Balance

Volume 7, Issue 2 Summer 2010

CTCMA Newsletter



CALL FOR NOMINATIONS

Nomination forms for the upcoming 2010 CTCMA Board election will be mailed to registrants in September.

- Are you interested in making a valuable contribution to your profession?
- Do you want to gain experience and insight into professional health regulation issues, including registration, inquiry, discipline, quality assurance, patient relations, legislation and finance?
- Are you interested in learning more about the Health Professions Act and the College bylaws and in gaining some insight into the legal process?

If so, now is the time to consider serving on the College Board.

Registrants are encouraged to accept nominations for the six vacancies on the 2010 Board. There are no longer requirements for category of registrant, and the six positions may be held by any category of registrant (Dr. TCM, R.TCM.P, R.Ac., R.TCM.H). The terms of office are (1) two years for three positions, and (2) three years for three positions. Please see page 6-7 for further information on the responsibilities and duties of Board members.

管理局理事會選舉提名

管理局理事會 2010 年選舉的提名表格會在九月份寄出。

假如您有興趣為本省中醫監管事業作貢獻;假如您對衛生監管事項有濃厚興趣;假如您想多加了解卑詩省 Health Professions Act 以及管理局的附例,並對有關條例立法過程有興趣的話,現在正是考慮投身管理局理事會的好時機。

由今屆開始,六位中醫業界理事的提名和選舉皆不分職別(Dr. TCM, R.TCM.P, R.Ac., R.TCM.H)。 六位被選出的理事,其中三位的任期為三年,另外三位的任期則為兩年。請參閱本期季刊第7頁有關理事責任的說明。

This issue:

The Lessons of History	Continuing Competency ProgramP.5
Education Page	Board Election 2010P.6
Regulatory Policy and Legal Changes Pending for CTCMA P.4	AGM 2010 Notice P.8

Balance is the official publication of The College of Traditional Chinese Medicine Practitioners & Acupuncturists of British Columbia, Canada.

Balance 是加拿大卑詩省中醫針灸管理局的官式刊物。 www.ctcma.bc.ca

Chair's Report Arden Henley, Ed.D., R.C.C.

The Lessons of History

Those who cannot learn from history are doomed to repeat it. - George Santayana, American Philosopher, Poet and Humanist

n this article I refer to the history of homeopathic medicine in North America. Like Traditional Chinese Medicine, homeopathy has an energetic focus and represents a different model of health and disease than western medicine (allopathic medicine) and like TCM requires a careful and detailed evaluation of the characteristics and life situation of the individual receiving treatment, as well as the features of their illness. Homeopathy is also an import, in this case from Germany.

In the middle of the nineteenth century, not so long ago, homeopathic medicine was thriving in North America, though because of its 'foreign' origins it was sometimes misunderstood. In 1844, significantly before the establishment of the American Medical Association, the American Institute of Homeopathy was founded and there were many schools offering courses in homeopathy. At the peak of its acceptance in the 1870s and 80s homeopathy was doing 3 to 7 times more business than allopathic medicine.

Recognizing the threat posed by homeopathy, allopathic medical practitioners held a National Medical Convention in 1946. Their conclusion was that the popularity of homeopathy was due to poor public relations and marketing on their part, as well as unregulated education. They resolved to improve medical education, in the long term and exclude homeopathy, in the short term. This was the birth of the American Medical Association (AMA). In its charter, the AMA withheld membership from state and local organizations with homeopathic membership and excluded all discussion of homeopathic remedies from their professional journals and publications. The AMA established itself as the final judge of medical schools and medical schools with homeopathy in their curricula were excluded. The rationale was that medical traditions and procedures without a scientific basis should be rigorously excluded. This was the case even though allopathic physicians commonly relied on 'blood letting' as a major form of treatment until the mid-1850s and, admittedly, had no credible remedies to treat the widespread cholera epidemic of 1849 (whereas homeopathic doctors demonstrated effective treatment results with *camphor*).

Perhaps, most significantly, the homeopathic community was divided between traditionalists, following closely the work of founder Habnemann; modernists, accepting the value of understanding anatomy and physiology and other allopathic approaches; and smaller esoteric factions. As the century unfolded the divided homeopathic professional community was swept aside by the politically united allopathic community. By the early 20th century homeopathic medicine found itself largely discredited and very much at the fringe of the healthcare world in North America. Homeopathic education was limited to small little known institutes and allopathic moved to centre stage in the expanding mainstream universities of the century. This situation continues to this day.

In concluding this brief article, let me emphasize that the point is not to debate the relative merits of the three traditions of medicine to which it refers – homeopathic and allopathic medicines and TCM. The point is that the unity of practitioners and, in contemporary times, a medical tradition's relationship to science will very much affects its relative standing in society.

After harmony comes unity.

