

Shropshire Community Health

NHS Trust

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2	V2 08.12.2014	Policy reviewed and updated to reflect changes in organisation and staff providing acupuncture

2	V3 05.03.2018	Updated guidance, staff providing acupuncture as an intervention, updated consent form to reflect new guidance
3		

Policies, Procedures, Guidelines and Protocols

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1 Introduction

This policy will provide guidance on the use of acupuncture and dry needling as a treatment modality.

2 Purpose

This policy describes the way in which acupuncture and dry needling will be provided by Shropshire Community Healthcare Trust (SCHT) Physiotherapists working within SCHT. It will include a list of contra-indications and issues surrounding consent together with a procedure to follow to ensure good practice for the use of acupuncture and dry needling.

3 Definitions

Acupuncture or Dry Needling is the insertion of a needle or needles, into the body at specific points.

Musculoskeletal pain is defined as uncomplicated pain resulting from either trauma or disease recognised as arising from the musculoskeletal system.

Electro-Acupuncture, where needles insitu are stimulated with an electrical current .This should only be carried out in line with current Acupuncture Association of Chartered Physiotherapists (AACP) Safe Practice Guidelines for Acupuncture Physiotherapists (2017).

3.1 Glossary

AACP	Acupuncture Association of Chartered Physiotherapists
AHP	Allied Healthcare Professional
BBV	Blood Borne Viruses
CDP	Continuous Professional Development
CSP	Chartered Society of Physiotherapy
GP	General Practitioner
IPC	Infection Prevention and Control
POMR	Problem Orientated Medical Records
SCHT	Shropshire Community Health NHS Trust

4 Duties

This policy applies to all physiotherapists who are employees of SCHT who practice acupuncture or dry needling.

It is the responsibility of Team Leads to ensure all staff are trained and maintain continuing professional development in accordance with CSP Standards.

Team Leaders must ensure that physiotherapists act in line with SCHT policy on Consent to examination or treatment.

Acupuncture will be offered within the Trust at various locations.

5 The Practice of Acupuncture

Acupuncture or Dry Needling will only be applied to those points or meridians that the physiotherapist has been formally trained to use, and maintains their skills and competencies in this field. The physiotherapist will follow the procedures identified to ensure the provision of a safe and effective treatment, as an adjunct to other forms of physiotherapy.

As with all aspects of physiotherapy, practice staff must be governed by Standard 3 of The Health & Care Professions Council “Standards of Conduct, Performance and Ethics” (2016): “Work within the limits of your knowledge and skills – keep within your scope of practice... by only practicing in the areas you have appropriate knowledge, skills and experience for.”

5.1 Referral for Acupuncture

The patient will be referred in the usual way, i.e. by Consultant/GP or Allied Health Professional (AHP). The decision as to whether acupuncture is to be used as part of the treatment programme is at the discretion of the physiotherapist, based on their training, knowledge and skills as well as experience.

Acupuncture should not be treated differently to any other physiotherapy treatment modality. Clinical decision making must be made on the basis of the findings of a full clinical examination and reasoned clinical judgement.

It is considered good practice that acupuncture should never be used in complete isolation but as part of a planned programme of rehabilitation.

5.2 Record of Treatment

All special screening questions must be completed (see appendix 2). This must be uploaded to the patient's electronic patient record. Documentation must adhere to the AACP (2017) Safe Practice Guidelines for Acupuncture Physiotherapists:

- A copy of the informed written consent form
- Location of the needles using WHO recognised nomenclature
- If trigger point needling, the location of the needles should be described using muscle name and depth of needle. A diagram of needle application may sometimes be useful
- Left, right, bilateral or central needle placement
- DeQi present or not present for each needle
- Has the needle been removed following treatment
- How the needle was stimulated and how many times
- Was a timer used and set
- The duration of needles in situ
- Was the patient left alone during the acupuncture treatment, if so was a bell or a means of contacting the physiotherapist issued to the patient
- Any adverse events or comments

5.3 Consent

To ensure that the patient is able to give informed consent, they must be given the opportunity to consider what has been proposed. It is recommended by the AACP, that

acupuncture treatment is not given at the initial treatment session, but that the patient is given detailed information about the proposed treatment, including written information (see appendix 1). Once consent is given this must be documented in the patient's records.

For consent to be valid, the person must have capacity to consent in accordance with The Mental Capacity Act 2005, and that consent is gained in accordance with SCHAT Consent Policy.

