NEW ZEALAND CHIROPRACTIC BOARD
TE POARI KAIKOROHITI O AOTEAROA

Consultation Outcome: Code of Ethics and Professional Boundaries Standards

Context

In 2024, the Te Poari Kaikorohiti o Aotearoa | the Chiropractic Board (the Board) held workshops throughout Aotearoa New Zealand with chiropractors to discuss the Code of Ethics and Professional Boundaries Standards. To ensure that public perspectives were also included in the review, a small number of patients at the New Zealand College of Chiropractors' (NZCC) student clinic were interviewed to understand what a Code of Ethics should include and what their expectations of practitioners were.

To further ensure a robust and comprehensive review process, in early 2025, the Board established a Code of Ethics Review Committee; comprising two Board members, two community members, and three chiropractors, to develop and update the Code of Ethics. The draft was then peer reviewed by the Board and an independent subject matter expert.

In early 2026, the profession and stakeholders were asked to provide submissions on the draft Code of Ethics and Professional Boundaries Standards.

A total of 40 submissions were received, including three from organisations (CCEA, NZCA and an independent chiropractic clinic). The low submission rate may reflect the earlier engagement undertaken with chiropractors through the 2024 workshops. Chiropractors who had already provided feedback during those sessions may have considered that their views had been captured and therefore did not need to make further formal submissions.

What you told us

The table below provides a summary of the key themes of your feedback, and the Board's consideration and decisions in response to this.

Key theme	Board consideration
Te Tiriti and tikanga Māori You told us that you would like to see: • Acknowledgment of Te Tiriti o Waitangi. • Stronger, more explicit integration of tikanga Māori into standards. • Evidence of Māori perspectives. • How cultural safety should operate in practice, particularly around consent, confidentiality, collaboration, and whānau involvement.	The Board invited Māori viewpoints during the workshop collaborations and submissions. However, the Board recognises that this was only a small step in its overall journey, and further mahi is required to understand the best way to reflect and acknowledge tikanga Māori and embed Māori perspectives in future regulatory documentation and practice. The Board will continue to keep practitioners and stakeholders informed as this mahi progresses.

Patient safety and harm prevention You advised that: • Patient safety could be more prominent in the Code. • There should be clearer guidance on referral when care is outside the scope or ineffective. • Clarification is needed on practitioner obligations when risk of harm is identified. • Expectation of duty of candour and open disclosure needed to be included.	When reviewing the Code of Ethics, the Board made a wording change to Principle 2, point 4, adding "including treatment risks" to strengthen the emphasis on patient safety. The Board does expect Chiropractors to adhere to the Code of Ethics and demonstrate insight and professional judgement in all areas of their practice, including risk of harm and patient safety. Should a Chiropractor encounter a situation where more clarification is required, they should seek guidance from a professional peer.
Privacy, confidentiality, and practice environments You asked for clarification on: • Open plan or shared adjusting spaces. • Whether initial consultations and sensitive conversations must be private. • Digital confidentiality and modern record keeping. • When confidentiality must be overridden due to safety concerns. • Reintroduction of explicit record retention expectations.	The Board responded to your feedback by making the below changes to the Code of Ethics: Principle 4: changed 'respect' to 'maintain', so the principle has been reworded to 'Maintain privacy and confidentiality.' This wording provides a clearer and more active expectation that chiropractors must take steps to protect patient privacy and confidentiality in all practice settings. Principle 4, points 5 and 6: Reworded these points to strengthen guidance around privacy and confidentiality. These changes are intended to provide clearer, more practical direction and to better address potential risks of harm arising from breaches of privacy.
Evidence informed versus evidence-based practice You asked for clarification on: • The distinction between "evidence-informed" and "evidence-based" practice. • Why both terms appear in the document and glossary. • How evidence standards relate to advertising, treatment claims, and emerging practices.	The Board removed evidence-based practice from the glossary as it isn't referenced to or in the Code of Ethics. Evidence-informed definition was reworded to reflect the focus on a holistic approach, that combines research evidence, clinician expertise, each patient's individual preferences, cultural context, and circumstances to achieve the best outcomes. The Board is aware that further mahi is needed in relation to advertising standards and treatment plans. The Board will continue to keep practitioners and stakeholders informed as this mahi progresses.

Professional boundaries between colleagues You asked for stronger statements to address: • Practitioner to practitioner behaviour. • Prohibitions on bullying, harassment, discrimination, and sexual misconduct. • A zero-tolerance approach for unethical workplace conduct.	The Professional Boundaries Standards outlines practitioner expectations on professional and ethical behaviour between chiropractors and their patients. Point four explicitly outlines zero-tolerance for sexual and/or inappropriate relationships with patients. The Board recognises that the Standards may not capture every scenario or circumstance that may arise. While some expectations are stated explicitly, the Standards are also intended to support chiropractors to use professional judgement, demonstrate insight, and seek appropriate guidance where a situation is unclear.
Treating whānau and family members You asked for clarification on: • Definitions of acceptable vs unacceptable care. • ACC exclusions, documentation, and second opinions. • Guidance relating to partners or significant others who are not legally family.	The Board acknowledges that decisions about treating whānau, family members, partners, or other people with whom a practitioner has a close personal relationship requires careful consideration. In a non-ACC funded context, there is not always a single answer that will apply to every situation, but chiropractors are expected to ensure that treatment remains professional, clinically justified and does not compromise professional judgement. The Standards clarify that practitioners should not treat whānau or family members under ACC-funded care. As with all aspects of clinical practice, chiropractors should seek appropriate guidance where a situation is unclear.

Conclusion and acknowledgement

The updated Code of Ethics and Professional Boundaries Standards are effective from date of publication (July 2026). You can find these documents on the Board's website under Resources & Publications: Policies and Standards.

The Board would like to acknowledge and thank the practitioners, stakeholders and patients involved in the workshops and consultation process for their time and feedback.