The information about the fate of homeopathic medicine in North America can be found in Grossinger, R. (1980). Planet medicine: From stone age shamanism to post-industrial healing New York: Anchor Books

主席所言 Arden Henley, Ed.D., R.C.C.

歷史的教訓

那些不能從歷史中學習到的,注定要重蹈覆轍 - 喬治•桑塔亞那 美國哲學家,詩人和人文主義家

本文所提及的是順勢醫學在北美洲的歷史。一如來自中國的傳統中醫,順勢療法充滿活力,也代表了對比西醫(對抗療醫學)在治療上的不同取向。一如中醫,需要對病人的病理、特質和生活情況,作出認真和詳細的全面評估,順勢療法源於德國。

在19世紀中葉,順勢醫學是在北美蓬勃發展,但由於它的'外籍'身份,有時會被誤解。美國順勢療法學會在1844年成立,比美國醫學協會(American Medical Association)還要早成立,當時還有許多醫學院提供順勢療法的課程。在發展高峰期的1870-1880年代,順勢療法受歡迎程度火紅,較諸當時的西醫(對抗療醫學)業務,多3至7倍。

面對順勢療法所造成的威脅,對抗療法的醫生們在 1946 年展開了全國醫學會議。他們的結論是,順勢療法的普及是由於對抗療法的差勁公共關係和市場營銷,以及不受管制的教育。在長遠的計劃,他們決心改善醫療教育,短期計劃則排除順勢療法。因而催生了美國醫學協會(AMA)這個組織。在它的章程中,它排除來自美國的順勢療法成員,並禁止在其專業刊物上討論順勢療法。美國醫學協會(AMA)也確立了監管所有醫學院,所有教授順勢療法課程的醫學院被排走。它們所持的理由是,傳統的醫療和程序沒有科學的基礎,所以應被嚴厲地排除在外。事實上,直到 19 世紀 50 年代,即使對抗療法醫生還通常依靠'放血'作為一個主要的治療形式,但他們對 1849 年爆發的霍亂疫症,仍然束手無策。反之,順勢療法的醫生利用樟腦治療的結果,證明有效。

也許,順勢療法的社群,分別被傳統派(創始人 Habnemann 的追隨者)、現代派 (接受解剖和生理學及其他對抗性辦法)和較小規模的秘傳派別所分割。來到本世紀,四分五裂的順勢療法社群在遭受到政治上團結的對抗療法所打壓,已經潰不成軍。到了 20 世紀初,順勢醫學在很大程度上不被信任,並在北美的醫療架構中被邊緣化。順勢療法的教育僅能在鮮為人知的小機構中進行,但對抗療法已走向舞台的中央,並不斷在主流大學教育擴張勢力。這種情況一直延續至今。

在結束本文之前,讓我強調一點,我不是倡議辯論的三個傳統醫學 (順勢療法、對抗療法和中醫藥)的相對價值,我希望各位明白一點:從業人員的團結精神、以及傳統醫療跟科學的關係,在很大程度上影響了它在社會上的相對地位。

團結和統一,來自和諧與協調。

[中譯本僅供參考,以英文原文為準]

Education Page

Approved training programs in British Columbia will be listed under the CTCMA Bylaws Schedule H. For a listing in Schedule H, training programs must successfully complete the Training Program Review (TPR). CTCMA has developed the TPR for schools offering TCM/A training programs in British Columbia. The TPR procedure is established under the Health Professions Act section 19 (m.1). The Review, which will be conducted in English, has two main components:

- Curriculum Review Self-study cross referenced to Schedule E
- Clinical Review

Information and application forms are available on the web site: http://www.ctcma.bc.ca/news.asp

管理局附例目錄 H 將會列出認可的培訓方案。受檢的培訓方案必須完成"訓練計劃檢測"(TPR)。管理局已經為卑詩省內提供中醫針灸培訓的學校完成"訓練計劃檢討"。TPR的程序是根據卑詩生專業衛生法第19條(m.1)而確立。該檢測以英語進行,有兩大主要成份:

- •課程檢討-對照目錄E的自學內容;
- 臨床檢討

資料及申請表格可查詢網址: http://www.ctcma.bc.ca/news.asp

Regulatory Policy and Legal Changes Pending for CTCMA

Introduction

Over the past year, CTCMA has been considering substantive matters of definitions, scope of practice, restricted activities and standards, limits and conditions required to fulfill its mandate of regulating the practice of CTCMA registrants in BC, in compliance with current legislation. The Board has now substantively engaged background reviews, stakeholder consultation, dialogue with government, and policy analysis and options; regarding specific matters that lead to such review, in particular:

- The use of Point Injection Technique (PIT) by CTCMA registrants
- Schedule "H", regarding approved education providers for Registration purposes, and
- Schedule "I", TCM herbs that designated registrants are authorized to prescribe or administer in their practice as CTCMA registrants.

