

# Code of Safe Clinical Practice

You must, at all times, abide by the Code of Safe Clinical Practice. Following this Code is part of your commitment to the CMIR Code of Conduct and Good Practice.

Your adherence to this Code is a critical part of protecting our patients from harm and has been written to give you clear guidance to work with safety uppermost in your clinic.

Please note that where local authority by-laws or national legislation differ from the Code of Safe Clinical Practice and the associated documents, these must be adhered to. Some licensing authorities insist on a wash-hand basin in the treatment room with non-hand operated taps and/or a flooring that allows for sweeping/mopping. It is advisable to check with your local authorities before securing a clinic room.

This document will be updated to remain current. Please refer to it regularly.

## Professional Duty of Care

1. You must work within the scope of your training and have appropriate indemnity and professional and public liability insurance covering you and the clinic that you work from, and each of your skills that you are trained to use.
2. You must have applicable licensing from your local authority to practice.
3. You must ensure that your clinic and public areas are safe for patients and visitors and that you have suitable toilet and handwashing facilities (with liquid soap and disposable paper towels, and a foot-operated bin) for them to use.
4. You must ask and be aware of patient allergies before using gloves, oils, creams, essential oils, silicone-coated needles, needles containing nickel and any other items that come in contact with your patient.
5. You must conduct a risk assessment (and review annually or when the layout of your environment changes) to ensure that access to waiting areas/clinic space/toilet facilities are free of hazards for patients/visitors and that you are aware of procedures in the event of needing to evacuate the building.
6. You should have First Aid supplies and keep up to date with your EFAW Training to apply safely.

## Your Clinic

7. A proper cleaning procedure should be established for your clinic, and you/ your staff must perform it at the end of every day or in between times if conditions require it.

8. You must have access to a wash-hand basin that is not operated by hand in the treatment room or close by so as to not necessitate touching any other surface or opening any further doors.
9. Hand washing must follow good handwashing technique and must comprise liquid soap from a dispenser, and you must dry your hands using disposable paper towels from a dispenser. Your bins must be foot-operated.
10. Your floor should ideally be able to be swept and mopped. Any other flooring must be short pile non-loop, and extra care must be taken to check for any needles dropped at the end of each treatment session.
11. Note that some local authorities require wash hand basins to be in the treatment rooms and flooring that can be swept and mopped or wiped. Please check in advance to find a new clinic.
12. Your couch or patient treatment chair must be cleaned for each patient by either wiping with appropriate detergent or disinfectant or replacing the couch roll or clean linen.
13. All detergents, disinfectants and wipes must be used according to the manufacturer's guidance, in particular with respect to the waiting time.
14. You should regularly clean all surfaces with an appropriate detergent or disinfectant, and you must always do so at the beginning and end of every working day.
15. Any specialist types of needles or equipment (gua sha tools, etc.) designed for reuse must be washed and cleaned thoroughly, following the manufacturer's requirements, before being sterilised using autoclave or sterilisation solution.
16. Blankets, linen or gowns must be washed at 40 degrees after use by each patient.

## **Equipment**

17. All equipment must be CE or CEUK marked and must conform to current legislation.
18. When selecting a needle manufacturer, you must take care to ensure that the needles are also CE or CEUK marked. You must also check that they are of excellent quality. Test the needle yourself to ensure the needle shaft remains attached to the handle under significant pressure.
19. All electrical equipment must be used and maintained according to the manufacturers' guidelines.
20. Heat lamps must only be used with prior safety training, and patients must not be left unmonitored nor unable to call for help.

## **Patient & Practitioner Care**

21. A consultation should be made to ensure that you are aware of any infectious diseases or any conditions or medication that might require caution on your part. Notifiable diseases must be reported.
22. You must wash your hands before beginning each treatment and at the end of each treatment.
23. Nails should be kept short and should be scrubbed with a nail brush at the beginning and end of each day to remove dirt.
24. Jewellery should be minimal (ideally just a flat wedding band) and should be cleaned regularly.
25. You must additionally clean your hands with alcohol hand gel before touching a patient and each time you touch a patient if you have touched anything else. You must use an alcohol hand gel before needling and when removing needles.
26. If there is alcohol dependency or at patient request, wipe with Chlorhexidine Gluconate to be used instead.
27. Your patients should wash their hands and use alcohol hand gel or Chlorhexidine before treatment.
28. You must first wipe the patient's skin with alcohol or chlorhexidine wipe before needling into an area of a body that is unclean or is likely to harbour bacteria such as folds of skin, the ear or the breast crease.
29. You must not needle or palpate an area of broken skin.
30. You must protect your patients from contact with your own broken skin or skin infection by wearing disposable gloves.
31. You must wear disposable gloves if you anticipate contact with blood or bodily fluids.
32. In the event of a bleed from a needle, use clean cotton buds to stop the bleeding.
33. If the cotton bud becomes contaminated with blood or body fluids, dispose of it in a sharps container or clinical waste bag. Cotton buds without contamination can be placed in normal refuse.
34. Once you have needled a point, you must not re-palpate the point with your bare finger during that treatment session unless the fingertips have been disinfected with alcohol-based hand rub gel.

