



Society of Homeopaths



Code of Ethics and Practice



IMPORTANT

This document represents the Code of Conduct applicable to members of the Society of Homeopaths in matters of ethics and practice. It works in conjunction with the [Core Criteria of Homeopathic Practice](#)¹ and the Complementary and Natural Healthcare [National Occupational Standards for Homeopathy](#)².

Failure to comply with any or all of these rules is itself a breach of the Code which may render a member liable to disciplinary proceedings.

Every Member of the Society of Homeopaths is accountable for reading and familiarising themselves with the English language version of this Code, and for retaining at their own expense accredited translation services where necessary, to enable themselves and patients to fully understand the Code.

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Introduction

The aim of the Code of Ethics and Practice is to set out the principles of integrity and competence prescribed by the Society of Homeopaths in the practice of homeopathy.

Throughout the Code the terms “must” and “should” are used. “Must” is something which the Practitioner has to do, and “should” is something which they are encouraged to do.

Homeopaths must conduct themselves with truthfulness and dignity at all times in relation to their dealings with patients, and colleagues.

Homeopaths must promote the health of their patients and protect them from harm.

The Code describes the standards of conduct and practice the Society of Homeopaths (The Society) expects of its registered and student clinical members. A homeopath, by becoming a registered or student clinical member of The Society, must agree to observe and be bound by the Code of Ethics and Practice; to abide by the regulations of The Society and to secure and maintain professional indemnity insurance in respect of their professional practice.

This Code forms the basis upon which the conduct of any registered and student clinical members will be assessed by the Professional Conduct Committee in the event of a complaint. The purpose of the Society's [Professional Conduct Procedures](#)³ is to ensure that any complaint made against a registered or student clinical member of The Society is processed in a lawful, fair, transparent and impartial manner.

The Code is intended to act as guidance and assistance to registered and student clinical members, to protect the interests of the patients and to protect public safety. The first concern of registered and student clinical members is the needs of the patient within the context of ethical professional conduct. Patients are entitled to rely on and trust their healthcare practitioners. Registered and student clinical members are expected to maintain high standards of care, competence and conduct.

The Society issues guidelines advising members of best practice in different clinical areas. Members are strongly advised to familiarise themselves with these guidelines, as failure to follow them may be used as the basis for disciplinary action.

Homeopaths should recognise that communication is a two-way process which is the basis of a good patient/ practitioner relationship. It is misunderstandings in this relationship that form the basis of a significant number of complaints and disciplinary proceedings.

The Society encourages, whenever possible, the resolution of differences between registered and student clinical members complainants/potential complainants through informal mediation before entering a formal complaint procedure. It is the responsibility of practitioners to explore every avenue of informal resolution possible.

Throughout this Code, references to specific legislation or laws shall include every modification, consolidation, and re-enactment, and extension of them for the time being in force. Where written, the singular also includes the plural.

Section 1 - Key principles

These principles are for guidance and are not intended to be exhaustive. It is expected that the relationship between practitioner, colleagues, and patients is one of professionalism, integrity, dignity and respect. Every homeopath registered with The Society must keep to the following principles:

- 1.1 Put the individual needs of the patient first.
- 1.2 Respect the privacy and dignity of patients.
- 1.3 Treat everyone fairly, respectfully, sensitively and appropriately without discrimination. This includes colleagues, patients, Society staff, and Society Committee members.
- 1.4 Respect the views of others and, when stating their own views, avoid the disparagement of others either professionally or personally. This includes the use of social media.
- 1.5 Work to foster and maintain the trust of individual patients and the public.
- 1.6 Listen actively and respect the individual patient's views and their right to personal choice.
- 1.7 Encourage patients to take responsibility for their own health, through discussion and provision of information.
- 1.8 Comprehensively record any history the patient may give and the advice and treatment the registered or student clinical member has provided.
- 1.9 Provide comprehensive clear and balanced information to allow patients to make informed choices.
- 1.10 Respect and protect the patient's rights to privacy and confidentiality.
- 1.11 Maintain and develop professional knowledge and skills.
- 1.12 Practise only within the boundaries of their own competence.
- 1.13 Respond promptly and constructively to concerns, criticisms and complaints.
- 1.14 Respect the skills of other health care professionals and where possible work in cooperation with them.
- 1.15 Comply with the current legislation in relation to their practice as a homeopath of the country, state or territory where they are practising.
- 1.16 Practise in accordance with the Core Criteria for Homeopathic Practice and the Complementary and Natural Healthcare National Occupational Standards for Homeopathy.

