

Association of Reflexologists

Code of Practice and Ethics for Members of the AoR



Introduction

The Association of Reflexologists (AoR) is committed to the highest possible standards of professional conduct and as such has adopted a Code of Practice and Ethics (shown in this document) and a disciplinary framework for non-compliance.

All Members of the AoR, by joining the Association, undertake to abide by the Code of Professional Practice and Ethics. Unless otherwise stated, each part of this code applies to all categories of membership.

This Code of Practice and Ethics is designed to encourage integrity and responsibility as a complementary therapy practitioner, as well as to uphold and further the standing of both our profession and the Association of Reflexologists. It can form the basis for discussion in the event of a complaint against you as a member.

The AoR will publicise any changes to the Code; however, it is your responsibility to ensure that you are familiar with the current AoR Code of Practice and Ethics at all times.

General Principles

The AoR Code of Practice and Ethics defines the expectations of you as an AoR member, to behave professionally and ethically.

The AoR communicates in English and therefore any Full member is expected to have a level of competency in English sufficient to understand AoR materials and information.

The list of topics below is not exhaustive, but forms the basis on which decisions should be made.

As a member of the AoR, you must at all times:

- 1) Act in the best interests of your clients and treat them with respect**
- 2) Maintain client confidentiality**
- 3) Take responsibility for your own actions**
- 4) Practise only within the limits of your competence, maintaining and developing your knowledge and skills**
- 5) Protect your own and your profession's reputation**
- 6) Respect and maintain good relationships with other practitioners and health professionals**
- 7) Practise within the law, both personally and professionally**



1. Act in the best interests of your clients

- a) You must always act in the best interests of your client; the safety, comfort, confidentiality and welfare of the client must take priority at all times.
- b) You must be aware of the client relationship and develop listening skills and a caring attitude.
- c) You must never allow your views about client's sex, age, colour, race, disability, sexuality, social or economic status, lifestyle, culture or religious beliefs to affect how you treat or the advice you give. As far as practical you should ensure that any advice given should match the economic status, lifestyle, culture and religious beliefs of your client.
- d) You must not abuse the trust of existing or potential clients or exploit their lack of knowledge.
- e) Full members must ensure that their professional practice is fully covered by professional indemnity insurance against public liability and malpractice at all times and on request provide the AoR with their insurance details. (See guideline 1)
- g) As a practitioner working in your own environment, you should:
 - i. Ensure a private treatment area with easy access to bathroom facilities is provided.
 - ii. Ensure that you comply with the terms of the disability discrimination legislation and ensure disabled access for your clients, where practicable.
 - iii. Ensure that premises and equipment are clean and hygienic.
 - iv. Ensure that your own health and hygiene are not such as to put the client at risk.
 - v. Ensure that local constraints are adhered to (see guideline 2).
- h) You must recognise the responsibility you have towards your client at all times.
 - i. Before an initial consultation with a client an accurate description of reflexology in layman's terms should be available (see guideline 3).
 - ii. A statement of fees should be made before commencement of treatment.
 - iii. You must obtain a full medical history before commencing the initial treatment (see guideline 5).
 - iv. You must obtain a signed consent form before commencing the initial treatment (see guideline 4 on obtaining informed consent and the obligations towards minors). Some clients because of age, illness or mental capacity may not be able to give consent to treatment. In these circumstances you must obtain clear consent from somebody that you are satisfied is authorised to give consent on behalf of the client. This may in some circumstances be a team of health professionals or care providers. This consent must be gained in writing.
 - v. Full and accurate contemporaneous (i.e. at the time of consultation) records of treatments given should be kept (see Guideline 5).
 - vi. If a member practices or offers other therapies it should be made clear to the client that they form no part of the reflexology treatment. Some therapies are inappropriate for use with children and vulnerable adults. Others may be suitable, however members who offer such treatments should have knowledge of the relevant requirements of the Children's Act 1989, the Protection of Children Act 1999, the Safeguarding Vulnerable Groups Act 2006 and other

pertinent legislation and apply it to their work. For information on these acts see www.opsi.gov.uk. Clients must give signed consent to having any other therapy alongside their reflexology treatment.

Relationships with Clients

As an AoR member, you must act ethically in all relationships with clients. Specifically:

i) Personal Relationships

You must deal with clients in a professional manner which is not open to misunderstanding or misinterpretation. Non-physical behaviour, gesture, unnecessary physical contact, verbal suggestion or innuendo may be construed as abusive or harassing.

