

SMTO Practice Standards

Code of Conduct, Performance and Ethics

Information for SMTO Members

SMTO Practice Standards

Code of Conduct, Performance and Ethics

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Summary of the SMTO Practice Standards

The SMTO Practice Standards comprises both the Standards of Proficiency and the Code of Practice for Massage Therapists.

This document presents all the standards of conduct and competence required of Massage Therapists to promote clients' health and wellbeing and to protect them from harm.

Introduction

The Scottish Massage Therapists Organisation (SMTO) was formed in 1992 and exists to provide a service to the public, the Massage Therapist and the profession. The SMTO also works with the General Council for Massage and Soft Tissue Therapies (GCMT) in developing and maintaining standards, and has been approved by the Complementary and Natural Healthcare Council (CNHC) as a verifying organization.

Our key function is to enhance public protection by ensuring that SMTO Members maintain these standards and demonstrate that they meet, as a minimum, the National Occupational Standards (NOS) for Massage Therapy. All SMTO Members must adhere to the SMTO Practice Standards: Code of Conduct, Performance and Ethics and agree to be bound by its terms to include the SMTO CPD Policy and the SMTO Disciplinary and Complaints Policy.

As a Professional Association, the SMTO provides membership to its Members and offers them the SMTO Block Scheme Insurance Policy if required and subject to acceptance by the insurers, Balens Ltd. The SMTO is an Introducer Appointed Representative of Balens Limited, 2 Nimrod House, Sandy's Road, Malvern, Worcs WR14 1JJ, who are authorised and regulated by the Financial Conduct Authority.

The SMTO Practice Standards comprise both the Standard of Proficiency and the Code of Practice for its Members; Massage Therapists and/or Soft Tissue Therapists. This document presents all the standards of conduct and competence required of Members to promote clients' health and wellbeing and to protect them from harm.

The SMTO Practice Standards play a central role in the requirements for training standards in Massage and Soft Tissue Therapies, and the achievement and retention of membership with the SMTO. The document outlines the safe, competent and ethical practice of Massage and Soft Tissue Therapies. All applicants for membership of the SMTO must confirm that they have read, and agree to observe, the standards set out in this document. Every Member must be familiar with the standards and must ensure that they are observed. The standards apply to all Members.

The SMTO will establish and keep under review the standards of conduct, professionalism and ethics expected of registrants and give them such guidance on these matters as is necessary (or applicable).

Principles

Your main duty as a Member of the Scottish Massage Therapists Organisation (SMTO) is to protect the health and wellbeing of all those who use your services.

- The care of your client must be your first concern
- You must provide a high standard of care at all times
- Clients must be treated with respect, as individuals
- Your professional knowledge must be kept up-to-date
- You must act lawfully and professionally in your professional practice, and maintain appropriate personal boundaries at all times; this protects your livelihood.
- You are personally accountable for your professional activity

Format

The Standards of Proficiency (in blue) and guidance are arranged in three main themes:

- A. Code of Conduct
- B. Knowledge, skills and performance
- C. Professionalism and Ethics

The standards (left-hand column) outline requirements. The supporting guidance (right-hand column) outlines how these requirements may be achieved. The guidance is not exhaustive.

There is a separate section on the code of practice (in purple):

- D Code of Practice

A. Code of Conduct

Members of the SMTO must always maintain high standards of conduct. Members must:

STANDARDS OF PROFICIENCY

STANDARDS

A1 Act in the best interests of your clients

GUIDANCE

Members must maintain the high standards of professional conduct appropriate to membership of the SMTO in which the interests and welfare of the client are deemed to be paramount.

Do not allow your views about clients' gender, age, colour, race, disability, sexuality, social or economic status, lifestyle, culture or religious beliefs to affect the way you treat them or the professional advice you give.

Be sensitive to clients in regard to modesty and special needs, e.g. language difficulties, disability or if they wish a companion to be present.

Be personally responsible for making sure that you promote and protect the best interests of the people you care for.

Respect the client's autonomy and allow them a choice; never take advantage of the power that exists in, or exploit the therapist/client relationship; this would constitute abuse.

Members must act to protect the interests of clients, carers and other members of the public at all times.

Members should provide the best possible care, either alone or as part of a team, with other insured and experienced practitioners, in health/social care professions.

