

**Saskatchewan Association of Naturopathic Practitioners  
Policies and Procedures**

**Standards of Practice**

*Developed and distributed by the Canadian Naturopathic Association 1989, Revised  
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**1.0 – INTRODUCTION**

STANDARDS OF PRACTICE are the criteria, which guide the day-to-day actions of naturopathic doctors in the delivery of care and service to the patient and the community. They also serve as the basis for the evaluation of the behaviour of practitioners by disciplinary and judicial functions.

This document provides basic standards for the most predictable circumstances, means for developing standards for specific conditions, methods for applying them in the assessment of the actions of practitioners, ways they can be modified and, finally, the necessity for disseminating them to regulated practitioners.

All standards are derived from the same body of knowledge that practitioners use to provide service. Methods of identifying this body of knowledge in a concise and universally accepted form are described herein.

The objectives of this document are to identify the responsibilities of naturopathic doctors to the public and to establish a means for evaluating their professional actions.

The purpose of this document is to provide a clear, unambiguous and consistent format for the identification, development and implementation of standards of practice that apply to naturopathic doctors in the delivery of direct patient care services and other times where the practitioner is in a position of public trust.

**2.0 – BASIC STANDARDS OF PRACTICE**

Each naturopathic doctor shall:

1. Have knowledge of and comply with the laws and regulations governing the practice of naturopathic medicine in the jurisdiction of practice.
2. Provide a level of care consistent with each patient's individual condition.
3. Actively consult and/or refer as appropriate to other health professionals when the patient condition so warrants in providing optimal care.

Referral is so warranted when:

- a) A life-threatening situation occurs or is suspected
- b) The diagnosis or the treatment of a patient or of a specific condition is not within the scope of naturopathic practice
- c) The diagnosis or treatment of a patient or specific treatment requires expertise or technology that is not available to the naturopathic doctor
- d) A diagnosis is required but cannot be confirmed with the training and technology that is available to the naturopathic doctor

- e) Response to treatment is not adequate or the patient's condition deteriorates
  - f) A second opinion is desired
4. Treat each patient with respect and human dignity regardless of the individual's health condition, personal attributes, national origin or handicap and shall not discriminate on the basis of age, sex, race, religion, economic or social status, or sexual preferences in the rendering of naturopathic medical services.
  5. Respect the patient's right to privacy by protecting all confidential information.
  6. Deal honestly with all patients, colleagues, public institutions and legal bodies, and refrain from giving any false, incomplete or misleading information.
  7. Report any health care provider whose character or competence are deficient or who is grossly negligent or reckless.
  8. Maintain clear and adequate patient care and billing records for at least seven (7) years after the last visit by the patient.
  9. Formulate an assessment/diagnosis to a level consistent with the patient based on knowledge, training, and expertise of the naturopathic doctor and the technology and tools available to the profession.
  10. Communicate the appropriate assessment to the patient and only communicate a diagnosis to the patient, which has been conclusively determined using the training and tools available to the naturopathic profession.
  11. Advise the patient regarding significant side effects from the treatment plan.
  12. Monitor each patient at a level consistent with the degree of management being exercised.
  13. Refrain from providing primary care management for any patient where the relationship with the patient (such as family member, close personal friend) would serve to interfere with the doctor's objective judgment.

### **3.0 – CASE SPECIFIC STANDARDS “GENERAL CONSIDERATIONS”**

It is recognized that the basic standards cannot anticipate every potential situation faced by a practitioner, nor predict the changes in technology and knowledge with time. This section is a guide for the development of standards of practice for a particular incident or presentation.

