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PREFACE

i. The College of Occupational Therapists’ Code of Ethics and Professional Conduct (hereinafter referred to as ‘the Code’) is produced by the College of Occupational Therapists, (hereinafter referred to as ‘the College’) for and on behalf of the British Association of Occupational Therapists, the central organisation for occupational therapists throughout the United Kingdom. The College of Occupational Therapists is the subsidiary organisation with delegated responsibility for the promotion of good practice and the prevention of malpractice.

ii. The title ‘occupational therapist’ is protected by law and can only be used by persons who have successfully completed an approved course leading to a diploma or degree in occupational therapy and who are eligible for registration with the Health Professions Council (HPC). All occupational therapists practising in the UK shall be registered with the Health Professions Council.

iii. This Code shall be used in conjunction with the HPC’s current Standards of Conduct, Performance and Ethics and the College’s latest standards for professional practice in occupational therapy.

iv. Occupational therapy personnel* shall also comply with current laws and legislation, best practice standards as well as employers’ reasonable policies and procedures.

*NOTE:
Occupational therapy personnel refers to occupational therapists, occupational therapy students and occupational therapy support workers. It also includes managers, educators and researchers who are occupational therapists.
SECTION ONE

Introduction

1.1 The purpose of the Code is to provide a set of principles that apply to all occupational therapy personnel working in a variety of settings. It is a public statement of the values and principles used in promoting and maintaining high standards of professional behaviour in occupational therapy.

1.2 Any action that is in breach of the purpose and intent of this Code shall be considered unethical. Moreover, this Code may be used evidentially and is intended to apply to all persons professionally engaged in occupational therapy practice and education in the United Kingdom. The Code provides directions for all occupational therapy personnel and may be used by others to determine the standards of professional conduct expected by the College. It is recommended that employers refer to the Code in contracts of employment.

1.3 The College strongly encourages recognition of the Code by all other individuals, organisations and institutions involved with the profession.

1.4 The College is strongly committed to client-centred practice and the involvement of the client as a partner in all stages of the therapeutic process.

1.5 The needs of the carer shall also be taken into account when planning intervention.

1.6 The Code requires that all occupational therapy personnel discharge their duties and responsibilities in a professional and ethical manner.

1.7 The compilation, revision and updating of the Code are the delegated responsibility of the Ethics Committee of the College of Occupational Therapists. It is revised every five years.

1.8 If there is uncertainty or dispute as to the interpretation or application of the Code, enquiries shall be referred in the first instance to the Group Head (Practice), Education and Practice Department, College of Occupational Therapists, who may then seek further clarification from the Ethics Committee.

This version of the Code supersedes all previous editions.
SECTION TWO

Client Autonomy and Welfare

Respecting the autonomy of the client

2.1 Occupational therapy personnel shall at all times recognise, respect and uphold the autonomy of clients, and advocate client choice and partnership working in the therapeutic process. Occupational therapy personnel shall promote the dignity, privacy and safety of all clients with whom they have contact.

2.1.1 Each client is unique and therefore brings an individual perspective to the occupational therapy process. Clients have a right* to make choices and decisions about their own healthcare and independence. Such choices shall be respected, even when in conflict with professional opinion.

2.1.2 Clients shall be given sufficient information to enable them to give informed consent* about their health and social care.

2.1.3 Information shall be provided in a form and language that can be understood by the client.

2.1.4 Reasonable steps* shall be taken to ensure that the client understands the nature, purpose and likely effect of the proposed intervention(s).

2.1.5 Clients shall be given the opportunities to exercise a right of refusal, which, if so exercised, shall be respected.

*NOTE:
Exceptional circumstances may, however, prevail, e.g. (i) where the client is deemed to lack competence in relation to consent to treatment (mental health legislation, mental capacity legislation and current case law); and (ii) rights of access to information may be curtailed in certain circumstances, such as the Data Protection Act 1998 and Children Act 1989, where local procedures shall be referred to.

Duty of Care to the Client

2.2 Occupational therapy personnel have a duty to undertake reasonable care of clients.
Confidentiality

2.3 Occupational therapy personnel are ethically and legally obliged to safeguard confidential information relating to clients.

2.3.1 The disclosure of confidential information is only permissible in occupational therapy where: the client gives consent (expressed or implied); there is legal justification (by statute or court order); it is considered to be in the public interest in order to prevent serious harm, injury or damage to the client or to any other person.