Note: Other than the reference to formal decisions already taken by the College, the following update reflects our intentions, go forward processes and language as seen by the Board for working purposes at this time, and as such is subject to further change as necessary for clarity and refinement purpose, new information, or other considerations

The Regulation of PIT for CTCMA Registrants

Early in 2010, the CTCMA Board reviewed the policy backdrop, *Point Injection Technique: Policy Implications for CTCMA,* which addressed the following:

- the current practice with regard to PIT by CTCMA registrants in BC
- the practice of PIT in other Canadian provinces and other jurisdictions
- the literature on safety and efficacy of PIT in TCM and acupuncture, and
- the regulatory requirements (policy and legal) to regulate PIT in the context of the current Health Professions Act (HPA) and regulation(s) in BC.

In addition to three policy options for the regulation of PIT, the Board discussed the overarching and first order question of whether it would consider options for regulating PIT based on the current Traditional Chinese Medicine Practitioners and Acupuncturists Regulation, or in the context of a proposed new regulation that reconciles the existing definitions, scope of practice, and restricted activities with the reformed HPA.

On March 6, 2010, the CTCMA Board approved the following resolution.

"That CTCMA seek a new regulation with respect to restricted activities and/ or amendments to ss. 1 and 4 – 6 of the Traditional Chinese Medicine Practitioners and Acupuncturists Regulation (the Regulation) pursuant to section 55(2) of the Health Professions Act (HPA) with respect to restricted activities and necessary amendments to the CTCMA Bylaws under section 19 of the HPA with respect to restricted activities and changes to the Schedules."

The Standards of Education Committee (SEC) of CTCMA has now considered policy options for the regulation of PIT with a view to the Board Resolution of March 6 (the Resolution) cited above. SEC has recommended to the Board that, "CTCMA recognize PIT as appropriate service provision for registrants who have successfully completed advanced practice requirements approved by the College, which may or may not require certification by the College, and that CTCMA seek the regulatory authority to effect same in the new regulation and other amendments referenced in the Resolution." The Board accepted this SEC recommendation on May 11, 2010.

Schedule "H"

As part of the required Bylaws under HPA and for registration purposes, Schedule H, regarding approved education providers (based on program and other criteria set out in the Schedule) is also being prepared. Following an SEC recommendation of April 7, 2010, and informed by stakeholder consultation and government input to date, a working draft of the related review process for educational institutions (the Training Program Review) has been approved by the Board and is currently being implemented with a view to both process and effectiveness evaluation and further adjustments as necessary.

.../con't

Schedule "I"

As part of the process for preparing for regulation of restricted activities, CTCMA must develop a list of TCM herbs to be appended as a schedule to the CTCMA Bylaws (Schedule "I"). A working draft of Schedule I has been approved by the Board as recommended by the SEC and in keeping with continuing stakeholder consultation.

Schedule I will identify the TCM herbs that may only be prescribed or administered by designated CTCMA registrants as required by restricted activities authorization; standards, limits and conditions; and CTCMA Bylaws under the Health Professions Act. As such, it will work as part of the broader regulatory scheme governing integrated scope of practice and restricted activities and associated definitions. It will also link back to the standards, limits and conditions imposed on the authorization for performance of the related restricted activities in a new Traditional Chinese Medicine and Practitioners Regulation.

Current Summary

The timelines for preparing the proposal for a new regulation and legislative amendments mean much preparation with a view to being ready for the fall of 2010. Over the next months, the Board will oversee the development of the proposal to government for the necessary regulatory changes to accomplish the above, as part of an overall effort to retrofit the regulation of CTCMA registrants with the current HPA. To that end, it will continue the necessary process dialogue with government, liaise with other regulatory colleges to ensure any required practice collaboration, consult further with related industries and merchants as needed, and continue to respond to member input, as it drafts the required regulatory proposal; with all of the above informed by coordinated policy and legal advice.

Continuing Competency Program

Fifective March 31, 2012, all Registrants will be required to comply with the new Continuing Competency Program Requirements. A Continuing Competency Activities Log is the format for recording educational activities (link: http://www.ctcma.bc.ca/news.asp?id=139#details).

In preparation for the March 2012 renewal, Registrants are encouraged to familiarize themselves with the new Requirements. When selecting continuing competency courses it will be helpful to relate courses being offered to information in the Program Requirements. The Activities Log will assist in keeping records of educational activities and in reviewing your activities to date. The receipts, course descriptions, brochures and other identifying documentation should also be kept in the Registrant File. Copies of Continuing Competency Program Requirements and Activities Log are attached with this newsletter.