Members must not do anything, or allow anything to be done that they have reason to believe will put the health or safety of a client in danger; this includes both their own actions and those of others.

Members must remain accountable for their professional conduct, any care or professional advice they provide, any failure to act and any tasks they may delegate, both within and outwith the treatment session; this includes when working individually or as part of a team.

Members must protect clients if they believe that the client is actually, or potentially, at risk from a colleague's conduct, performance or health. The safety of clients must come before any personal and professional loyalties at all times. As soon as they become aware of any situation that puts a client at risk, Members should discuss the matter with a senior professional colleague or the SMTO

STANDARDS OF PROFICIENCY

STANDARDS

A2 **Respect the confidentiality of your clients**

GUIDANCE

Respect the therapist/client relationship, in particular the confidentiality of the client, endeavouring to foster and maintain trust at all times.

Treat information about clients as confidential and use it only for the purpose for which it was given; only use information about a client:

- to continue to care for that person; or
- for purposes where that person has given you specific, written and signed permission to use the information.

Never knowingly release or discuss any personal or confidential information to anyone who is not legally entitled to it. Provide information (if requested) to other health professionals ONLY with the client's written consent.

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 it is the Member's responsibility to stay up-to-date. When records are stored on a computer, registration with database authorities is required.

Be particularly careful not to reveal, deliberately or accidentally, confidential information that is stored on computers.

Confidentiality can be a particular challenge when treating minors. In most circumstances it would be most appropriate to have an adult present at the consultation but the issue of confidentiality would need to be carefully considered and decisions made depending upon individual circumstances.

A3 **Maintain high standards of personal conduct**

Members must keep high standards of personal conduct, as well as professional conduct; they must not do anything that may affect someone's treatment by, or confidence, in them.

Members must inform the SMTO, immediately, if they are convicted of a criminal offence or have accepted a police caution. Each case will be considered individually and a decision made in the light of the circumstances of the case.

Membership may be at risk if they are convicted of a criminal offence that involves, for example, one of the following types of behaviour:

- Violence
- Abuse
- Sexual misconduct
- Supplying drugs
- Drink-driving offences where someone was hurt or killed
- Serious offences involving dishonesty
- Any serious criminal offences for which a custodial sentence was given.

STANDARDS OF PROFICIENCY

STANDARDS

A4 Provide to the SMTO, on request, any relevant information about your conduct, competence or health

GUIDANCE

Members should inform the SMTO (and other relevant regulators and professional bodies) if they have any relevant information about their own conduct or competence, or about other professionals they work with. In particular, Members must inform the SMTO straight away if they are:

- convicted of a criminal offence (other than a minor motoring offence) or accept a police caution (also see A3);
- disciplined by any organisation responsible for regulating or licensing a healthcare practitioner or social care professional; or
- suspended or placed under a practice restriction order by an employer or similar organisation because of concerns about their conduct or competence.

Members must co-operate with any SMTO investigation or formal inquiry into their professional conduct, competence or health, or the conduct of any other healthcare provider, or the treatment of a client, where appropriate. Relevant information in connection with their conduct or competence should be supplied to any legitimate enquirer.

Members must provide information about the conduct or competence of other healthcare providers if someone who is entitled to know asks them for it. This relates to their duty to act in the best interests of their clients and users. A complaint about a colleague should be referred to the SMTO for advice. Please note, Members must refrain from criticising fellow practitioners and must not attempt to entice clients away from another therapist.

B. Knowledge, Skills and Performance

Ethically Members must possess the relevant knowledge and skills required to function as a complementary healthcare professional.

STANDARDS OF PROFICIENCY

STANDARDS

- B1** **Members must keep their professional knowledge, skills and performance up-to-date and relevant to their field(s) of practice**
- B2** **Members must act always within the limits of their knowledge, skills and experience and, if necessary, refer on to another Member or healthcare professional**

GUIDANCE

Members must meet the Standards of Proficiency that relate to Massage Therapy, as defined by the SMTO, in conjunction with the National Occupational Standards (NOS) for Massage, and the CNHC. Members are required to meet these standards, whether they are in practice or not. The Standards of Proficiency describe minimum standards of clinical practice. Members must stay up-to-date with any changes to the Standards of Proficiency that the SMTO, the National Occupational Standards for Massage and the CNHC may make for each of their disciplines as knowledge and techniques develop.

