the GCC website.
12. Consistent with other health and social care professions, the guidance has been developed to promote the best use of imaging for the effective assessment and care of patients. It should be seen alongside, and used in conjunction with existing ionising radiation regulations as well as iRefer and NICE guidance (links available in the [Registrant Resource Centre](#)).
13. The guidance was developed following a coroner's request to the GCC to explore the requirement for pre-treatment imaging to establish whether a patient is suitable for treatment. In response, the GCC Council created an Expert Group, drawing on specialists from chiropractic, radiology, radiography, MSK specialists and other disciplines, to explore the clinical evidence for the use of x-ray in chiropractic, and to consider specific guidance for the profession.

## Quality Assurance of Recognised Qualifications

14. We have produced an [annual report for 2021](#) into all the activities of our Education Committee.

## Test of Competence (TOC)

15. During 2021 the Committee has continued to oversee the implementation of the TOC for all international graduates including those from Europe, post-Brexit.

16. Due to the pandemic the GCC held all 2021 TOC interviews remotely and monthly to meet demand. Demand has increased during 2021 with the highest number of applicants since the new test began in 2015.

17. TOC interviews have continued remotely in 2022 and by May 31 applicants will have sat the TOC.

18. The Annual report for the TOC and the Annual report for Registrations 2021 can be found on the [GCC website](#).

## Review of the Education Standards and Quality Assurance Handbook

19. The Education Committee oversaw a scoping review of the Education Standards and Quality Assurance Handbook, published in 2017, to determine whether these remain fully fit for purpose, or whether further high-level development or revisions are needed, at this time.

20. The review took into account the current and anticipated future skills requirements (in the medium term) of a chiropractic graduate entering the evolving wider healthcare profession. The perspectives of chiropractic educators, education visitors, employers and patients were sought through a series of focus groups. Comparisons were also made with relevant standards and frameworks developed by other healthcare regulatory and professional/educational bodies.

21. The Committee considered the report and the findings and agreed that a full review of the Education Standards and the Quality Assurance Handbook be taken forward in 2022 as part of the GCC's business plan. That review has begun and we will be consulting on the draft Standards over the summer.

22. The GCC's QA process for approval of programmes is comparable to other relevant frameworks. All are based upon a sequential process of stages to demonstrate that required standards were met for initial approval. This is followed by processes assuring that required standards will continue to be met, based upon assessment and ongoing monitoring of the risk level of each provider and/or programme.

23. Whilst the QA processes remain appropriate, favouring the model of initial approval followed by continuous approval, there are areas for improvement and these include aspects of the underpinning QA framework, how it is articulated and its processes of implementation.

## Professional Standards Authority - Performance Review 2020/21

24. The Professional Standards Authority (PSA) formally reviews the performance of UK statutory healthcare regulators annually. The report of our performance in 2020/2021 was published on 1 December 2021. This was the second year of being assessed against the new standards of good regulation.

25. The PSA noted our:

- 'pragmatic and proportionate approach' in developing Covid-19 guidance to help registrants provide safe and effective care during the pandemic
- flexibility in how educational providers could assess students while fully maintaining the agreed Education Standards
- encouragement for registrants to adopt remote and informal learning opportunities, allowing them to maintain their Continuing Professional Development requirements
- effective use of technology to reduce the pandemic's impact on its core functions, including online Fitness to Practise hearings, quality assurance visits and Council and committee meetings.
- work to identify and act on misleading advertising claims that chiropractic could prevent or treat Covid-19. This work has been continued with the development of registrant toolkits, providing GCC/Advertising Standards Authority compliant guidance and advice on a range of marketing and communications content activities, such as advertising, social media and messaging and websites.

## Fitness to Practise Annual Report 2021- Key points

The key points of note in the [annual report](#) are:

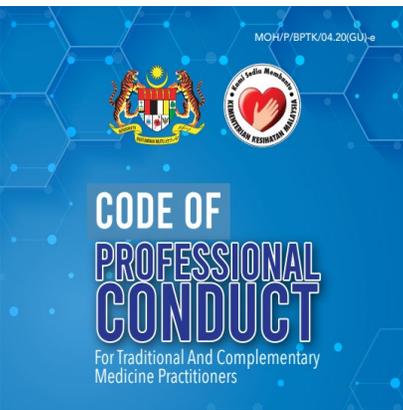
- In 2021 the number of complaints received about chiropractors' fitness to practise decreased by 41% from 2020.
- The Investigating Committee considered a similar number of cases compared to 2020.
- Complaints were made about 58 chiropractors.
- Most complaints were received from patients or relatives of patients.
- Most complaints related to substandard treatment.
- Increase in number of interim suspension hearings albeit one suspension.
- Of the cases concluded by the Investigating Committee nine of these were referred to a Professional Conduct Committee hearing.
- Five chiropractors were found guilty of unacceptable professional conduct by the Professional Conduct Committee.