延續專業能力計劃

由2012年3月31日開始,所有註冊成員在續牌時,都必須遵照新的"延續專業能力計劃"要求,完成並提交"延續專業能力紀錄表" (可在此下載: http://www.ctcma.bc.ca/news.asp?id=139#details). 此為2012年續牌的條件之一。

各位註冊成員務請清楚了解新規定,以助選讀有關課程。"延續專業能力紀錄表"用於紀錄有關年度修讀課程資料,有助續牌查察。此外 ,有關課程收據、大綱、指南以及其他資料,都應該保留在註冊檔案中。

有關"延續專業能力計劃"及"持續專業能力紀錄表",將隨本期季刊附上參閱。

Board Election 2010—Important Dates

TCMA election of board members must be conducted according to the Bylaws. This newsletter serves as notice to all registrants of the 2010 Election.

24 October 2010
24 November 2010
24 December 2010 (12:00 pm noon)

24 December 2010 (12:00 pm noon)

25 December 2010 (12:00 pm noon)

26 December 2010 (12:00 pm noon)

27 December 2010 (12:00 pm noon)

28 December 2010 (12:00 pm noon)

29 Deadline for receipt of nominations

CTCMA will mail ballots to all registrants on/before this date

20 Ballots must be received at CTCMA Office;

20 Ballots counted

20 Candidates will be notified of election results

20 Deadline to request a recount if vote is close (5% difference)

It's time to start considering nominations to the Board. In taking on the role of governance, Board members are leaders and decision makers. Clarity of purpose, goals, roles and expectations, as well as trust, mutual respect, honest communications and collaborative relationships are essential to effective board and organizational performance. The following leadership responsibilities have been adopted by the Board for your reference as you consider nominating or being nominated.

Strategic Intent - Sets and drives the strategic direction for the College

- 1. Actively communicates the College vision to registrants.
- 2. Engages external stakeholders to support the College's strategic direction.
- 3. Actively contributes personal perspective to important issues.
- 4. Focuses on governance of the College, not on management of operations.
- 5. Takes abroad perspective towards emerging opportunities and challenges.
- 6. Encourages the use of performance measurement to drive improvement.

Personal Effectiveness - Works to improve personal effectiveness and performance

- 1. Clearly demonstrates the CTCMA values (i.e. Honesty and Integrity, Fairness, Transparency, Quality, Confidentiality, Privacy, Accountability, Responsibility, Approachability, Openness, Effective Communication, Engages external stakeholders to support the College's strategic direction.)
- 2. Uses awareness of personal strengths and weaknesses to improve contribution to the College.
- 3. Delivers on commitments.
- 4. Makes principled and ethical decisions, even if they are sensitive or controversial.
- 5. Solicits feedback regarding personal performance.
- 6. Maintains confidentiality.
- 7. Demonstrates a sense of humour.

Engaging Others - Builds and maintains rapport with others to enhance working relations and to improve overall organizational effectiveness

- 1. Creates an environment of trust where people feel encouraged to actively communicate and contribute.
- 2. Welcomes differing perspectives and opinions.
- 3. Actively seeks input from others.
- 4. Adapts personal style to match differing needs of registrants.
- 5. Willingly collaborates with others to achieve desired results.

Communication - Effectively communicates with a broad range of stakeholders

- 1. Actively listens to others' opinions and ideas before providing own advice and counsel.
- 2. Shares knowledge and expertise to strengthen Board performance.
- 3. Openly communicates thoughts, wants and feelings.
- 4. Communicates key issues and concerns in a timely fashion.
- 5. Uses a communication style and method that is most effective for the situation.
- 6. Presents information in a coherent, clear and timely manner.

Decision Making - Uses a systematic approach to problem solving and decision making. Bases decisions on best available information.

- 1. Assesses problems based on short and long-term impacts on the College.
- 2. Evaluates the results of past decisions to guide future decision making.
- 3. Explores the root causes of the issue or challenge, not just the symptoms.
- 4. Uses the College's established strategic direction as a framework for decisions.
- 5. Makes decisions in the best interest of the College.
- 6. Stands behind Board decisions even if they are not his/her primary choice.

.../con't

Public Focus - Demonstrates a commitment to serving the public interest.

- 1. Works to understand the needs and requirements of the public in relation to the College.
- 2. Demonstrates dedication to meeting expectations of the public.
- 3. Acts with the best interest of the public in mind.
- 4. Navigates effectively through challenging situations that involve College registrants and the public.
- 5. Works diligently to gain the trust and support of the public.