35. If you leave a patient alone in the room, you must gain their consent and ensure that they are able to signal that they need help without getting off the couch, and they must be advised to remain still to avoid injury.
36. You must be sure that you have informed consent from each patient before treatment and when changing the modality of treatment.
37. Practitioners should wear clean, professional clothing, have long hair tied up and minimal clean jewellery.

### **Fitness to Practice**

38. You must not work if you have an infectious disease or condition.
39. You must seek advice from your membership body or GP if you believe that your ability to treat patients may be impaired by your own physical or mental health.
40. You must not work while under the influence of alcohol or drugs.
41. You must not treat patients if your ability to clearly diagnose, advise or provide acupuncture treatments is impaired in any way.
42. Your own health and hygiene must not negatively impact your patients.

### **Needles**

43. Needles must be sterile, single use and must be disposed of after one needle insertion. They must have a CE or CEUK mark, the method of sterilisation and must not have exceeded the expiry date. Packages must be undamaged to ensure the sterility of needles.
44. Unused needles from a multi-pack may be used for the next patient, provided they have not been taken out of the packet and that the packet has been left in the clean field. The open packet must not be left overnight not must it be left outside the clean field.
45. All needles must be disposed of in a sharps container after use.
46. Needles should be counted in and out of a patient and the floor should be checked after each patient for any needles that may have fallen.
47. If needles may have come loose into a patient's clothing or blankets, these must be checked after treatment.
48. Guide tubes must be pre-sterilised and come packaged with each individual needle or set of needles; they must not be used or stored for use after the session in which

the seal on the package is broken. If using a needle injector, a stainless steel reusable guide tube or similar, you must sterilise between treatments.

49. Any specialist types of needles designed for reuse must be washed and cleaned thoroughly, following the manufacturer's requirements, before being sterilised using an autoclave.
50. Other modalities such as Gua Sha/Direct Moxibustion and Cupping that place or drag materials on or across the body should be performed before needling and never over open acupuncture holes after needling. Patient Advisories must be used.

### **Waste Disposal**

51. You must dispose of your waste in conjunction with current legislation. Needles must be disposed of in a sharps container directly after use and not placed on any other surface. Alternatively, used needles may be placed into a tray that can be used to safely collect and transport needles to the sharps container. This tray must not be used to store or transport anything other than the used needles.

### **Mobile Working**

52. You must perform a risk assessment before carrying out a treatment if you are not in your normal place of work and make any appropriate notes on your patient files.
53. You must still be confident that you can work without risk of cross-contamination and can prevent infection when not in a clinical environment and take steps to ensure this.
54. You must use a portable sharps container when travelling.

### **Your treatment area, whether a fixed clinic site or mobile, should follow the 6 actions towards aseptic technique**

- a. You must carry out a risk assessment of your treatment room and patient areas.
- b. You must manage your environment – avoid or remove risks to patients.
- c. Decontaminate and protect your working area.
- d. Use Aseptic Fields to work in which may include general field and your critical or treatment field.
- e. Use an aseptic, non-touch technique where you only touch the skin with sterile equipment and touch only if required with sterile hands.
- f. Prevent cross-infection by cleaning down areas and tools.

### **Semi-Permanent Needles**

55. Semi-Permanent needles must only be used with adequate and appropriate training.
56. Practitioners must give a patient advisory and ask for a signature on the first time of use of semi-permanent needles.
57. Practitioners must use semi-permanent needles sourced from a reputable EU supplier with CE and CEUK markings.
58. Practitioners must use and advise patients to use in conjunction with manufacturer guidelines.

### **FSN Needling**

59. Use a fresh FSN needle for each treatment. If re-using the same needle, ensure that all of the sites to be needled have been swabbed with a disinfecting swab before needling and that the FSN needle is placed on the applicator or temporarily stored in the original protective sheath and placed in a cleaned treatment tray. The needle must not be placed on any other surface in between separate insertions. You must keep the reuse of needles to a minimum and must limit it to treatments on the same patient. Ensure that the FSN needle is properly placed on an applicator, which has been thoroughly cleaned with 70% isopropyl alcohol or other clinically accepted sterilisation solution or pre-sterilised immediately before needling.