# Malaysia started the phase 2 enforcement of the Malaysian Traditional and Complementary Medicine Act 2016 [Act 775].

## Highlights:

- Registration of practitioners in recognized practice areas
- This is a transition period where registration is encouraged
- Sections and subsections of Act 775 come into operation, including registration and discipline
- 2021 Regulations come into operation
- Transition period will be 1 March 2021 until 29 February 2024

[CLICK HERE](#) for more information about Phase 2



The Malaysian Ministry of Health has published the **Code of Professional Conduct** of Traditional and Complementary Medicine Practitioners.

[https://tcm.moh.gov.my/en/upload/cpc\\_firstedition.pdf](https://tcm.moh.gov.my/en/upload/cpc_firstedition.pdf)

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Click HERE <https://tcm.moh.gov.my/ms/upload/Blueprint.pdf> for the 80 page TCM Blueprint

Regards,

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April 2022

*Ki a tatou katoa kua huihui mai i tenei ra, tēnā koutou katoa.*

*To all gathered today, greetings.*

Te Poari Kaikorohiti o Aotearoa, the New Zealand Chiropractic Board (the Board) is one of 17 [Responsible Authorities](#) (RA's), appointed by the Minister of Health under the Health Practitioners Competence Assurance (HPCA) Act 2003. The Board is responsible for the administration of the Act in respect of the Chiropractic Profession in Aotearoa, New Zealand.

There are approximately 670 chiropractors actively practising in New Zealand and 190 non-practising chiropractors registered with the Board. The Board is made up of 7 Board members (5 Chiropractors and 2 laypeople) with 2 executive support staff (Registrar/General Manager and Deputy Registrar).

Board members serve a three-year term and may be reappointed by the Minister of Health to a maximum of nine years (three terms). One of the challenges currently facing the Board is the loss of the majority of its long-standing members and the consequent reduction in institutional knowledge at a governance level.

### CHALLENGES POSED BY THE COVID PANDEMIC / VACCINATION MANDATES

New Zealand continues to operate under strict conditions with the Government-instigated [COVID-19 Protection Framework](#) (traffic light system). Recent changes to the Framework saw our borders open to a number of countries without the requirement for incoming travelers to quarantine and an easing of restrictions to numbers permitted at social gatherings.

The major challenge facing the profession at this time is the mandatory Covid-19 vaccination for all Registered Healthcare providers and public-facing healthcare staff. These mandates have resulted in a very divided profession. A combination of mandates and lockdowns have seen some practitioners unable to practice since August 2020. The Board received several complaints from stakeholders and the public regarding chiropractors practising unvaccinated. These complaints have been managed thus far through the Ministry of Health's enforcement team; it is expected the Board will consider these complaints in due course.

As the world begins to "live with COVID", it is hoped the easing of most, if not all domestic restrictions and measures will occur by the end of the year. The Board is looking forward to conducting Board-meetings in person once more and dispensing with digital meeting platforms!

### NEW ZEALAND'S UNIQUE DOMESTIC ENVIRONMENT

New Zealand has a sole educational institution providing a chiropractic qualification: the [New Zealand College of Chiropractic](#) (NZCC). The NZCC graduates approximately 70 students annually and throughout the pandemic proactively minimized graduation delays and pandemic impact with accelerated student pastoral care, and remote and on campus learning initiatives. The biggest impact of the Pandemic for the college, was the inability to accept international students in 2021 and 2022 due to boarder restrictions and controls.

Along with our sole chiropractic qualification provider, New Zealand has one professional association, the [New Zealand Chiropractor's Association](#) (NZCA). NZCA membership is voluntary with circa 40-50% of practising Chiropractors holding membership.

The Board, the NZCA and the NZCC have a tripartite memorandum of understanding agreement (MoU) that has been in place since circa 2009. This MoU has allowed a close, mutually beneficial working relationship to flourish. The three bodies meet 2-3 times a year providing a platform to discuss important topics openly and freely. These meetings have led to joint publications and project collaboration, and the space to discuss conflicts and issues that arise from time to time.