理事選舉年

管理局理事必須按照附例進行選舉,本文作為2010年理事選舉的正式通知。

2010年10月24日 : 提名截止 2010年11月24日 : 選票寄出 2010年12月24日 (中午12:00時):

- 1. 選票送回管理局最後限期;
- 2. 點票;
- 3. 通知候選人有關點票結果;

2011年1月3日 : 重點選票申請截止

(假如候選人票數差額小於5%)

現時正是各位開始考慮參選或提名的時機。理事被賦予領導和決定權的角色。清晰釐定理事的作用、目標、角色、互信、相互尊重、 坦誠溝通以及協作關係皆有助於理事會和機構組織的表現。根據理 事會一致通過的定案,請各有意參選人及提名人明瞭下述要求:

具備策略性意識 - 為管理局制定和推動策略性方向

- 1. 積極把管理局願景轉達給註冊成員。
- 2. 聯繫公眾各界,支援管理局的策略。
- 3. 奉獻個人強項於重要事項上。
- 4. 在策略上領導管理局而非參予日常管理工作。
- 5. 具透徹的洞悉力來應對日新月異的機遇與挑戰。
- 6. 鼓勵使用表現評估方法來推動改進改善。

高效率 - 具改進個人能力和表現的方法

- 清楚表現管理局的價值(至誠至善,公平公正,公開透明,嚴謹 嚴肅,保密守秘,問責承擔,親和開放,有效溝通,聯繫公眾各 界支援管理局的策略)
- 2. 充分瞭解個人強項和弱點,適當地對管理局作出貢獻。
- 3. 重承諾。
- 4. 即使面對敏感性或具爭議性的話題,也要作出原則性和道德上的 決定。
- 5. 注重外界對個人表現的評估。
- 6. 能保密。
- 7. 具幽默感。

| **強大聯繫力 -** 建立並維持緊密關係,促進工作關係並改善機構整體 | 效率

- 1. 創造互信環境,鼓勵積極交流與奉獻。
- 2. 接受不同見解和意見。
- 3. 積極尋求不同意見。
- 4. 採用個人風格,靈活配合註冊成員的的各種需要。
- 5. 樂於團結各界以期達到預期效果。

善於溝通 - 強於和各界溝通

- 1. 作出建議前,積極聆聽各方意見和想法。
- 2. 分享知識和專門技能,加強理事會運作。
- 3. 坦誠公開想法,需求和感受。
- 4. 及時溝通關鍵問題與顧慮。
- 5. 運用對形勢有效的溝通風格和方法。
- 6. 及時,清楚和具連貫性地溝通。

決策力 -

在取得各種有關資訊後,使用有條不紊的方法去解決問題和制定決策

- 1. 評估問題應基於對管理局的短期和長期的效益和影響。
- 2. 根據以往決定的效果來導引未來的決策。
- 3. 探索問題的根源, 並非表面徵狀。
- 4. 利用管理局已確立的策略性方向,作為決策時的依據。
- 5. 所作出的決定,必須以管理局的最終利益為依歸。
- 6. 擁護理事會的最後決定,縱使這個決定不是理事們的個人選擇。

以公眾利益為重 - 承諾為公共利益而服務。

- 1. 為理解公眾對管理局的所需和要求而努力工作。
- 2. 表現出對公眾期許所作出的努力。
- 3. 以公眾的最大利益為行動綱領。
- 4. 有效率地應對包括註冊成員和公眾在內的各項挑戰。
- 5. 勤勉工作,以期獲得公眾的信任和支持。

[中譯本僅供參考,以英文原文為準]

AGM 2010 Notice

The 2010 Annual General Meeting will be held on January 09, 2011 (Sunday) at Radisson Hotel Vancouver Airport (8181 Cambie Road, Richmond, BC). The morning session will be Continuing Education. The annual community dinner will be held in the evening. Detailed information will follow. Please mark January 9, 2011 on your calendar.

January 09, 2011 (Sunday)

< Continuing Education & AGM >

Radisson Hotel Vancouver Airport - 8181 Cambie Road, Richmond, BC

< Community Dinner >

Rainflower Restaurant—3600 No. 3 Road, Richmond, BC

2010年註冊成員大會

2010年註冊成員大會將於2011年1月9日(星期日)於列治文Radisson Hotel Vancouver Airport (8181 Cambie Road, Richmond, BC) 舉行。當天上午會安排延續教育課程,晚上舉辦周年聚餐晚會。請密切留意2011年1月9日當天不容錯過的精彩活動。

2011年1月9日(星期日)

<延續教育課程及註冊成員大會 >

Radisson Hotel Vancouver Airport—8181 Cambie Road, Richmond, BC

< 周年聚餐晚 >

粵之醉 - 3600 No. 3 Road, Richmond, BC

Announcement

Today the College announces with regret that Angus Yuen, Assistant Deputy Registrar, has decided to leave CTCMA effective at the end of May 2010. This has been a difficult decision for Angus and one that has not been taken lightly.

Angus has been a loyal and dedicated member of the CTCMA Team. We thank Angus for his work over the past years and wish him well for the future. For Angus this is a new beginning, and for us at CTCMA it is a time to say good-bye and good luck. He will be missed.

On behalf of the Board, Staff and many other registrants and colleagues who have worked with Angus over the years, we extend our sincere appreciation and best wishes.