- 5.1 Consent must be obtained prior to proceeding (see appendix 2) should be completed; a copy should be given to the patient and the original uploaded to the patient's electronic patient record
- 5.2 patients who are blood donors should be advised and supplied with the required information they will need to provide at their next donor session, as detailed by the AACP/CSP.
- 5.3 A standard screening assessment tool must be completed (see appendix 2). The following contraindications/ precautions/ potential hazards must be considered:

5.4 Contraindications

- Sepsis
- Notifiable diseases
- Unexplained / unstable seizure
- Acute stroke
- Confused patients
- The very young – patients who are unable to understand and co-operate with the treatment
- Metal allergy
- Needle phobia

Localised Contraindications

- Infection in locality of treatment site
- Swelling in locality of treatment site
- Any wounds in locality of treatment site
- Tumour in the locality of the treatment site
- Uncontrolled movements in the locality of the treatment site
- Unstable spine / spinal metastasis
- Oedema/Haematoma/Lymphoedema
- Skin conditions in locality of treatment site eg damaged or broken skin, excessively dry skin, inflamed skin, moles, scars
- Haemophilia

Special care should be taken when needling patients with the following conditions/medication in their medical history

- Pacemakers
- Diabetes
- Blood borne viruses
- Circulatory system problems
- Heart conditions
- Steroids

- Cancer
- Epilepsy or seizures
- Cognitive difficulties
- Immunodeficiency
- Anti-coagulants
- Pregnant patients (Practitioner should be guided by their training guidelines)
- Chronic skin conditions with a risk of shedding
- Previous experience of a bad reaction to acupuncture / needles

Potentially Hazardous Acupuncture/Needling Points

- Lungs and Pleura
- Chest, Back and Abdomen
- Liver, Spleen and Kidney
- Central Nervous System

6 Explanation to Patients

The patient should be informed of the proposed treatment and what is involved. This should include:

- Purpose of, and explanation of, treatment
- The procedure of needle insertion
- The use of manual stimulation to the needle
- Possible symptoms to be felt e.g. tiredness, faintness, nausea, marking of the skin, possible aggravation of the condition.
- Provision of leaflet “Acupuncture” – Your questions answered (see appendix 1)

7 Infection Prevention and Control (IPC)

Treatment area

Clean and private cubicle in a clinical setting.

The physiotherapist will have clean hands, be bare below the elbows, and have short nails

Hands must be washed before and after every treatment in the presence of the patient

The regular use of single use gloves is not recommended due to the resultant reduction of dexterity

Cuts or breaks on the physiotherapist’s skin should be covered with a waterproof dressing.

Patients will be appropriately undressed and treated in a comfortable, supported position, whilst maintaining dignity.

The use of a disposable single-use paper cover on any bed/plinth

Pillows (in sealed waterproof covers) are recommended.

Detergent wipes should be available for cleaning of the couch/plinth/pillow and any other reusable patient equipment, between uses.

It should be assumed that the patient may be infected with a blood borne virus. All standard precautions to reduce the risk of cross infection should be adhered to. Please refer to the Trust’s Standard Precautions including Surgical hand scrub, gowning and gloving Policy.

Disposable, single use, pre-sterilised needles shall be used. All needles and a sharps box shall be carried in an integral tray to the treatment area. All discarded or out of date needles

will be disposed of in a sharps box clearly marked 'DANGER – CONTAMINATED NEEDLES'. These shall be disposed of as detailed in the Trust Waste Management Policy.

Care should be taken in the disposal of the plastic applicator tubes; these should not be disposed of in the sharps boxes they should be placed in the domestic waste stream.

Any soft clinical waste (used e.g. cotton wool, gloves, paper towels) must be disposed of in the clinical waste bags.

Care must be taken to ensure the same number of needles are removed to the sharps bin as were applied to the patient during their treatment and that this is documented in the patient's notes.

All needles and sharps boxes to be stored in a locked/lockable cupboard. Temporary closure of the sharps box should be used when it is not in use. Labels should be completed on the Sharps box and the sharp boxes should be closed and disposed of after being opened for 3 months whether it is full or not.

For further advice and the management of needlestick injuries refer to the Trust IPC Prevention and Management of Needlestick Injuries: including Inoculation Incidents and Exposures to Blood Borne Viruses (BBV) Policy.

