



Oriental Health Practitioners Association of Australia (OHPAA)

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Code of Ethics

Approved by: OHPAA Board of Directors

Executive Office: Jaime Wilcox



Principles of Ethical Behaviour

The Principles of 'ethical behaviour' which are applicable to all Practitioners of the Oriental Health Practitioners Association of Australia, whether they are 'Member Practitioners' or otherwise, including those Practitioners and Students who may not be engaged directly in clinical practice, are those Principles which follow, namely, a direction to each person:

- Principle 1** to consider at all times your first priority and duty to be the health and well-being of your patient.
- Principle 2** to place your professional ability and integrity amongst your primary duties and concerns.
- Principle 3** to recognise your limitations and the specialised skills of others in the prevention and treatment of ill-health and disease.
- Principle 4** to honour and respect the skills of your professional Colleagues and uphold your Profession and its ongoing traditions.
- Principle 5** to improve your professional knowledge and skills using current research so that the best possible advice and available treatment can be afforded to your patient
- Principle 6** to maintain a confidentiality of patient information at all times unless a legal duty of disclosure is demanded in a particular case of law
- Principle 7** to refer to other practitioners, patients whom require treatment or advice outside the scope of your present knowledge and training
- Principle 8** to maintain at all times accreditation within the modality/s to which your knowledge and skills apply.
- Principle 9** to uphold acceptable guidelines for practitioner/patient relationships, these must be maintained on a professional and treatment protocol basis only.

All practitioners must confirm in writing the acceptance of these principles of ethical behaviour on the membership application form before being considered Practitioner members of the Association.



Principles and Code of Practice

- All patient records to be kept in accordance with best business practice and confidentially.
- All treatment and advice given will be within the scope of acceptable modality standards for which the practitioner is accredited.
- All equipment used for treatment, diagnosis and dispensing will comply with local body and national regulations.
- Advice and treatment will not be given for disciplines a practitioner does not hold accreditation for in Australia.
- Regular post-graduate study or research must be undertaken to maintain skills and knowledge to a recognised standard of performance.
- A referral list of alternate practitioners must be maintained to facilitate referral of patients outside attending practitioners scope of practice
- Practitioners must abide by all local by-laws and regulations and national acts of parliament as they may apply
- No practitioner shall make claims, for which they are not qualified to make in regard to treatment protocol or diagnosis
- The rights of fellow practitioners shall be upheld at all times with regard to their expertise and knowledge
- Any Association Practitioner found to be compromising the codes of the Oriental Health Practitioners Association of Australia will be called upon to attend a disciplinary hearing for review of their Association status

Responsibilities to the Patient

Standard of Care

1. Standards of practice

Practice the science and art of Oriental Medicine, Traditional Medicine, Holistic Health and Natural Therapies, as the case may require, to the best of one's ability and with honesty, compassion and respect for human dignity, and in each case providing a Natural Health Service in accordance with the expressed or generally accepted standards expected of Practitioners who provide a service of that kind.

2. Examination of patients to be complete and thorough

As far as practicable and within your capabilities, ensure that all patients receive a complete and thorough examination into their complaint or condition.



3. Records of treatment to be kept accurately

Ensure that accurate records are kept of any diagnosis and treatments afforded to any patients and, without unreasonably refusing or denying a person access to any records which pertain to them, allow reasonable access to those records.

Respect for Patients

4. Professional conduct

Ensure that all professional conduct within the practice of the Professions is above reproach, and that neither physical, emotional nor financial advantage is taken of any patient.

Rights of Patients

5. Professional service without discrimination

Recognise a responsibility which vests in each Practitioner to render Professional service to any person regardless of race, colour, religion or political belief and, so long as it lies within the limits of expertise and legal allowance as a Natural and Traditional Medicine Health Practitioner, render that service regardless of the nature of the ill-health suffered by a patient.

6. Patients to be informed of their state of health

Recognise and accept the right of all patients to be informed of the nature of any ill-health from which they are known to suffer, the probable cause of that ill-health if it is known, and its available treatments.