When treating a relative or a friend, clear boundaries must be maintained between social and professional relationships.

j) Inappropriate or Improper Relationships

An improper personal relationship means either a sexual relationship, or any inappropriate emotional involvement with a client.

You should not use your professional position to pursue any improper personal relationship with a client, or with anyone having a close relationship with a client.

If you find that you are becoming involved in an improper relationship with a client, you should end the professional relationship and should, if appropriate, recommend an alternative reflexologist for any future treatments.

If a client shows signs of becoming involved in such an improper relationship, you should discourage the client, and if necessary end the professional relationship.

k) It is recommended that you retain a contemporaneous note of the situation, the actions taken, the reasoning for choice of actions and any outcomes, in case of any future claim of alleged misconduct.

2. Maintain client confidentiality

The therapist/client relationship is based on one of trust. You must treat all information about your clients as confidential, and only use such information for the purposes for which it was given.

- a) You should not disclose, or allow to be disclosed, to any third party any information gained (whether about a client or about any other person), except where such disclosure is authorised by the client and/or other person concerned or is required by legal or regulatory process, or where such information is already in the public domain. Similarly, confidential information acquired as a result of professional and business relationships shall not be used to the personal advantage of you or third parties.
- b) The client has responsibility for their own health. However, if you have concerns about their symptoms, you should suggest that the client consults their medical practitioner or Practice Nurse. Unless the client specifically requests that confidentiality be broken, you are advised not to contact anyone on his or her behalf in order for help to be obtained.
- c) You must also keep to the conditions of any relevant data-protection legislation and follow best practice for handling confidential information relating to individuals at all times. Best practice is likely to change over time and you must stay up to date. You must be particularly careful not to reveal, deliberately or accidentally, confidential information that is stored on computers. You must comply with Data Protection legislation. If you keep client records on an electronic device, you should check

if you are required to register with the Office of the Information Commissioner (http://www.ico.org.uk/for_organisations/data_protection/registration/). All records must be kept secure. Paper records must be kept under lock and key and computer records should be password protected. Where a member is working with or for another business, a legally binding document should be signed by both parties making absolutely clear who has access to client records and to whom they belong in the event of the arrangement ceasing.

- d) Confidentiality can be a particular challenge when treating minors. You must have an adult (either a legal parent or guardian, or someone holding signed consent from a legal parent or guardian) present at the consultation if the child is under 16.
- e) If case histories are used (for example in connection with research or the furtherance of knowledge), they must be used anonymously to protect client identity and confidentiality.

3. Take responsibility for your own actions

You are personally accountable for your actions and must be able to explain and justify your decisions

4. Limits of competence & refusal to treat

- a) As an AoR member, you should carry out treatments and give advice only within the limits of your professional training and competence - i.e. having received the proper training and be duly qualified to perform the treatment. No unqualified advice should be given.
- b) You should inform your clients and seek their consent before introducing new treatments into their existing treatment programme.
- c) A consultation **must** be undertaken before each treatment to ensure that the most appropriate treatment is being given to the client and that no new contraindications have occurred between treatment sessions.
- d) You have the right to refuse to treat a client, providing the refusal is carried out in a professional manner.
- e) You should refuse to treat a client if:
 - i. you do not feel competent to do so, for example if they are suffering from mental health problems, an addiction or are suicidal, etc. In such circumstances you should suggest that they contact their GP for further help and referral.
 - ii. you are unable able to converse with the client in a manner fully understandable by both parties
 - iii. you feel your client is becoming reliant on reflexology and neglecting other aspects of their health and wellbeing
- f) It is permissible under Section 35 Subsection 2 of the Sex Discrimination Act 1975, for treatments where physical contact is involved, for a therapist to choose to treat only clients of the same sex.

- g) In the event of you being unable to treat, if you wish to refer the client to another therapist, the client must:
 - i. Be offered an equivalently qualified and experienced reflexologist or an alternative appointment
 - ii. Be given enough information about the suggested therapist to make an informed choice.
- h) You should not:
 - i. Diagnose a medical condition
 - ii. Prescribe
 - iii. Claim to cure or treat specific conditions

Continuing Professional Development (CPD)

The mark of a professional is that they are willing to continually update and expand their knowledge and skills to give the best to their clients.