Section 2 - The Patient/Practitioner Relationship

Provision of Information

- 1) To ensure that the patient is always able to make informed choices with regard to their healthcare, registered and student clinical members must give full and clear information about their services when commencing homeopathic treatment. This will include written information about the nature of the treatment, charges, availability for advice, confidentiality and security of records.

Consent

- 2) To ensure that the patient or their authorised representative is able to give valid consent with regard to healthcare, registered and student clinical members must give clear and sufficient information about the nature of homeopathic treatment, its

scope and its limitations. This must be given before treatment begins and as appropriate during treatment. For consent to be valid it must be given:

- a) Voluntarily.
 - b) By an appropriately informed person.
 - c) By a person with the competence to consent to the intervention in question.
 - d) If a patient has previously agreed to treatment but becomes incompetent the practitioner must cease treatment until a person with the right and competence to consent agrees.
 - e) Patients may withdraw consent at any time.
- 3) Registered and student clinical members may also be in a position to offer other complementary therapies. Where another therapy is offered, they must inform the patient prior to treatment about the other therapy and indicate their relevant qualifications, registration with any relevant registering body and adherence to a separate Code of Conduct. Consent should be obtained for every component of treatment before commencement (as stated in s2 above).

Referrals

- 4) Referrals must only be made to other practitioners with the patient's consent [in writing]. The practitioner should take all reasonable steps to ensure that to the best of their knowledge, the practitioner to whom they refer is fully qualified and insured to practise. The reasons for the referral or the practitioner working with another practitioner must be clearly explained to the patient.
- 5) Patients may refer themselves, in which case the homeopath must discuss with their patients the importance of informing their GP and other healthcare professionals if appropriate. The responsibility for altering any prescribed medication lies with the patient and the prescribing practitioner. See also s26 below.
- 6) Patients may be referred by a GP, in which case the GP will retain overall clinical responsibility for that patient.
- 7) Patients may be referred by another homeopath or health care practitioner, in which case details of such referrals must be recorded in writing in the notes. The patient must be informed why the referral is thought appropriate.
- 8) If at any time the patient declines to give consent for the registered or student clinical member to make contact with their GP or other healthcare practitioner, their wishes are to be respected, and that decision recorded in the notes. This is unless one of the exceptions to the confidentiality principle in section 18 applies.
- 9) Continuity of care is important. If a new patient notifies the practitioner that he or she has received treatment within the last six months from another homeopath, the patient's permission must be sought to contact the previous homeopath to obtain details of that treatment. If the patient does not agree to this, a note of their refusal must be recorded and the patient should be made aware that this may adversely affect the continuity of their care.

Hospital Treatment

- 10) Where a patient requests homeopathic treatment to be initiated or continued within a clinical setting, e.g. hospital or hospice, the registered or student clinical member will inform the patient or their representative of the need to notify the person with overall clinical responsibility. The homeopath may offer to write to this person on their behalf before commencing treatment.

Records and record keeping

- 11) The homeopath must record the patient's name, address, date of birth and telephone number, and the contact details of their GP on their record. If the patient is not registered with a GP this should be recorded.

All case notes, whether a result of electronic, telephonic or face-to-face consultations must be clear, legible, current, kept up to date and contain all the relevant information relating to the progress of the case, for example, treatment and any advice that has been given, whether the patient's condition has improved, been maintained or deteriorated since they were last seen. This is important for patient care and essential should the registered or student clinical member at any time be involved in complaints or legal proceedings. All notes should be contemporaneous or completed promptly after a consultation (generally on the same day).

The notes should be kept for seven years after the last consultation and, in the case of children, until their twenty-fifth birthday.