2.3.2 Disclosure to third parties (which may include relatives, police, lawyers and the media) regarding the client’s diagnosis, treatment, prognosis or future requirements shall only be made where there is valid consent or legal justification to do so. Reference shall be made to local procedures.

2.3.3 All records shall be kept securely and made available only to those who have a legitimate right or need to see them.

2.3.4 Local and national policies regarding confidentiality in the storage and electronic transfer of information (including records, faxes and emails) shall be adhered to at all times.

2.3.5 Access to records by clients shall be granted in accordance with current statutory requirements. Reference shall be made to current guidance (both local and national) on access to personal health and social care information.

2.3.6 Prior to producing visual, oral or written material relating to clients, issues of confidentiality shall be addressed.

2.3.7 Discussions concerning a client shall be held in a location and manner appropriate to the protection of the client’s right to confidentiality and privacy.
Protecting clients

2.4 Occupational therapy personnel shall not engage in or condone behaviour that causes unnecessary mental or physical distress. Such behaviour includes neglect, intentional acts, indifference to pain or misery and other malpractice.

2.4.1 Any intervention that is likely to cause pain or distress shall first be explained to the client. Every effort shall be made to ensure that the client understands the nature, purpose and likely effect of the intervention before it is undertaken.

2.4.2 Occupational therapy personnel shall make every effort not to leave a client in pain or distress after intervention. Reasonable professional judgment shall be used to assess the level of pain, distress and risk, and take appropriate action.

2.4.3 Occupational therapy personnel who witness or have reason to believe that the client has been the victim of dangerous, abusive, discriminatory or exploitative behaviour or practice shall use local policies to notify a line manager or other appropriate person as soon as reasonably possible.
SECTION THREE

Services to Clients

Referral of clients

3.1 Occupational therapy personnel shall have and abide by clearly documented procedures and criteria for referral to their service.

3.1.1 Occupational therapy personnel shall obtain relevant information to enable them to determine the appropriateness of the referral.

3.1.2 Occupational therapy personnel shall work to a documented system for prioritising referrals which recognises levels and degrees of need and optimises the use of resources.

Provision of services to clients

3.2 Occupational therapists shall provide services to all clients in a fair and just manner. When relevant and appropriate, occupational therapy personnel shall negotiate and act on behalf of the clients in relation to upholding and promoting the autonomy of the individual or group. Such negotiation shall be aimed at maximising the benefit for the clients and take into account resource considerations.

3.2.1 Occupational therapy personnel shall be aware of and sensitive to cultural and lifestyle diversity. They shall provide services that reflect and value these societal characteristics. Occupational therapy personnel shall not discriminate unlawfully and unjustifiably against clients or colleagues.

3.2.2 In establishing priorities and providing services the needs, wishes, feelings and choices of clients shall be taken into account wherever possible. Priorities shall always be founded on sound ethical principles and evidence-based or current best practice.

3.2.3 Services shall be client-centred and needs-led.

3.2.4 Recorded assessment of need shall clearly state those objectives that have to be achieved in order to maintain a minimum level of satisfactory and safe occupational therapy service to clients. Occupational therapists shall record unmet needs.

3.2.5 If occupational therapists feel unable to reach the minimum standards determined in 3.2.4, the appropriate manager shall be notified in writing with a copy to the client and referrer, if applicable.
3.2.6 Occupational therapists shall state and substantiate their views to their manager about resource and service deficiencies that may have implications for clients and carers.

3.2.7 The occupational therapy manager has a duty to take appropriate action upon notification of resource and service deficiencies.

**Record keeping**

3.3 Occupational therapists shall accurately record all information related to their involvement with the client, either as an occupational therapy record, part of a multi-disciplinary record or as a client-held record. This responsibility shall extend to other occupational therapy personnel in accordance with local guidelines.

3.3.1 Every client shall have a clearly recorded assessment of need and objectives of intervention.

3.3.2 Consent to occupational therapy shall be obtained from the client, recorded in client notes and regularly confirmed in line with local policy.

3.3.3 Consent that is refused or withdrawn shall also be recorded.

3.3.4 The prime purpose of records is to facilitate the assessment, treatment and support of a client. It is essential to provide and maintain a written record of advice given, all interventions and decisions that affect the client.

3.3.5 Accurate, legible, factual, contemporaneous and attributed records and reports of occupational therapy intervention shall be kept in order to provide information for colleagues and for legal purposes such as client access and court reports.