Members should ensure, by means of continuous update of information and training, a level of competence consistent with the highest standards of the profession.

Members must maintain a portfolio of Continuing Professional Development.

Members must always observe the highest degree of integrity and responsibility in regard to the practice of Massage Therapy, working within their professional competences.

Member should keep within their scope of practice; this means that they should only practise in those fields in which they have appropriate education, training, qualification and experience.

The duty of care to a client includes the obligation to refer them for further professional advice or treatment if it becomes clear that what they need is beyond the Member's own scope of practice. If Members accept a referral from another healthcare or social care professional, they must make sure that they fully understand the request. They should only provide the treatment or advice if they believe this is appropriate. If this is not the case, they must discuss the matter with the practitioner who has made the referral, and also the client, before they begin any treatment.

Members must seek appropriate medical advice in any situation in which they may lack the necessary competence or experience to administer treatment. Members should not knowingly treat anyone with a serious medical condition without prior approval by their doctor, unless the client signs a disclaimer giving written permission to the Member.

STANDARDS OF PROFICIENCY

STANDARDS

B3 Maintain appropriate and effective communication with clients, carers and other Members and professionals

GUIDANCE

Members must take all reasonable steps to make sure that they can communicate properly and effectively with their clients, and their client's carers and family (when the client's permission is given).

Members should, where possible, co-operate, and share their knowledge and expertise with professional colleagues for the benefit of clients. This is of particular importance when entering into multiple relationships involving the same client; please note: written permission must be sought from the client before any personal information can be discussed or shared.

It is essential that every client understands what is required of him/her and why. Clients should not be left in the room during a Massage Therapy session without being advised, nor should they be confused as to the actions of the Member in the room. Members must at all times, communicate clearly and check that the client has understood the request, instruction or explanation. This is essential for safe practice. Members should always ask for permission to proceed. Clients should feel comfortable, safe and in control throughout any treatment session and fully understand all procedures with regard to the consultation, the assessment, the removal of clothes, getting onto the treatment table, any techniques being used, in particular those that may be uncomfortable, and reassessment. Clients should also be advised that they are entitled to have a chaperone present.

B4 Members must effectively supervise tasks they have delegated

People who consult or receive treatment or services from Members are entitled to assume that a person who has the knowledge and skill to practise their profession will carry out their treatment. Whenever Members give tasks to another person to carry out on their behalf, they must be sure that they have the knowledge, skills and experience to carry out the task safely and effectively. If they are not suitably qualified healthcare professionals, Members must not ask them to do the work of healthcare professionals. If they are healthcare professionals, Members must not ask them to do work that is outside their scope of practice. If they are training to be healthcare professionals, Members should be sure that they are capable of carrying out the task safely and effectively.

Whoever Members ask to carry out a task, they must always continue to give adequate and appropriate supervision and remain accountable for the outcome. If someone tells them that they are unwilling to carry out a task because they do not think they are capable of doing so safely and effectively, Members must not put pressure on them to carry out the task. If their refusal raises a disciplinary or training issue, they must deal with that separately, without endangering the safety of the client.

STANDARDS OF PROFICIENCY

STANDARDS

B5 Obtain informed consent to give treatment (except in an emergency)

GUIDANCE

Members must maintain good communication at all times thus ensuring the client understands and has given consent to all procedures. Where a client is unable to consent, then consent must be obtained from someone who can give it on the client's behalf.

Members must explain to the client the treatment they are intending to carry out, the risks involved and any other treatments possible. They must make sure that they obtain informed and **signed** consent to any treatment they do proceed with. Members must make a record of the client's treatment decisions and pass this on to all members of the healthcare or social care team involved in their care (where the client's permission has been given). It is recognised that in emergencies, Members may not be able to fully explain treatment or get informed consent at the time, but this should be fully documented on the client's records.

B6 Keep accurate client records

Making and keeping records is an essential part of care and Members must keep records for everyone they treat or who asks for professional advice or services, in order to safeguard both themselves and their clients. All records must be complete and legible, and Members should sign and date all entries. Clients should sign records for consent to treatment. Please note that records are the property of the client.