7.1 First Treatment – special precautions

In order to assess their response to treatment with acupuncture the following steps should be taken:

- The first treatment should always be given with the patient fully supported in a semi-recumbent or lying position, where possible.
- The patient is cautioned to advise the physiotherapist immediately of any ill effects during the treatment.
- The patient is advised to stay in the clinic and rest for 10 minutes immediately after treatment, particularly if they feel drowsy, and not to drive until they feel they are fully recovered. It may be helpful to suggest that they bring someone with them to their first treatment.
- The patient is asked to note any ill effects after treatment and to report these at their next appointment.

8. Potential Problems during or after treatment

Painful treatment	Physiotherapist to remove needle if indicated by patient
Drowsiness	Patient to be advised this may occur so care with machinery operation/driving etc Fainting Treatment as detailed above should be in a supported position, to minimise risk of injury of falling
Blood Spillage	To be dealt with in accordance with the Trust IPC Cleaning and Disinfection Policy and Standard Precautions Policy
Needles left in situ	Potential to be minimised through a system of counting the needles in and counting them out using a paper record
Stuck needles	This can occur in around 0.1% of treatments and is most likely due to a small muscle spasm. In this case lightly massage the area next to the needle whilst withdrawing the

	needle gently
Broken needles	Mark the area and advise the patient to attend the nearest Emergency care setting for immediate removal
Unsupervised patients -	Accurate timing of treatment session is essential – a timer device should be used for all acupuncture sessions - All patients should be given a call bell or some other means of alerting the physiotherapist if they are absent at any point during the treatment
Bruising	Patient should be advised on best practice for treatment of this.

9 Adverse Incidents

All adverse incidents occurring during or following acupuncture treatment must be recorded in the patient's notes and on the DATIX system.

10 Consultation

Liz Watkins – Head of Infection Prevention and Control

Physiotherapy Team Leads in SCHAT

Colette Bourne	Market Drayton
Claire Strickland	Whitchurch
Anne Vale	Bridgnorth
Beverly Terrington	Ludlow
Kathy Davenhill	Newport
Andy Laing	Shrewsbury and Atcham

10.1 List of Physiotherapists practising Acupuncture/Dry Needling in SCHAT

Helen Geddes
 Mike Watton
 Lorna Brisbourne
 Liz Wharton
 Wendy Jones
 Thomas Prince
 Beverley Terrington
 Colette Bourne
 Claire Strickland
 Sophie Edwards

11 Dissemination and Implementation

The policy will be disseminated electronically to team leads in SCHAT and available to all staff via the Trust Intranet.

All physiotherapists are responsible for maintaining their own required CPD levels as set out by the CSP and if they are members of the AACCP by them also.

11.1 Training/Implementation of Acupuncture/Dry Needling

It will be at the discretion of the Team Leader as to whether a member of staff will be supported to attend a course and practice acupuncture.

Pre-requisites to training:

- 11.1 Ideally two years (but a minimum of 1 year) post qualification experience, but at the discretion of the local team leader.
- 11.2 Staff need to demonstrate that they have sufficiently developed their clinical knowledge and clinical reasoning skills before they will be considered for support in developing this skill.
- 11.3 Consideration must be given to the extent that this modality is likely to be used in their current post. Where it is anticipated that there will be no or very limited opportunity to use this technique immediately following training and thereafter on a regular basis, then such requests for such training would not be supported.
- 11.4 Support may be provided in a number of ways, for example:
 - By joint assessment and treatment using acupuncture techniques
 - By 1:1 discussion of needling techniques to be used
 - By attending peer group meetings/training eventsDifferent points and techniques are taught on different training courses (even when they appear to be at the same level e.g. introductory). It is essential that when supervision/support is sought or given that the physiotherapists continue to practice within the scope of their training.
- 11.5 Acupuncture training is through an accredited course and formal certification, with a minimum of 300 hours of training.

12 Monitoring Compliance

Compliance and competencies will be monitored by the Team Leads in SCHT via Appraisal Process and Annual Audit

13 References

Code of Members Professional Values and Behaviour (Published 2011 Author Ann Green, CSP Chair of Council)

AACP (2017) Safe Practice Guidelines for Acupuncture Physiotherapists. Acupuncture Association of Chartered Physiotherapists. Peterborough.

Health & Care Professions Council (2016) Standards of Conduct, Performance and Ethics.