3.3.6 Subjective opinion shall always be identified as such and shall be relevant to the client.
SECTION FOUR

Personal/Professional Integrity

Personal and professional integrity

4.1 The highest standards of personal integrity are expected of occupational therapy personnel. They shall not engage in any criminal, unprofessional or other unlawful activity or behaviour.

4.1.1 Occupational therapy personnel shall adhere to statutory and local policies with regard to discrimination, bullying and harassment.

4.1.2 Occupational therapy personnel shall not enter into relationships that exploit clients sexually, physically, emotionally, financially, socially or in any other manner. It is unethical for occupational therapy personnel to indulge in relationships that may impair their judgment and objectivity and/or may give rise to the advantageous or disadvantageous treatment of the client.

4.1.3 Occupational therapists shall take responsibility for assessing and managing the risks involved in providing a service.

4.1.4 Any reference to the quality of service rendered by, or the integrity of, a professional colleague shall be expressed with due care to protect the reputation of that person. Care shall be taken, when giving a second opinion, to confine it to the issue and not the competence of the first professional.

4.1.4.1 Loyalty within any profession may be outweighed by public interest considerations in relation to the moral and legal obligations imposed by society generally.

4.1.4.2 Under no circumstances shall any occupational therapy personnel who witness malpractice, criminal conduct or unprofessional activity, whether by occupational therapy personnel or other staff, remain silent about it.
4.1.4.3 Occupational therapy personnel who have reasonable grounds to believe that the behaviour or professional performance of a colleague may be wanting in standards of professional competence shall notify the line manager or other appropriate person in confidence. This shall be done in accordance with the procedures laid down on whistle blowing as a consequence of the Public Interest Disclosure Act (1998).

Professional demeanour

4.2 Occupational therapy personnel shall conduct themselves in a professional manner appropriate to the setting.

4.2.1 Occupational therapy personnel shall act and dress appropriately to the setting and in accordance with health and safety requirements.

Fitness to practice

4.3 Occupational therapy personnel shall inform their employer or appropriate authority about any health or personal issues that affect their ability to do their job competently and safely.

Substance misuse

4.4 Occupational therapy personnel shall not undertake any professional activities whatsoever when under the influence of alcohol, drugs or other toxic substances. Reference shall be made to local policies where available.

4.4.1 The use of illicit substances constitutes a major infringement of the Code.

4.4.2 Occupational therapy personnel shall not encourage other people in the misuse of alcohol, drugs or other toxic substances.
Personal profit or gain

4.5 Occupational therapy personnel shall not accept tokens such as favours, gifts or hospitality from clients, their families or commercial organisations when this might be construed as seeking to obtain preferential treatment.

4.5.1 Occupational therapy personnel have a prime duty to the client and shall not let this duty be influenced by any commercial or other interest that conflicts with this duty, for example, in arrangements with commercial providers that may influence contracting for the provision of equipment.

4.5.2 If a client or their family makes a bequest to an occupational therapist, this shall be declared according to local guidelines.

4.5.3 Local policy shall always be observed in the case of gifts.

NOTE:
In certain cases, the property and affairs of a client may be subject to the authority of the Court of Protection.

Advertising

4.6 Advertising, in respect of professional activities, shall be accurate. It shall not be misleading, unfair or sensational.

4.6.1 Explicit claims shall not be made in respect of superiority of personal skills, equipment or facilities.

4.6.2 The College of Occupational Therapists’ logo is copyright and can only be used when endorsed by the organisation. Permission for its use has to be obtained in writing from the Group Head of Membership and External Affairs at the College of Occupational Therapists.

Information and representation

4.7 Occupational therapy personnel shall accurately represent their qualifications, education, experience, training, competence and the services they provide.

4.7.1 Occupational therapy personnel who have reasonable grounds to believe that third party misrepresentation has occurred shall bring this to the attention of the appropriate person or authority for action to be taken.
SECTION FIVE

Professional Competence and Standards

Professional competence

5.1 Occupational therapy personnel shall only provide services and use techniques for which they are qualified by education, training and/or experience. These shall be within their professional competence, relevant to the setting and relate to their terms of employment.

5.1.1 Occupational therapy personnel shall achieve and continuously maintain high standards of competence in their knowledge, skills and behaviour.