Members must maintain careful, legible and understandable records of all clients, including a full medical history and presenting complaint, assessment and procedures performed, up-to-date medical records, clinical findings (to the level of competence gained), information and advice given and any comments made, as well as details of any suggested referral. Records should be kept for a minimum of 7 years. In the case of children, records must be kept for a minimum of 21 years. For seriously ill, injured or disabled clients, records should be kept indefinitely.

Members should advise clients to consult a doctor if they are in any doubt as to the client's health or the suitability of the treatment; this advice, as all advises, should be recorded.

When supervising student therapists, Members should also counter-sign any student entries in the notes. Whenever Members review the records, they should update them and include a record of any arrangements they have made for the continuing care of the client.

Members must protect information in records against loss, damage or use by anyone who is not authorised. They can use computer-based systems for keeping records, but only if they are protected against anyone tampering with them (including other healthcare professionals). If Members update a record, they must not erase information that was previously there, or make that information difficult to read; instead, they must mark it in some way. Members must adhere to Data Protection guidelines with regard to the handling of personal information (see A2).

STANDARDS OF PROFICIENCY

STANDARDS

GUIDANCE

B7 Be aware of, and manage effectively and safely, the risks of infection

Members must take appropriate precautions to protect their clients, client's carers and families, staff and themselves from infection.

Members must also take precautions against the risks that they might infect someone else. This is especially important if they suspect or know that they have an infection that could harm others, particularly clients and they must get medical advice and act on it. This may include the need for the Member to stop practising altogether, or to change their practice in some way in the best interests of protecting their clients.

Members must keep to the rules of confidentiality when dealing with people who have infections. For some infections, such as sexually transmitted infections, these rules may be more restrictive than the rules of confidentiality for people in other circumstances. However, Members are duty bound to report all notifiable disease states according to applicable laws.

B8 Members must limit their work or stop practising if they or another person has any reason to believe that their performance of judgment is affected by their physical, emotional or mental health.

Members have a duty to take action if their physical, emotional or mental health could be affecting their fitness to practise. They should get advice from a consultant in occupational health or another suitably qualified medical practitioner and act on that advice. This advice should consider whether, and in what ways, they might need to change their practice, including stopping practising, should this be deemed necessary. They also have a duty to report any other SMTO Member if they believe they are failing to meet this requirement.

B9 Ensure appropriate First Aid skills and valid certification.

It is the responsibility of Members to keep their First Aid certification up-to-date. Members must have the necessary skills to cope in an emergency situation. Members should be prepared and competent to administer emergency procedures as may be required by the client, and maintain such procedures until relieved. Any incident should be recorded on the client's records.

C. Professionalism and Ethics

Members must maintain high professionalism and ethical standards.

STANDARDS OF PROFICIENCY

STANDARDS	GUIDANCE
C1 Members must conduct themselves in a professional and ethical way at all times.	Members must carry out their duties and responsibilities in a professional and ethical way. Clients are entitled to receive good and safe standards of practice and care, with clear instructions given at all times. The SMTO seeks to protect the public from unprofessional and unethical behaviour, and to make sure that Members know the standards expected of them.
C2 Behave with integrity and honesty	Members must ensure that they behave with integrity and honesty and keep to high standards of personal and professional conduct at all times. Members should act honourably towards clients and fellow practitioners at all times. They must uphold and maintain the high standards of the profession. They must seek good relationships and co-operate with other healthcare professionals.
C3 Follow SMTO guidance in relation to advertising your services	<p>Any advertising Members undertake in relation to their professional activities must be accurate. Advertisements must not be misleading, false, unfair or exaggerated. Members must not claim that their personal skills, equipment or facilities are better than anyone else's.</p> <p>Members must abstain from any claim or statement misrepresenting the therapeutic benefits of Swedish Massage, Remedial and Sports Massage, Remedial Massage, Sports Therapy, Advanced Remedial Massage, Manipulative Therapy, Reflexology, Clinical Aromatherapy, On-Site Massage, or any other modality that you may be qualified in.</p> <p>If Members are involved in advertising or promoting any other product or service, they must make sure that they use their knowledge, healthcare skills, qualifications and experience in an accurate and professionally responsible way. They must not make or support unjustifiable statements relating to particular products or services. Any potential financial rewards to them should be made explicit and play no part at all in the advice or recommendations of products and services that they give to clients.</p>
C4 Members must not be involved in any behaviour or activity which is likely to damage their profession's reputation or undermine public confidence in their profession.	Members' behaviour will potentially be under scrutiny at all times by the public and they should ensure they do nothing to bring their profession into disrepute. Appropriate professional boundaries must be maintained between Members and their clients. Development of a personal relationship must result in the cessation of the therapeutic relationship.
C5 Appropriate procedures for dealing with workplace issues.	Members should ensure that they have appropriate procedures in place for dealing with complaints and criticisms in the workplace, whether from clients, staff, or other practitioners, in an efficient and professional manner.