14 Associated Documents

Hand Hygiene Policy

Standard Precautions Policy including Surgical Hand Scrub, Gowning and Gloving Policy

Prevention and Management of Needlestick Injuries: including inoculation incidents and exposure to BBV Policy

Waste Management Policy

Cleaning and Disinfection Policy

Consent to Examination or Treatment Policy

Mental Capacity Act 2005

15 Appendices

Appendix 1: Patient Advice Leaflet October 2018

Appendix 2: Physiotherapy Acupuncture and Dry needling Checklist and Consent Form (PH302)

Is acupuncture suitable for everybody?

Yes, although there may be certain conditions where the Physiotherapist decides that acupuncture is perhaps not appropriate – for example if you are pregnant, if you suffer from certain illnesses or are taking certain medications.

If you intend donating blood you may be asked to defer your donation for a short period following acupuncture treatment.

Will I be asked to give my consent to acupuncture treatment?

Yes. The Physiotherapist will make an assessment of your suitability for acupuncture, including asking you a number of questions about your general health, medications you are taking and so on.

Once you are happy that you understand the treatment process you will be asked to sign a consent form.

You can, of course, refuse before or during the procedure.

Training

This Trust only allows Physiotherapist to practice acupuncture once they have undertaken appropriate training

Further Information

If you would like further information about acupuncture please speak to your physiotherapist who will be happy to advise you.

ACUPUNCTURE

Your questions answered

*A guide to the use of
acupuncture in the physiotherapy
service*

Created by Shropshire Community
Health NHS Trust

March 2018

ACUPUNCTURE

Some answers to frequently asked questions.

What is acupuncture?

Acupuncture involves the insertion of very fine needles into certain points on the skin. The needles, which are sterile, do not penetrate very deeply and are discarded after each treatment.

How does it work?

Modern scientific research has found that acupuncture can stimulate the relief of pain by nerve reflexes causing the brain to release the body's own natural painkillers, called endorphins. It can also help to modify the way in which impulses carrying pain travel to the brain.

Is acupuncture an accepted physiotherapy treatment?

Yes. Physiotherapy is the treatment and prevention of injury and disease by physical means.

Physiotherapists have specific training in a wide range of natural

treatment methods, which can be used alone or in combination. Acupuncture is just one of those methods.

What can I expect?

- The physiotherapist will make a thorough assessment of your problem and decide whether acupuncture is the appropriate treatment.
- A number of needles will be inserted – usually 4 to 6, all needles used in this clinic are single use.
- You will feel a slight pricking sensation as the needle is inserted.
- The needles are left in place for up to 30 minutes and the physiotherapist may rotate the needles to produce a sensation.

Are there any side effects?

Acupuncture is generally very safe. Serious side effects are very rare less than 1 per 10,000.

You need to be aware that drowsiness occurs after treatment in a small number of patients and if affected you are advised not to drive.

Minor bleeding or bruising occurs after acupuncture in about 1% of treatments.

Pain during treatment occurs in about 1% of treatments.

Existing symptoms can get worse after treatment (less than 3% of patients). You should tell your physiotherapist about this, but it is usually a good sign.

Fainting can occasionally occur in certain patients, particularly at the first treatment.

In addition, if there are particular risks that apply in your case, your Practitioner will discuss them with you.

Appendix 2 Treatment Checklist and Consent Form

First Name: _____
 Last Name: _____
 Date of Birth: _____
 NHS Number: _____

**Physiotherapy
 Acupuncture and Dry Needling
 Checklist and Consent Form**

	Question	* please give additional details	Details/Comments
1.	Pregnancy?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
2.	Diabetic?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
3.	Epileptic?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
4.	Needle Phobia?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
5.	Metal allergy	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
6.	On Anti-Coagulants?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
7.	Haemophilia?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
8.	Infection at Needle Site?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
9.	Oedema at Needle Site?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
10.	Cognitive Difficulties?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
11.	Unstable Heart Conditions?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
12.	Blood Borne Viruses?	Yes * <input type="checkbox"/> No <input type="checkbox"/>	
Additional Comments:			

Patient / parental agreement to the Acupuncture Treatment

Statement of Health Professional

- I have explained the acupuncture procedure to the patient

Information leaflet "Acupuncture – Your Questions Answered" given to patient? Yes * No *Date: _____

Health Professional's Signature _____ Date: _____

Name (please print): _____ Designation: _____

Statement of Patient/person with parental responsibility for patient

- The physiotherapist has explained the treatment process to me and I have answered all the above questions to the best of my knowledge
- I agree to a course of acupuncture treatment and understand that I can refuse treatment at any time

Signature: _____ Date: _____

Name (please print): _____ Relationship to patient: _____

Copy given to patient? Yes No