CTCMA Board Members

Professional Members

Ann Yuan David Huanwei Chen Fang Liu Harvey Hu John Blazevic Michael Chung

Public Members

Arden Henley Bill MacLeod Vivienne Stewart

Newsletter Editorial Board

Arden Henley Mary Watterson Angus Yuen "Balance" and other publications circulated by CTCMA are the primary information for our registrants in British Columbia. Registrants are responsible for reading these publications to ensure they are aware of latest information, current standards, polices and guidelines.

Address:

1664 West 8th Avenue, Vancouver, BC., Canada. V6J 1V4

Phone: 604-738-7100 Fax: 604-738-7171 www. ctcma.bc.ca E-mail: info@ctcma.bc.ca



Quality Assurance Committee Continuing Competency Program Requirements

	Formal Description	QAC Policy		
1. General Requirements	 Key criteria: Compliance with the Continuing Competency Requirements Policy is required for renewing registration with the College. General objective is the intent of acquiring new knowledge for the practice of TCM/A. Is the specified activity relevant to enhancing the competency of the registrant to practice? (b) Can the registrant articulate what they have learned relevant to improving their competence in a way that is clear and convincing to a group of their peers? The closer the activities engaged in by the registrant is to the modal activity, the more likely it will be rated as meeting the criteria and the less likely that additional information will be required. 	 Providing supervision, and/or providing a workshop or presentation, where the intent is to provide information or guidance to others, cannot be used towards the continuing competency requirements. However, some preparation time may be included under self study. Continuing competency activities should be sufficiently evidence-based so as to be seen by a majority of registrants to enhance the registrant's practice of TCM/A within the scope of practice specified in the TCM Practitioners & Acupuncturists Regulation 		
II. The Continuing Co	ompetency Program			
A. Direct Participatory, Formal Programs Min 12 hrs per reporting period	Intent: Learning of new information regarding the practice of TCM/A. To accommodate those registrants who live in rural areas, 6 hours may be obtained through relevant webinar/on-line/distance learning courses. Modal Activity: Typical characteristics are: the event is planned in advance; speakers have professional credentials in TCM/A, biomedicine, health care; printed documentation is provided, registration fee is typically charged. Documentation: Log sheet details. Printed documentation to be submitted to the committee on	 Providers and full names of conferences, courses, workshops need to be identified on the log sheet. The activity must be within the framework of the definition of TCM/A as per the TCM Practitioners & Acupuncturists Regulation. Presentations or workshops provided by you, where the intent is to provide information or guidance to others, cannot be used to fulfill the requirement in this category. Hours documented need to reflect time attending educational activities. 		

	Formal Description	QAC Policy
B. Self Study Min 8 hrs per reporting period	Intent: Keeping current on reading of regulatory, academic, and professional literature, and to reflect on how this information impacts on one's practice of TCM/A. Modal Activity: Reading academic journals, professional publications, CTCMA publications and related material, including Bylaws, Code of Ethics, Standards of Practice and Practice Standards. Reviewing one's practice of TCM/A with knowledge of the above documents to identify any areas in need of improvement. Documentation: Log sheet details outlining the specific journals and materials and the dates read. Simply stating "read journals" will not be sufficient.	 Details regarding specific journals and materials read are required on the log sheet. Online research acceptable if articles are obtained or read on-line. Preparation for presentations or workshops you give can be included in this category if you learned something new and practice enhancing. Materials read must be within the framework of the definition of TCM/A as per the TCM Practitioners & Acupuncturists Regulation
C. Structured Interactive Activities Min 5 hrs per reporting period	Intent: Interacting with a reasonably consistent group of colleagues in recognized healthcare disciplines on a regular basis for the purpose of learning, consolidating new knowledge, and incorporating new ideas and feedback from others into one's practice of TCM/A. Modal Activity: Regularly scheduled or routine consultations with peers (colleagues who are licensed health professionals). For Example, peer consultation and/or case conferences are acceptable; staff meetings where the focus is on administrative issues are not acceptable. Documentation: Log sheet details.	 Structured interactive activities are activities in which you have interacted with colleagues (e.g. peer supervision or study/training groups); provide the names of the groups or individuals with whom you participate. There are no requirements for structured activities to be in person (e.g., they could occur by phone). Supervision, presentations or workshops you provide, where the intent is to provide information or guidance to others, cannot be used to fulfill this requirement. Staff meetings where the focus is on administrative issues are not acceptable to fulfill this requirement. To meet the requirements for this category, these activities need to be done with licensed health practitioners.

	Formal Description	QAC Policy
D. Ethics Min 2 hrs per reporting period	Intent: Identifying which activities from Sections A, B, and/or C focus on ethical practice in TCM/A.	 The required 2 hours can be obtained via direct participatory, formal programs, self study, and/or structured interactive activities. This requirement could be met entirely through self-study.
	Modal Activity : Review of practice advisories, Code of Ethics, ethical problem-solving.	2. Registrant cannot request a reduction in required ethics hours.