D. Code of Practice

This code of practice is a set of rules outlining the responsibilities of Members.

CODE OF PRACTICE

STANDARDS

- D1** Personal. A practitioner should at all times maintain the correct appearance, behaviour and conduct expected of a professional person; abuse of alcohol, drugs, or good order is deemed to be a serious offence against this code.
- D2** Members shall have respect for the religious, spiritual, political and social views of any individual irrespective of race, colour, creed, sexual orientation or gender.
- D3** Members shall at all times conduct themselves in an honourable and courteous manner and with due diligence in their relations with their clients and the public. They should seek a good relationship and shall work in a co-operative manner with other healthcare professionals and recognise and respect their particular contribution within the healthcare team, irrespective of whether they perform from an allopathic or alternative/complementary base.
- D4** The relationship between a Member and her/his client is that of a professional with a client. The client places trust in a Member's care, skill and integrity and it is the Member's duty to act with due diligence at all times and not to abuse this trust in any way.
- D5** Proper moral conduct must always be paramount in Members' relations with clients. They must behave with courtesy, respect, dignity, discretion and tact. Their attitude must be competent and sympathetic, hopeful and positive, thus encouraging an uplift in the client's mental outlook and belief in a progression towards good health practices.
- D6** In furtherance of D5, Members must not enter into a sexual relationship of any kind with a client, where client means anyone who attends for therapy and the Member has client records for. Members must be diligent in guarding against any act, suggestion or statement that may be interpreted, mistakenly or otherwise, as having a sexual implication.
- D7** All Members must use modern information and communication technologies (ICT), e.g. text messaging, email and social media, in an appropriate and professional manner when connecting with clients and other therapists. ICT should neither be used to harm or harass other people in a deliberate, repeated and hostile manner nor be used to defame or humiliate them. If Members are using social media (e.g. Facebook, Twitter etc.) it is recommended that they should have a business site for their work and a separate social one, for personal relationships. As with all professional behaviour, boundaries must be in place to protect both the Member from complaint or compromise as well as the all-important client.
- D8** All Members working within hospitals, hospices and any other medical establishment will comply with the protocols and guidelines in force at such establishments.
- D9** Members must never make any written or unwritten claims to 'cure'. The possible therapeutic benefits may be described; 'recovery' must never be guaranteed.
- D10** Members should ensure that they themselves are medically, physically and psychologically fit to practise.
- D11** Discretion must be used for the protection of Members when carrying out private treatment with clients who are mentally unstable, addicted to drugs or alcohol, or severely depressed, suicidal or hallucinated. Such clients must be treated only by Members with relevant competency. In these treatment situations, it is advised to have a chaperone/companion present. Members must not treat a client in any case which exceeds her/his capacity, training and competence. Where appropriate, Members must seek referral to a more qualified person.
- D12** The aim of SMTO membership is to offer a service to clients as well as a service and therapeutic modalities to, and with, the medical profession. Members must recognise that where a client is delegated to them by a registered medical practitioner, that person remains clinically accountable for their patient and for the care offered by Members.
- D13** Referrals. Members should be aware when it is appropriate and in the client's best interests to refer them to another health professional.

CODE OF PRACTICE (cont)