- i) It is compulsory for all Full, Fellow and Honorary members to undertake CPD in accordance with the AoR Continuing Professional Development policy. Each year, the AoR run random checks on members to ensure compliance with the CPD policy, so members should be prepared at all times to present their CPD records and files upon request.
- j) First aid: The AoR strongly recommends that you have a current First Aid certificate. If a medical event does occur you must assess each situation thoroughly and decide if it is suitable to offer a duty of care and act accordingly. Depending on the level of the incident the best action may be to dial 999 immediately.

If you have a client with a specific illness that may reoccur during treatment (for example epilepsy) then you should have a discussion of their requirements and a written plan of what to do should that eventuality take place, from the very first treatment.

Health & Fitness to Practice

- k) You must be aware of your own health and fitness to practice and adjust your treatments accordingly.

You must limit your work or stop practising if you or another person has any reason to believe that your performance or judgement is affected by your physical, emotional or mental health. You must also take appropriate precautions to protect your clients, anyone accompanying them, your staff and yourself against infection, and against the risks that you might infect someone else.

Treatment of animals

- l) It is illegal, in terms of the Veterinary Surgeons Act 1966, for non-veterinary surgeons, however qualified in the human field, to treat animals. All forms of complementary therapy that involve acts or the practise of veterinary surgery must be undertaken by a veterinary surgeon, subject to any exemption in the Act. At the same time, it is incumbent on veterinary surgeons offering any complementary therapy to ensure that they are adequately trained in its application.

<http://www.rcvs.org.uk/advice-and-guidance/code-of-professional-conduct-for-veterinary-surgeons/supporting-guidance/treatment-of-animals-by-unqualified-persons/>

5. Protect your own, and your profession's reputation

You should conduct yourself with honesty, integrity and dignity, and act in a way which maintains the reputation of your profession, maintaining high standards of personal and professional conduct. You should avoid any behaviour or activity that is likely to damage your profession's reputation or undermine public confidence in your profession.

Appropriate professional boundaries must be maintained between you and your client. Development of a personal relationship must result in the cessation of the therapeutic relationship.

You should not speak or write disrespectfully of fellow reflexologists or the Association of Reflexologists, both in a private and a work capacity, at any time. This includes both private and work related communications of any nature.

If you are representing the AoR in any capacity, you should abide by the following:

- a) Act in a responsible and professional manner
- b) Use your knowledge and experience to contribute to the development of the profession and the specific area you represent.
- c) Promote policies and procedures which uphold human rights and which seek to ensure access, equality and participation for all.
- d) Ensure that you do not act out of prejudice against any person or group, on any grounds, including origin, ethnicity, class, status, sex, sexual orientation, age, disability, beliefs or contribution to society.
- e) It is your responsibility to make the AoR aware, in writing, of any relevant changes in your situation which might impact your professional status, reputation or membership of the AoR.

6. Relationships with other practitioners and health professionals

- a) You should not claim to 'cure' or 'heal' medical ailments or to diagnose medical conditions.
- b) You should endeavour to foster good relations with those working in orthodox medicine.
- c) You should not contradict medical treatment instructions given by a doctor or medical professional.

It is possible to complete a treatment:

- i. Where the client choice overrides medical opinion of the efficacy of a treatment
 - ii. Where there is no reason to believe that reflexology would cause harm
 - iii. Where you are confident treating but a medical professional expresses an opinion that reflexology will not help.
- d) Always ascertain at the consultation stage whether the client has any medical conditions or is undergoing medical treatment likely to be affected by reflexology.

In the event of a contraindication, you should **not** carry out any treatment until you have the consent of the client's doctor or other medical professional. The client can obtain such consent either verbally or in writing from the doctor.

- i. If verbal consent is received, the client must then sign his or her client record that such consent has been given. The client's written consent must be attached to the client record.
 - ii. Alternatively, with the client's signed approval, you can write to the doctor directly giving full information on the treatment to be carried out, your competence to do so and requesting a response.
- e) When working in a multi-disciplinary team you remain accountable for your professional conduct, any care or professional advice you provide, or any failure to act. You must protect patients and clients if you believe that they are actually or potentially at risk from a colleague's conduct, performance or health. The safety of patients, clients and users must come before any personal and professional loyalties at all times. As soon as you become aware of any situation that puts a patient, client, user or colleague at risk, you should discuss the matter with an appropriate professional colleague.
- f) The AoR Code of Practice and Ethics forms a basis for standards of a practitioner's professional behaviour. In a multi-disciplinary environment, additional standards and Codes may also apply. For example:
- i. Local clinical governance
 - ii. Communications with other healthcare professionals,
 - iii. Local licencing

It is your responsibility as a therapist to decide which Code of Conduct you believe takes precedence.