At times, the groups may not always agree or hold the same perspectives, they do however, have a mutual respect and understanding of the important and unique role each play for the chiropractic profession.

## IN THE REGULATORY SPACE

### New Zealand health reforms

The structure of the current health system in New Zealand has significant and persistent issues in delivering equitable and consistent healthcare for all New Zealanders. In 2018, the Government commissioned the Health and Disability System Review to identify how it could reform the health system to address these inherent inequities. The ultimate aim of the Review is to transform the health system into a single nationwide health service providing consistent, high-quality health services for all New Zealanders, particularly groups who have been traditionally underserved. The reforms include:

- refocus the role of the Ministry of Health as the chief steward of the health system and the lead advisor to Government on matters relating to health
- create a new organisation, Health NZ, to take responsibility for day-to-day running of our health system – into which all District Health Boards will be consolidated
- create a new Māori Health Authority to ensure our health system delivers improved outcomes for Māori, and to directly commission tailored health services for Māori
- establish a new Public Health Agency within the Ministry of Health and a strengthened, national public health service within Health NZ, to make sure we are always ready to respond to threats to public health, like pandemics.

The date for these reforms to take place is 01 July 2022. How this will affect the regulation of health care in New Zealand remains to be seen with more information due to be released later this year.

### Interdisciplinary collaboration

Another big agenda item for the Ministry of Health is the ongoing facilitation of interdisciplinary collaboration between the various health professions. This collaboration facilitation will presumably extend into the healthcare regulatory environment.

The Board has for some time enjoyed its own form of organic collaboration; the Board's office is located in a building with nine other RA's who all work well together; often sharing resources, information, and ideas. How this can extend beyond the office and into practice and how the Ministry of Health will do this is a space we are all exploring at the moment.

Looking to the greater healthcare world, some Chiropractors already work in multi-profession practices which of course allows interdisciplinary collaboration. The question is, how will the Ministry

of Health facilitate interdisciplinary collaboration for those Chiropractors who practise on their own in private practice?

## BOARD PROJECTS

The Board is undertaking a number of significant projects at the moment, including:

### RA reviews

Under the amendments to the HPCA Act, all RA's were required to undertake an external and independent review of how well they perform their required functions as per [s.118 of the HPCA Act](#).

The Board completed its review late 2021 with pleasing results. There were three recommendations made by the reviewing consultants, two of which the Board had already proactively addressed prior to the review. If you are interested in reading the full report, it can be accessed here: [RA review Report](#)

### Competency standards

The Board currently sets out the minimum competency expectations for all Chiropractors practicing in New Zealand in its Competency-based standards for chiropractors. The Board is currently reviewing these standards.

To enable this, a working committee was established in 2020 to review the current standards. This committee was made up of nominated representatives from both the NZCC and NZCA, members of the general public and two Board members. The aim of this review was to develop more general and contemporary standards that meet the needs of today, while also being future proof.

The draft competence standards will be reviewed by the Board at its May meeting and will be circulated to stakeholders for a high-level consultation, June/July with a view to consulting with the profession later in 2022.

### Te Tiriti journey

Te Tiriti o Waitangi, the Treaty of Waitangi, is the founding legislation of New Zealand. It underpins the relationship between Māori and Crown. Central to Te Tiriti principles are partnership, participation, and protection.

The Board began its Te Tiriti journey in 2020 with a Cultural and Diversity Initiative. Out of this grew a plan to ensure the Board recognises and fulfills its obligations in respect of the rights of the Māori people of New Zealand. It engaged the services of an expert in strategy, policy, implementation and Kaupapa Māori work to guide the Board in:

- a. developing a Te Tiriti o Waitangi statement and framework for integration into the Board's strategic plan and competency standards;
- b. developing a strategy for engaging with Māori (whānau<sup>1</sup>, Māori health providers, and other interested Māori rōpū<sup>2</sup>) to understand:
  - i. how the profession can support health outcomes for Māori;

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<sup>1</sup> Family

<sup>2</sup> Interested groups or parties

- ii. strategies for ensuring health and safety for Māori in regulating chiropractic health services

#### Policy reviews

As part of its ongoing planned policy reviews, there are a number of policies the Board will be reviewing in the next 12 months. These include:

- Advertising policy
- Code of Conduct for Chiropractors
- Cultural competence

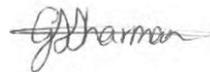
Ngā mihi



*Dr Tim Cooper*

**Chair**

*Chiropractic Board of New Zealand*



*Glenys Sharman*

**General Manager/Registrar**

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