- 12) Under the General Data Protection Regulation 2018 a patient has a right to access to their healthcare record. This is known as a Subject Access Request (SAR) and can either be verbal or in writing. It is important to recognise verbal SARs, and registered and clinical members are advised to treat requests from patients for a copy of their records as a SAR. The patient may attend the practice to view the record or may request a photocopy of the record. The copy should be provided within thirty working days but ideally much more quickly. All information should be released unless it would cause the patient serious harm or it includes third party information. No charge can be made for any costs relating to this.

If a patient requires a copy of the record to be sent to another homeopath or practitioner, they should be copied and despatched within 30 days, subject to receipt of written consent from the patient confirming the wish to pass the record to another clinician. The full original record should be retained as required in s11 above.

- 13) In order to comply with the General Data Protection Regulation 2018 and other relevant legislation, consent is gained from the patient to keep full and clear records of all treatments that are taken, kept and stored for seven years from the date of the last appointment and in the case of children, at least seven years from their eighteenth birthday.

Data Protection

- 14) Where any patient records are stored electronically and/or in writing registered and student clinical members must comply with the [GDPR 2018](#)⁴.
- 15) The General Data Protection Regulation 2018 (GDPR) means that every organisation or sole trader who processes personal information must pay a data protection fee to the Information Commissioner's Office (ICO), unless they are exempt. Practitioners must check if they are obliged to pay the fee and can check the ICO online assessment tool to help them determine whether they are exempt. There must be a Privacy Policy and Data Protection Policy in place, and any data breaches must be reported to the ICO as soon as is practicable.
- 16) Patients have rights of access to their health records in accordance with the requirements of the law. See also s12.

Confidentiality and Disclosure

- 17) Registered and student clinical members must ensure that patient information is kept secure and confidential unless the patient agrees to the release of personal information in writing or where there is a legal requirement to release information.
- 18) Confidentiality must be maintained at all times except where
- The practitioner is compelled by an order of court or other legal authority. Only the information required under the order should be released.
 - It is necessary in the public interest. In such circumstances the duty to society overrides duty to the patient. This will usually happen when a patient puts themselves or others at serious risk.
- 19) A registered or student clinical member must be accurate and factual when writing reports, completing or signing forms or certificates or if required to give evidence in court or a tribunal.

Section 3 - Professional obligations

Competence and Continuing Professional Development

- 20) Registered and student clinical members must work within their own [scope of practice](#)⁵, and be aware of the limits of their professional competence and where appropriate, will refer to other practitioners ensuring that the practitioner to whom they refer is suitably qualified.
- 21) Registered and student clinical members should regularly monitor and evaluate their clinical skills and actively extend their knowledge base and their own personal development through continuing professional development.
- 22) Evidence of continuing professional development must be recorded and retained by the practitioner, and will be taken into account when hearing allegations regarding a registered or student clinical member's professional conduct or competence.

Professional practice

- 23) The patient has the right to know and the homeopath is obliged to offer, the name of any prescribed remedies. Where a patient expressly requests not to know the name of the remedy the homeopath must record this wish in their notes.
- 24) Clear instructions for taking the medication must be given for each prescription made and recorded in the patient notes.
- 25) Patients' dignity and modesty must be maintained during a consultation. Patients should be notified in advance that they may be required to undress for examination or treatment. The patient should undress and redress without being observed. It is recommended that a chaperone be used for the protection of both sides. The practitioner should ask, and record that they have asked, a patient whether they would like a chaperone if:
 - They are removing clothing particularly in intimate areas.
 - The patient is aged under 16.
 - The patient is not competent.
 - The patient is being treated in either their home or the clinic.

The patient should give verbal consent for examination and it should be recorded in the patient notes. If a chaperone is used, the name of the person should be recorded. The chaperone may be a member of staff or a friend or relative of the patient.

- 26) To be aware that the sole responsibility for adjusting any prescribed medication lies with the patient and the prescribing practitioner. Members must not adjust prescribed medication. See also s5 above.
- 27) The practitioner is responsible for making clear arrangements for patient care if they are absent from their usual practice hours for a period exceeding 24 hours. If a locum is used then the registered or student clinical member is responsible for ensuring that they are suitably qualified and insured.