CONTINUING COMPETENCY ACTIVITIES LOG

Name:	Registration No.	Date:		
Print clearly or type				
A. DIRECT PARTICIPATORY, FO	RMAL PROGRAMS (MINIMUM OF 12 HOURS PER	REPORTING PERIOD)		
ACTIVITY	FULL NAME OF WORKSHOP/COURSE/CONFERENCE	FULL NAME OF SPONSOR	DATE	NO. OF HOURS
Formal Conferences or Workshops				
Modal Activity: Typically the event is planned in advance; speakers have professional credentials in TCM/A, biomedicine or health care; printed documentation is provided; usually a registration fee is charged. The activity must be within the framework of the definition of TCM/A as per the TCM Practitioners & Acupuncturists Regulation.				
ACTIVITY	NAME OF WORKSHOP/COURSE/CONFERENCE	FULL NAME OF SPONSOR	DATE	NO. OF HOURS
On-Line Courses				
Modal Activity: The on-line course activity				
must be within the framework of the defination of TCM/A as				
per the TCM Practitioners &				
Acupuncturists Regulation.				
		TOTAL HOURS	FOR SECTION	A

B. SELF STUDY (MINIMUM OF	EIGHT HOURS PER REPORTING PERIOD)		
ACTIVITY	FULL NAME OF MATERIAL READ (E.G., JOURNAL, BOOK, ON-LINE RESEARCH, ON-LINE COURSE)	DATE	NO. OF HOURS
Reading			
Modal Activity:			
Reading academic journals, professional publications and			
related material, including Bylaws. Code of Ethics,			
Standards of Practice and			
Practice Standards. Preparation for presentation			
or workshops given can be included in this category if the			
registrant learned something new and practice enhancing.			
	метнор		
Review of Practice			
Modal Activity:			
Review of one's practice of TCM/A with knowledge of the			
above documents to identify any areas in need of			
improvement.			
	TOTAL HOURS	FOR SECTION E	

C. STRUCTURED INTERACTIVE ACTIVITIES (MINIMUM OF FIVE HOURS PER REPORTING PERIOD) TOPIC OF DISCUSSION **ACTIVITY** WITH LICENSED DATE NO. OF HOURS HEALTH PRACTITIONER (Y/ N) **Routine Consultation with Peers** Regularly scheduled or routine consultations with peers (colleagues who are licensed health professionals). For example, peer consultation and/or case conferences are acceptable, whereas staff meetings where the focus is on administrative issues are not acceptable. Structured Interactive Activities do not include: - supervision, presentations or workshops you provide, where the intent is to provide information or guidance to others. TOTAL HOURS FOR SECTION C

ACTIVITY	CATEGORY	DESCRIPTION DATE	NO. OF HOURS
Describe which of the above			
activities satisfy the minimum requirements for 2 hours per			
reporting period explicitly on			
ethics. Registrant cannot request a reduction in required			
ethics hours.			
		TOTAL HOURS FOR SECTION D	
		TOTAL CONTINUING COMPETENCY HOURS (TOTAL A + B + C)	

HEALTH SOLUTION

AIDUS & E-FONG HERBAL SOLUTION

The specialist of concentrated herbal products 一方中藥 專家製藥

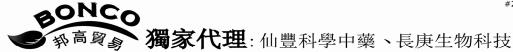




Call us at 604-323-8919 Fax: 604-323-7913

We are the general imporer and distributor of Guangdong Yifang Pharmaceutical Co. Ltd. in Canada for supply of formulas of concentrated herbal granules or pills. We also supply single herbal granule in sachet (5-30:1) or bottle (5:1). All products are authorized with GMP standard by Health Canada. Call to request your catalogue or make your order today!

www.aidus.net



Bonco Trading Inc. 邦高貿易

#2400- 4151 Hazelbridge Way Richmond, BC Aberdeen Center 2nd Floor fax: 604-272-5107

cell: 604-506-0987 tel: 604-272-5108 bonco_sf@telus.net www.bonco.ca

◆ 長庚生物科技

仙豐科學中藥



- Sheng Foong is the first Chinese medicine powder recognized by the International Organization of Standardization with the highest safety standard of certification - ISO 17025TAF 國際實驗室認證 (比 ISO9000/14001 等更嚴格的品質認證系統)
- Highly concentrated medicine powder for easy use without the hassle and bitter taste of regular Chinese medicine 安全度最高品質最好,易入口,無苦澀味
- Purfied to the highest quality PESTICIDE and HEAVY METAL-FREE 絕無殘留農藥及重金屬
- G.M.P. compliant G.M.P. 優良濃縮中藥