5.1.2 Each member of the occupational therapy profession has a duty to maintain their level of professional competence and to work to current legislation, guidance and standards relevant to their practice. This includes compliance with the HPC’s current Standards of Proficiency – Occupational Therapists.

5.1.3 All occupational therapy personnel have a duty to comply with the current professional standards for occupational therapy practice and other guidance provided by the College.

5.1.4 Occupational therapy personnel shall not be expected to act up or cover for an absent colleague if they believe the work to be outside the scope of their competence or workload capacity. Such duties shall only be undertaken with additional planning, support, supervision and/or training.

5.1.5 Occupational therapy personnel seeking to work in areas with which they are unfamiliar or in which their experience has not been recent, shall ensure that adequate self-directed learning takes place as well as other relevant training and supervision.

Delegation

5.2 Occupational therapists who delegate interventions or other procedures shall be satisfied that the person to whom they delegate is competent to carry them out. Such persons may include students, support workers or volunteers. In these circumstances, the occupational therapist shall retain ultimate responsibility for the client.

5.2.1 Occupational therapists shall provide supervision appropriate to the level of competence of the individuals for whom they have responsibility.
Collaborative working

5.3 Occupational therapy personnel shall respect the responsibilities, practices and roles of other professions, institutions and statutory and voluntary agencies that contribute to their work.

5.3.1 Occupational therapy personnel shall recognise the need for multi-professional and multi-agency collaboration to ensure that well co-ordinated services are delivered in the most effective way.

5.3.2 Occupational therapy personnel shall promote understanding of the profession.

5.3.3 Occupational therapists shall refer clients to, or consult with, other service providers when additional knowledge, expertise and support are required.

5.3.4 Occupational therapists shall identify their core skills and roles and ensure that they are not undertaking work that is deemed to be outside the scope of occupational therapy practice or their competence.

5.3.5 It is not considered to be in the interests of good client care that there be more than one occupational therapist taking overall responsibility for the assessment and treatment of a client for any one presenting problem.

5.3.6 Where more than one occupational therapist is involved in the treatment of the same client, they shall liaise with each other and agree areas of responsibility. This shall be communicated to the client and all relevant parties.
**Lifelong Learning**

5.4 Occupational therapy personnel shall be personally responsible for actively maintaining and developing their personal development and professional competence.

5.4.1 Adherence to professional standards is a requirement of continued practice.

5.4.2 All occupational therapy personnel shall be responsible for maintaining evidence of their continuing professional development.

5.4.3 Occupational therapy personnel shall be accountable for the quality of their work and base this on current guidance, research, reasoning and the best available evidence.

5.4.4 Occupational therapy personnel shall be supported in their practice and development through regular professional supervision within an agreed structure or model.

**Occupational therapy student education**

5.5 All occupational therapists have a professional responsibility to provide practice education opportunities for occupational therapy students and to promote a learning culture within the workplace.

5.5.1 Occupational therapists shall recognise the need for individual education and training to fulfil the role of the practice placement educator. They shall undertake and maintain accreditation through programmes of study provided by higher education institutions that are approved and accredited by the College of Occupational Therapists to deliver pre-registration courses in occupational therapy.

5.5.2 Occupational therapists who undertake the role of practice placement educator shall provide a learning experience for students that complies with the College of Occupational Therapists’ professional standards and is compatible with the stage of the student’s education or training.

5.5.3 Occupational therapists accepting students for practice placement education shall have a clear understanding of the roles and responsibilities of the student, the educational institution and the practice placement educator.
Research and service development

5.6 Occupational therapists shall contribute to the development of occupational therapy practice through research activity.

5.6.1 Occupational therapists have a responsibility to contribute to the continuing development of the profession by utilising critical evaluation, and participating in audit and research.

5.6.2 Occupational therapy personnel undertaking any form of research activity shall always address the ethical implications and adhere to research governance.

5.6.3 Occupational therapy personnel undertaking any form of research activity have an obligation to share their findings in order to inform or change practice, e.g. through publication or presentation.
KEYNOTE DOCUMENTS

College of Occupational Therapists Publications


Other Publications


This version of the College of Occupational Therapists Code of Ethics and Professional Conduct (2005) is available to download in English and Welsh from the College of Occupational Therapists website: www cot org uk.

Mae'r côd hwn ar gael i'w lawrlwytho yn y Gymraeg a'r Saesneg o wefan y Coleg Therapi Galwedigaethol: www cot org uk.