1. Identify the scope of the doctor, i.e. primary care management, co-treatment, consulting treatment, expert testimony, etc.
2. Identify the scope of the problem i.e. the complaint, the specific naturopathic medical area of concern, (e.g. manual manipulation, allergy, diagnostic radiology, etc.) and all other pertinent data such as history, diagnosis, other diagnostic data, etc.
3. Identify the body of knowledge to be used in assessing the problem in accordance with the following criteria:
  - a) Clearly and concisely cover the problem. While it is rare to find a particular situation specifically addressed in the literature, the entirety of the problem must be dealt with in such a manner that all conclusions reached are clearly and concisely drawn from a body

- of information that is applicable to the problem with no possibility of an incorrect conclusion being drawn by material out of context.
- b) Universally accepted by the naturopathic profession. The information used must be from sources accessible and generally accepted by the profession. Such sources include textbooks, journals, information taught in naturopathic colleges and recognized experts in the naturopathic community or in the specialty in question. As with all health care professions, reliable expert data and testimony from sources outside of the naturopathic community is acceptable.
  - c) Verify in writing when testimony from experts or consultants is used and by specific citation with literature.
4. Basis for a decision. Each decision shall be based on the following:
- a) Protection of the public and the public interest. This includes risk of physical or mental harm, misrepresentation to the public, billing or costs not consistent with fair and accepted practices, full disclosure of treatment and its effects, appropriateness of referral, etc.
  - b) Compliance with applicable law.

**4.0 – CASE SPECIFIC STANDARDS TO BE APPLIED BY THE  
NATUROPATHIC DOCTOR TO EACH PATIENT**

1. Identify the naturopathic doctor's role for this specific case.
2. Identify the extent of the patient's problem:
  - a) Obtain a relevant and complete case history to the need of the specific case and presentation.
  - b) Perform a relevant and complete physical examination.
  - c) Obtain or perform relevant and approved screening or diagnostic tests.
  - d) Collect and evaluate all data.
  - e) Make appropriate referral if indicated at this point to the need of the specific case.
  - f) Make appropriate communications with other involved health professionals.
3. Formulate a relevant assessment and/or diagnosis where possible, based on the history, examination findings, data collected, training and expertise of the naturopathic doctor and the legal scope of practice of the profession.
4. Communicate the assessment or diagnosis to the patient.
5. Formulate a plan of treatment for the patient based on the best interests of the patient's welfare, need for and appropriateness of referral, accepted practices and naturopathic body of knowledge.
6. Implement the plan of treatment with informed consent.
7. Amend the plan of treatment as appropriate and implement with informed consent.

## **5.0 – APPLICATION OF STANDARDS OF PRACTICE**

Standards of practice must be evaluated in every case to be certain that they are appropriate and complete. The Board or judicial function must also ensure that the standards being used are chronologically consistent with the case being evaluated, since technology procedures and treatment protocols can change rapidly.

## **6.0 – MODIFICATION OF STANDARDS OF PRACTICE**

As noted, standards of practice are designed to be modified to suit the conditions of the case and the current state of the art of naturopathic medicine. Each time such a change is made, the reasons for the change must be documented in the same manner used for the development of new standards, for the purpose of allowing a transparent record for appeal as well as ensuring clear precedent for ensuing cases.

## **7.0 – PUBLICATION AND DISTRIBUTION OF STANDARDS OF PRACTICE**

The standards of practice and case specific standards of practice shall be distributed to all registrants in a timely manner. Care shall be taken with the case specific standards to protect the privacy of all involved in their development.

## **8.0 – DEFINITIONS**

Body of Knowledge: The clear, concise information, generally accepted by the naturopathic profession, from which standards of practice are derived.

Co-Treatment: Treatment of a patient in concert with the doctor providing primary care management of the patient.

Consulting Treatment: Providing a second opinion or ancillary care for a patient whose primary care management is being provided by another doctor.

Disciplinary Authority: Any Licensing Board, Disciplinary Board or other governmental function having jurisdiction over the practitioner and acts being investigated.

Judicial Function: Any court or other judicial forum with legal jurisdiction over the practitioner and acts being investigated.

Primary Care Management: Provision of a patient's overall health care management including the monitoring of all treatments in progress with other providers as appropriate.