7. Patients rights to choice of Practitioner

Without seeking to unduly influence the decision of a person, allow all patients the right to choose their Practitioners freely.

8. Alternative Professional opinions to be sought

Recognise one's professional limitations and, where it is properly indicated, recommend to the patient that additional opinions and services should be obtained.

9. Confidential information not to be divulged

Keep in confidence all information derived from a patient, or from a colleague regarding a patient, and, except where the law requires otherwise, divulge the information only with the express permission of the patient.

10. Recommendations of particular therapies

Recommend only those procedures which are, in your professional opinion, necessary and lawful and which may assist in the care of the patient and recommend only a particular therapy which, in your professional opinion, is necessary for the well-being of the patient.



11. Exchange of information with patients

Exchange such information with patients as may be necessary for them to make informed choices where alternatives to treatment exist and, where requested, assist any patient by supplying information that may be required so as to enable the patient to receive any benefits to which he or she may be entitled.

12. Urgent medical care requiring assistance

Within the limits of one's abilities, render all assistance possible to any patient where an urgent need for medical care exists until the responsibility for the patient can be assumed by other appropriate medical personnel.

Responsibilities to the Association

Personal Conduct

13. Standards of Professional services

Strive to improve the standards and quality of professional Natural and Traditional Medicine Health Services provided to the community.

14. Health, safety and education

Within the lawful limits of professional Natural and Traditional Medicine Health Services, accept a share of the Profession's responsibility to association in matters relating to the health and safety of the public, Natural and Traditional Medicine Health education, and any relevant legislation relating to the health or well-being of the community.

15. Witness in Court

Where a Practitioner is a witness in a particular case, recognise the responsibility in assisting the relevant Court in arriving at its just and proper decision.

16. Society attitudes in matters of conscience

Accept that it is not part of the role of an individual Practitioner to determine association's attitudes in contentious issues or matters of conscience, but attempt always to protect any patient and safeguard the legal rights of the Practitioner within society.

17. Cruel, degrading or inhuman treatment

Regardless of the various attitudes of a particular society, a Practitioner shall not countenance, condone or participate in the practice of torture or other forms of cruel, inhuman, degrading or experimental procedure of a like nature.



Competition regarding the Provision of Services

18. Duty to patients overrides loyalty to employers

Practitioners must at all times regard their duty to their patients as overriding any perceived loyalty to an employer or other organisation

In particular, Practitioners must not allow the commercial interests of an employer or health provider to interfere with:

- the free exercise of clinical judgement in determining the best ways of meeting the needs of individual patients or the community;
- cooperation with such other health providers as may be in the interests of a patient;
- the completion of any treatment or treatments; or
- the publication or provision of honest reports of their services provided to patients, their aims and their achievements.

19. Acting against the public interest

Practitioners shall not act against the public interest, or, by default or participation, sanction those that employ them to act against the public interest.

20. Standards of care not to be compromised

Standards of care should not be compromised in order to meet perceived financial or commercial requirements whether these requirements are set by a Practitioner personally or by a particular organisation.

Responsibilities to the Profession

Personal and Professional Conduct

21. Additional self-education

Continue additional self-education in order to improve one's technical skills and the professional standards of treatment and care of patients.

CPE Point Implementation: As of 2006, OHPAA is implementing CPE (Continuing Professional Education) point requirements for all practitioner members. This will consist of a minimum of 15 points (1 point = 1 hour) representing attendance and participation at an OHPAA facilitated or approved course or seminar. Proof of attendance will need to be submitted to the Secretary upon annual renewal.

22. Denigration of the reputation of other Practitioners

Subject to Articles 15, 23 and 32, avoid impugning or denigrating the character or reputation of other Practitioners.



23. Unprofessional conduct to be reported

Ensure that one's professional conduct is beyond reproach and consider the professional responsibility of reporting to the appropriate body of peers any conduct by a colleague which may be properly considered to be unethical, unprofessional or unbecoming to the Natural Health Professions or which may require disciplinary proceedings to be instituted.