長庚生物科技



冬蟲夏草菌絲體 球認同真正青康藏高原珍貴冬蟲夏草 菌絲體Hirsutella sinensis rDNA為99.645%, 經鑑定符合真正菌種

養生靈芝

正統赤芝菌絲體Ganoderma lucidum rDNA為99.390% 及珍貴的天然靈芝破壁孢子

巴西蘑菇

使用公認最具代表性的巴西蘑菇岩出101菌種 Agaricus blazei Murill rDNA為99,286%,及來自巴西最珍貴A級子實體

冬蟲夏草菌絲體純液 紅景天複方

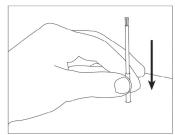
中醫診所·中藥房專用《請洽醫師或藥師》

New TeWa Acupuncture Needles

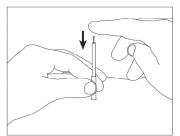
Featuring a Breakthrough in Guide Tube Technology - the Safe-T Sleeve™

全新 TeWa 针灸针 - 带有突破性技术的安全针管

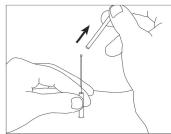
How to use the Safe-T Sleeve™



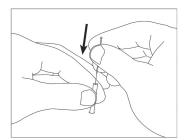
STEP ONE: Remove plastic tab and slide Safe-T Sleeve™ down so it's flush with the bottom of the insertion tube.



STEP TWO: Tap needle into acupoint as usual.



STEP THREE: While holding the Safe-T Sleeve[™] in place, remove insertion tube with other hand.



STEP FOUR: Guide the needle to the target depth while supporting the needle shaft with the Safe-T Sleeve $^{\text{M}}$.

New Safe-T Sleeve™ guide tube technology allows you to support the needle shaft as you insert longer needles into dense or tight tissue - providing increased patient comfort and clean needle assurance. 目前最新带有安全针管的针灸针可确保进针时针体不受污染并能同时减轻病人的痛感。

The Safe-T Sleeve is standard on every TeWa needle 40mm (1.5") or longer. 所有一寸半 (40mm) 及以上长度的 TeWa 针灸针都带有安全针管。

In addition to this exciting innovation, TeWa needles offer you: 除此之外, TeWa 针灸针还具有以下特点:

- Copper wire wound-loop handles 螺旋形铜柄
- Needle tips sharpened by machine ensuring perfect needle tip geometry 经精密机器打磨的针尖
- Available with coated needle shafts for super smooth insertion (non-coated also available) 分有涂层及无涂层的两种针体。 有涂层的针体光滑度高进针特易。
- Available in a full range of sizes 各种形号供选

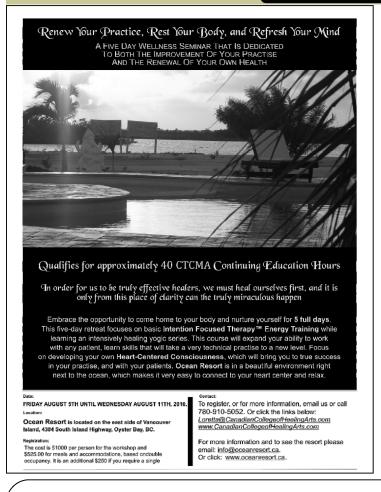


 \triangleleft A TeWa needle with the insertion tube removed and the Safe-T SleeveTM in place.

To place your order, call us at 604-263-5042 or 1-800-667-6866 如需讲中文,请致电 Cheryl

www.easterncurrents.ca





Advertising in "Balance"

The CTCMA quarterly newsletter "Balance" is accepting advertisements for professional products and Oriental medicine continuing educational seminars, workshops and lectures. The rate for each issue (March, June, September & December) is \$500 for full page, \$250 for half page and \$125 for quarter page. The circulation of each issue is over 1800. If you are interested in placing an advertisement, please email your artwork (b/w, camera-ready JPEG format not less than 300 dpi) to editor@ctcma.bc.ca 30 days before the issuing month. Next deadline: July 31, 2010 for September 2010 Issue. Please note that advertisements are published at the discretion of the Editorial Board.

刊登廣告

管理局的季刊"Balance"現正接受有關中醫和東方醫學的延續教育培訓課程、講座和商品之廣告。該季度雜誌在每年的3月,6月,9月和12月發行,每期發行超過1800份。刊登費用為全版\$500,半版\$250,1/4版\$125。假如閣下有興趣刊登廣告的話,請把有關稿件(需為黑白,無需修改並以不低於300dpi的JPEG檔案型式儲存),於當期季刊發行前的一個月(刊於2010年9月份的廣告稿件,需於7月31日截止)以電郵送往editor@ctcma.bc.ca有關廣告的接納與否,將由編輯委員會作最後決定。

Disclaimer: Information contained in advertisements which appear in this newsletter comes from individual advertisers. The CTCMA does not endorse the services of any advertiser or guarantee the accuracy of any information which appears in advertisements in this newsletter.