STANDARDS

- D14** Members must guard against the danger that a client without previously consulting a doctor may come for therapy for a known disorder and subsequently be found, too late, to be suffering from another serious disorder. To this end new clients must be asked what medical advice they have received. If they have not seen a doctor, they must be advised to do so. Since it is legal to refuse medical treatment, no client can be forced to consult a doctor. The advice must be recorded for the Member's protection. It is not a breach of ethics to treat a client who gives informed consent to receive a therapy, but Members may not knowingly apply massage therapy to a person who is already receiving medical treatment for a condition without the respective practitioner's consent.
- D15** Members must not countermand instructions or prescriptions given by a doctor.
- D16** Members must not advise a particular course of medical treatment, such as to undergo an operation or to take specific drugs. It must be left to the client to make her/his own decision in the light of medical advice.
- D17** Members must never give a medical diagnosis to a client in any circumstances, unless medically qualified to do so; this is the responsibility of a registered medical practitioner. However, Members practising therapies, for example Reflexology, may, during the course of their treatment, discover imbalances in physical, emotional, mental and spiritual aspects. In these cases Members may make mention of any imbalances which they may have discovered, and advise the client to see his/her doctor for a medical diagnosis. This action should be recorded on the client's records.
- D18** Members must not use titles or descriptions to give the impression of medical or other qualifications unless they possess them and must make it clear to their clients that they are not medical doctors and do not purport to have their knowledge or skills. Members may also not address or refer to an assistant as 'nurse' unless the person referred to holds a nursing qualification in the country in which the practitioner is operating a clinic.
- D19** Members are forbidden to diagnose, perform tests on or treat animals in any way, unless specifically qualified, or given express permission, following diagnosis, by a registered veterinary surgeon; they must not countermand her/his instructions.
- D20** Members must not attend women in childbirth or treat them for ten days thereafter unless they hold an appropriate qualification in midwifery or one approved by the SMTO. This does not preclude treatment given with the permission of the client's midwife, doctor or medical team.
- D21** Members must not practise dentistry unless they hold an appropriate qualification.
- D22** Members must not treat any venereal disease as defined in the 1917 Act.
- D23** Clients suffering from AIDS may be treated at the discretion of the Member.
- D24** Members must not use manipulation or vigorous massage unless they possess an appropriate professional qualification.
- D25** Members must not prescribe or administer remedies, herbs, supplements, essential oils or other products unless their training and qualifications entitle them to do so.
- D26** At the present time, no alternative or complementary therapy is approved as 'medical aid' under the law. It is a criminal offence for a parent or guardian not to seek 'medical aid' for a child under the age of 16. The Member should secure a signed statement from a parent or guardian who refuses to seek medical aid as defined under the law in the following format: "I have been warned by (enter name of Member) that according to law I should consult a doctor concerning the health of my child (enter name of the child) Signed (signed by parent or guardian) Signed (by person witnessing the parent's or guardian's signature).
- D27** Members should display their certificate of membership of the SMTO in their normal place of work. Members working in several locations and/or offering visiting services will have available at all times a copy of their current annual membership certificate, issued by the SMTO.

STANDARDS

- D28** Before treatment Members must explain fully, either in writing or verbally, all the procedures involved in the treatment including such matters as the completion of a consultation form, the likely content and length of the consultation, the possibility that follow-up treatments may be required, the cost of treatment etc. Members must ensure that they have the client's informed consent **in writing** to perform any treatment. Where a client has an existing medical condition consent should be provided by the client's medical practitioner. Alternatively, the client must sign a disclaimer giving written permission for the treatment.
- D29** No third party, including assistants and members of the client's family, may be present during the course of a consultation with an adult without the client's express consent, which should be recorded. However, clients should be informed that they are entitled to have a chaperone present.
- D30** Members may not undertake any physical examination or treatment on any child under 16 except in the presence of the parent, guardian or authorised person, who will have given written consent.
- D31** Members must act with consideration concerning fees and justification for treatment. Members should not be judgmental and they should recognise the client's right to refuse treatment or ignore advice. It is the client's prerogative to make their own choice(s) with regard to their health, lifestyle and finances.
- D32** Members may not carry out any treatment of a client who has already received similar treatment for the same condition from another therapist unless the client has, of his/her own volition, decided to discontinue the original therapist's treatment.
- D33** Records. Members must ensure they keep clear, accurate and comprehensive records of client details and their treatments including the dates, advice given and all consent forms. This is especially important for the defence of any negligence actions, as well as for efficient and careful practice. All records should be kept for a minimum of 7 years. In the case of children records must be kept for a minimum of 21 years. For seriously ill, injured or disabled clients, records should be kept indefinitely.
- D34** Members are accountable for their treatment choices, as an explanation from them in regard to their treatment may be necessary at a future date e.g. in the case of an investigation. In determining whether or not any record of the nature of any treatment administered is reasonable, Members must be able to provide client records that demonstrate what treatment was undertaken, the reasons for this treatment choice, that the client consented to the treatment, and whether that treatment was competently and reasonably undertaken.
- D35** Confidentiality. Members, their assistants and receptionists have an implicit duty to keep attendances, all information, records and views formed about clients entirely confidential. No disclosure may be made to any third party, including any member of the client's own family, without the client's consent unless it is required by due process of the law, whether that be by Statute, Statutory instrument, order of any court of competent jurisdiction or howsoever otherwise.
- D36** Security. Members must ensure that their client's confidential records are kept in a secure place, properly safeguarded and not accessible to third parties. Client's belongings should also be kept in a safe place, with the client advised of where they are, at all times.
- D37** Members must ensure that they comply with the Data Protection Act.
- D38** Insurance. All Members must hold adequate insurance cover to practise. Normally this will be through the SMTO policy, but private insurance is permitted, and if adopted, Members must provide evidence of this to the SMTO. The insurance policy must state provision for public liability and indemnity as well as the provision for professional treatments.
- D39** Premises. All Members shall ensure that their working conditions are suitable for the practice of their therapy. Treatment areas must be hygienic, appropriate and equipped to minimal health and safety standards and must comply with local health and safety regulations. Staff facilities and public areas (waiting rooms, hallways, stairs, toilet facilities etc.) must also comply with current health and safety regulations. When the client is treated in their own home, all reasonable efforts to ensure the client's safety must be made.