24. Refusal to treat patients

Whilst accepting the existence of a responsibility for one's personal health and safety (both mental and physical) -

- except in an emergency - have the right to refuse to accept a patient, particularly where one's skills are insufficient to provide the proper professional service; and
- subject to Article 5, in any situation other than an emergency - have the right to withdraw from the responsibility for the care of any patient, provided that the patient is given adequate notice of this intention and appropriate alternative care is reasonably available.

Entering into Contracts

25. Contracts to maintain professional integrity

Only enter into a legal contract with a person or an organisation if it does not compromise, and therefore will allow, the continued maintenance of professional integrity.

26. Contractual terms to be equitable

Only offer to a colleague or a prospective student a legal contract which has terms and conditions which are equitable to both parties and refrain from knowingly entering into any unconscionable or illegal contracts or contracts with minors.

Addressing the Public

27. Personal opinions not to contradict generally held opinions

Recognise a responsibility to give the generally held opinions of the relevant Professions when interpreting and conveying scientific or empirical knowledge to patients or to the general public, and, where one presents any personal opinion which is contrary to the generally held opinion of the Professions, clearly indicate that this is so.

Advertising

28. Methods and substance of professional advertising

- While building a professional reputation based upon ability and integrity, only advertise professional services or make professional



announcements where the main purpose is to convey the factual presentation of information reasonably needed by any person to make an informed decision about the appropriateness and the availability of services that may meet his or her medical needs.

- Any such advertisement (however conveyed) -
 - (a) must be demonstrably true in every respect;
 - (b) shall not contain any testimonial or endorsement of clinical skills; and
 - (c) shall be conducted in a professional manner and shall not be effected or communicated in any manner so as to discredit the Natural and Traditional Medicine Health Professions or bring, or be likely to bring, the Natural and Traditional Medicine Health Professions into disrepute.

29. Advocacy of commercial products to be avoided

Avoid undue advocacy of any particular commercial product if one is identified as an Association Practitioner.

30. Benefits of new discoveries to be made available

Ensure that any new therapeutic or diagnostic method is described through the professional channels of the Association and the benefits, if proved, are made available to the Professions at large.

31. Secret or unknown remedies

Refrain from the use, supply, or administration, of any secret or unknown remedies.

Consultation

32. Opinions to be sought in difficult cases

- Request the opinion of an appropriate colleague acceptable to a patient if diagnosis or treatment is difficult or obscure, or if the patient requests it.
- Having requested the opinion of a colleague in a particular case, make all relevant information available to that patient accordingly and indicate clearly whether the colleague is to then assume the continuing care of that patient during the period of the patient's ill-health.
- During a period of ill-health, a Practitioner should refrain from treating patients until good health is resumed, and during that period the Practitioner should consider referring a patient to a colleague.

33. Report of findings after referrals

- Where, in respect of a patient, an opinion has been requested by a colleague, report in detail your findings and recommendations to the



referring Practitioner and, if required, provide the patient with an appropriate report of those findings.

- Continue with the ongoing care of the patient only at the specific request of the referring Practitioner and with the consent of the patient in question.

Patient Care

34. Assistants and delegates to be competent and qualified

- Ensure that any persons assisting in the care of a patient are properly qualified to do so.
- Ensure that any Practitioner to whom the care of a patient is delegated is fully competent to carry out that care.

35. Report of findings to be made available

Upon the request of a patient, make available to a colleague a report of the findings and treatment of the patient.

36. Established relationships to be preserved

Recognise that an established relationship between a Practitioner and a patient is valued to such an extent so as to dictate that it should not be disturbed unless there are compelling reasons to do so.

Financial Arrangements

37. Profit motives not to influence professional judgement

A Practitioner shall never allow motives of profit to be permitted to influence the free and independent exercise of professional judgement on behalf of a patient.