

## ICA Calls for New Standards of Care for Chiropractic

ICA BOARD AGREES TO HELP FUND NATIONWIDE EFFORT

Editorial Staff

The board of directors of the International Chiropractors Association, in a mailing to its membership, has called for the "establishment of a new nationwide effort for the scientific and broad-based development of practice guidelines for chiropractic."

At a meeting in Atlanta, Georgia, November 19-21, the ICA board discussed the existing standards of care documents and reviewed alternatives for developing what they called a "true consensus within chiropractic on the standards' issue."

"It was apparent that no currently existing mechanism was appropriate for this very important task," said ICA President Dr. James Gregg of Michigan. "The only answer is the establishment of a new, inclusive, nonpartisan structure through which the entire profession can participate."

The ICA stated in their release that "legal, educational, ethical, and marketplace implications of every aspect of the standards question" were necessary to establishing clinical guidelines for chiropractic. The ICA asserted that no existing document has "attempted to look at chiropractic in this multidimensional context."

The ICA delineated their proposal:

1. A full and objective study of the legal establishment and definition of chiropractic as enacted by state legislatures, the courts, and the federal government.
2. The parameters of practice established through chiropractic education and the clinical competencies set down by the accreditation process.
3. Inclusion of the ICA's "Code of Ethics."
4. A comprehensive set of standard definitions developed to explain and communicate the uniqueness of chiropractic as well as common domain concepts as they apply to the chiropractic practice.
5. A comprehensive search of chiropractic literature focusing on chiropractic practice as defined by chiropractic education and common threads in state and federal law.

6. A concept of practice guidelines that respects and gives appropriate weight to the judgment of the attending doctor, avoiding "cookbook" timetables of visit limits based on aggregate data.
7. Comprehensive, competent legal input so as to be able to fully understand the malpractice, scope of practice, and third-party payment implications of each segment of any proposed guidelines document.
8. Appropriate selection of all who will participate in the framing of any proposed standards document based on representation from practicing DCs in the United States through chiropractic national and state organizations, specialty groups, and other recognized institutions.
9. Strict guidelines for the objective and comprehensive search of chiropractic literature and other relevant scientific documents.
10. Open and accessible deliberations on the part of the standards development body.
11. Opportunity for all DCs and chiropractic organizations to offer oral or written comment according to a sensible and responsible format prior to the publication of any proposed standard to the general public and the commitment to have all comments seriously reviewed by objective analysis.
12. An extended study period so that all DCs will have the opportunity to review and consider, in the context of their own individual practices, the full meaning and implications of any document prior to adoption.
13. The opportunity for individual DCs to fully consider proposed guidelines through state organizations, specialty councils or in a profession-wide referendum.
14. The establishment of an ongoing body to refine and update standards as unforeseen negative complications arise or as new scientific data becomes available.

The ICA board said their 14-step agenda is "a sound, reasonable approach to the difficult process of establishing practice guidelines."

The ICA seeks a development of practice guidelines in which "existing organizations would have the opportunity to freely select voting delegates, and the products of which would be submitted to the profession before they are released to the public at large for comment and revision."

While the ICA stresses "strict scientific criteria" in the development of practice guidelines, the areas dealing with the "legal establishment and parameters of chiropractic, ethical considerations, and the role of chiropractic education" is also considered of prime importance.

The ICA plan states: "Clinical competencies and educational standards developed in the accreditation process serve as the parameters of this effort, along with a comprehensive review of chiropractic as established and defined by the various states and the federal government."

The ICA board proposes to help fund a national effort to develop standards of care. "This is a sign of maturity within the profession, as well as an indication of how seriously ICA is taking the standards issue," said Dr Gregg.

ICA intends to submit a "detailed proposal to all state, regional, national, and specialty organizations within chiropractic and is preparing a basic document as a starting point for discussion."

The goal, says the ICA, is to achieve "a genuine consensus within chiropractic, with "no one group or organization or any self-selected panel" speaking for all of the profession.

The ICA proposal will include: "A system of apportionment for voting delegates to the national commission, a plan for financial support, the retention of expert consultants, proper legal participation and review, as well as proposals for regional hearings and written comments that will be open to all within the chiropractic profession."

Dr. Gregg concluded: "ICA has heard from many hundreds of DCs from all parts of the nation on the standards issue, and we firmly believe that there is an overwhelming grassroots desire for open-ended participation on this issue."

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