STANDARDS

- D40** Advertising and professional leaflets must be dignified in tone and shall not contain named testimonials or claim to cure any disease etc. Members shall be free to advertise their services and practices as they see fit, but it is recommended that all advertising shall be confined to promoting the therapy/therapies available, the expected effects of the therapy and/or any research in support of the therapy. The qualifications of the Member should be displayed and offer a general service together with any necessary details, e.g. means of contact.
- All advertisements MUST adhere to the following guidelines:
- be legal, decent, honest and truthful and in accordance with the British Code of Advertising Practice or appropriate overseas code
 - not be of a character that could reasonably be regarded as likely to bring the profession into disrepute
 - not be such as to abuse the trust of existing or potential clients or exploit their lack of knowledge
- D41** Stationery and other productions. Professional letterheads should be of good quality and print. A full Member may use the SMTO logo on business stationery only, but in other circumstances at the discretion of the Committee.
- D42** Publications. Nothing may be published in the name of the Scottish Massage Therapists Organisation without the prior agreement of the Committee, or sub-committee or Member acting with the full authority of the Committee.
- D43** Discipline. Members will follow and abide by decisions made under the disciplinary, complaints and appeals procedures appended to this Code. Members must understand that by signing the application and annual renewal forms that they are agreeing to abide by the SMTO Practice Standards: Code of Conduct, Performance and Ethics and it is in the remit of the SMTO to sanction Members who do not uphold the standards and obey the contents of this document, as laid out in the SMTO Disciplinary & Complaints Policy.

Disciplinary & Complaints Procedure

The goal of the SMTO is to establish, maintain and improve the standards of all Massage Therapies in order to protect both the public and its Members. A Disciplinary & Complaints Procedure allows the public, as well as fellow practitioners, to make a complaint about a Member, affiliated training organisation or the SMTO itself, if they feel that it is appropriate.

The way that the SMTO upholds their standards it to investigate any complaint made. The SMTO supports Members by following the SMTO Complaints Procedure.

The SMTO has a Professional Conduct Panel (PCP), which will consider complaints against Members based on the expectations set out above in this Code of Conduct, Performance and Ethics.

Every complaint is considered in line with the SMTO Disciplinary & Complaints Procedure which is available to all Members, and the general public, at www.scotmass.co.uk.

An Initial Investigation will decide whether there is a case to answer, and if there is, deal with the complaint according to the Disciplinary & Complaints Procedure. If it is found that a case against a Member is justified, the SMTO can take a range of appropriate measures against the Member as necessary. The ultimate sanction would be termination of SMTO membership.

When an allegation is made against a Member, the SMTO will always take account of the standards set out in these Practice Standards when considering that allegation. While this document contains several examples of issues that may be considered, it is not an exhaustive list. An allegation against a Member may be upheld even if the details of the issues that arise in their case are not specifically mentioned in this document. Every case referred to the SMTO will be considered on an individual basis.