- g) Members must act with respect for fellow reflexologists, practitioners, and all other healthcare professionals. Any activities of a competitive nature must be conducted in a fair and open manner.

This includes, but is not exclusive to:

- inappropriate comments
- personal slights
- false claims
- breaching of copyright and any form of plagiarism. (See guidelines for further information)

7. Practise within the law

You must comply with all relevant laws and regulations and shall avoid any action that may discredit the profession.

Access for disabled clients

- a) You should make sure that you comply with the terms of the disability discrimination legislation and ensure disabled access for your clients, where practicable.

Publicity

- b) You must not seek to attract business unfairly or unprofessionally or in any way which would discredit the reputation of reflexology.
- c) All promotional materials should be legal, decent, honest, accurate and truthful and must not be misleading to the general public. In all cases materials should be in accordance with the Committee for Advertising Practice (CAP) guidelines, and as far as possible adhere to the Advertising Standards Authority guidelines and any other body with jurisdiction over advertising related materials. More information may be found at:
<http://www.aor.org.uk/business-a-marketing>

d) In any promotional material, members should use the MAR suffixes (MAR, HMAR, FMAR as entitled) after their name as shown on their Membership Certificates

i. Use of the title 'doctor'

The AoR strongly recommend that members do not use the title Dr to precede their name when referring to their reflexology practice, but instead use the suffix PhD to denote their advanced level of knowledge. This is to avoid any confusion amongst members of the public, who may assume that the prefix 'Dr' only refers to people who are registered with the General Medical Council.

e) Your promotional material must not breach copyright or contain material plagiarised or copied from others. This includes, but is not exclusive to, your website and printed material. You must not copy text or images from other published sources without seeking and receiving written permission from the author who holds the intellectual property for the material. When using text or images that you have written permission to use these must be attributed to the original author.

Research

If you are involved in a research project you must:

- a) Abide by the local guidelines, methodological and ethical requirements as stated in the research protocol.
- b) Report all research findings with honesty.
- c) Accept payments only as stated in the research protocol.
- d) Provide help where required to obtain the publication of a research paper whatever the outcome.

Complaints procedure

- a) The purpose of the Complaints Procedure is to ensure the impartial examination of a concern or complaint against a member (of any category)
- b) The AoR Complaints Procedure can be obtained from the Taunton Office or from the Members' Area of the AoR website.

Important

This Code may be altered at any time by the AoR Board. Prior to a decision being made, the Membership shall be advised of the alteration and invited to comment. Having considered all comments the Board shall notify members of any alterations.

This Code is not a substitute for those of other professional bodies to which a member may belong. Members are encouraged to join professional bodies particularly concerned with other disciplines that they may practice. It is expected that all members of the AoR conduct themselves as professional therapists and abide by the AoR Code of Practice and Ethics regardless of the type of therapy practiced. You may belong to other professional bodies for other therapies but as a member it would be expected that the AoR Code of Practice and Ethics be used as a minimum standard for all professional conduct.

Appendix: Document History

These procedures relate to all Members of the AoR who have agreed to abide by the Association's Code of Practice and Ethics, amended in July 2008 with a minimal change to 2.6 in 2011, together with some rewording for additional clarification. 2012 changes covered communication with clients and the AoR and personal conduct in line with CNHC requirements.

Document Change history (since July 2008)

Sept 2011:

1. Change to Code & Ethics 2.6 to add "Members should not speak or write disrespectfully of fellow Reflexologists, or the Association of Reflexologists either publicly or to clients."
2. Some rewording of the text for clarification.
3. Introduction of Advertising Standards agency [section 6]
4. Clarification on what happens if the Member does not submit evidence as requested by the Disciplinary Assessment Team (see Disciplinary procedure document).

2012:

1. Communication with clients, and the ability to understand AoR information in English. [sections 5 & 8].
2. Introduction of text concerning immoral conduct.
3. Responsibility of a member to notify AoR of any relevant change of circumstances which might impact full membership

2013 - 2014:

1. Complete revision (effective 1st July 2014)

2015:

1. Minor changes in line with the requirements of London Borough licencing to emphasise that members of the AoR are expected abide by this Code of Practice regardless of which therapy they are practising at the time.

2016

1. Changes to sections 5, 6 and 7 regarding respectful communications and copyright.