Contact with relatives/other interested parties

- 28) Where a member of a patient's family or a friend or other person connected with a patient, initiates contact with the registered and student clinical members, it is the responsibility of the registered and student clinical members to listen carefully to their concerns without breaching confidentiality or contradicting the wishes of the patient. No instructions in relation to treatment should be taken on behalf of a patient unless that person has power of attorney for the patient's health and welfare. Details that the conversation has taken place must be recorded in the patients notes.

Consent in Children, Young People and Vulnerable Adults

- 29) Before examining or treating a child the practitioner must ensure that he or she has valid consent. A separate Mental Health Act applies in [Scotland](#)⁶. Consent for children is complex and the information below is a summary only. It is based on the [Gillick principles](#)⁷.

A child under age 16 may be able to consent to treatment if they have the capacity to do so. This is a matter for professional

judgement. However, a homeopath is strongly advised, wherever possible, to involve the child's parent.

- If a child under 16 gives consent a parent cannot override that consent.
- If a child lacks capacity to consent, then the homeopath must seek consent from the parent(s).
- A child of 16 or 17 can be treated as an adult and is presumed to be able to make judgements about their own care.
- A person of 16 or 17 without capacity cannot give consent to treatment and the consent must be obtained from the parent(s) [England, Wales and Northern Ireland]. In Scotland the young person is treated as an adult who lacks capacity.
- If a person aged 16 or 17 gives consent to treatment, that consent cannot be overridden by the parent(s).
- If the homeopath believes that a child under 16 is at risk, the practitioner must contact the appropriate Social Services Department for advice.
- A Society of Homeopaths [policy on vulnerable adults](#)⁸ can be found on the website.

Inappropriate use of patient related materials

- 30) Registered and student clinical members must obtain written permission for contemporaneously recording any part of the consultation. They should avoid recording on film, video or through digital techniques, any material or imagery concerning a patient which might be regarded as explicit, indecent or pornographic.
- 31) Registered and student clinical members will only use film, tape recording or digital imagery of material concerning a patient with that patient's clear, informed, written consent to the precise use of the material. The material may only be used in a confidential setting. The patient will be given explicit information as to the purpose for which the material is to be used. Permission may be revoked at any time. The patient should not feel pressured to give consent. If the registered or student clinical member wishes to use the material for a different purpose than the one given, a supplementary permission must be obtained.

Professional boundaries

- 32) A homeopath must not abuse professional boundaries, whether sexual or otherwise. It is never appropriate for a registered or student clinical member to pursue or enter into an intimate relationship with a patient, student or supervisee. Such a relationship undermines the relationship of trust. Registered and student clinical members should ensure that a professional relationship is maintained at all times. This applies both in relation to face-to-face contact and through social media.
- 33) A homeopath must not encourage patients to give, lend or bequeath money or gifts that will directly or indirectly benefit them. However, they may accept modest unsolicited gifts from patients or their relatives provided:
 - this does not affect, or appear to affect, the way they prescribe for, advise, treat, or refer and
 - they have not used their influence to pressurise or persuade patients or their relatives to offer them gifts.
- 34) If a homeopath receives a gift or bequest from a patient or their relative, they should consider the potential damage this could cause to their patients' trust in them and the public's trust in the profession. A homeopath should refuse gifts or bequests where they could be perceived as an abuse of trust.
- 35) Practitioners have the right to refuse to treat patients. They can do this before treatment begins or during treatment, however they must explain the reasons why. Reasons for refusing treatment might include:
 - If a patient makes lewd overtly sexual comments
 - If the patient is aggressive or violent
 - If the patient makes unreasonable demands of the practitioner
 - If the patient makes inappropriate social media contact
 - If the patient is putting the practitioner's safety at risk
 - If the homeopath does not have the resources, knowledge or training to effectively treat a patient
 - If the necessary relationship of mutual trust between the patient and practitioner has been broken

- 36) Where a registered or student clinical member needs support to manage such potentially difficult situations, guidance should be sought from supervision, or from the Professional Conduct Supervisor of The Society.

Research

- 37) Registered and student clinical members intending to undertake research must be familiar with and abide by current research ethics requirements, research governance and all relevant legal obligations.
- 38) For any homeopathic proving, provers will be entitled to the same level of care and supervision as patients.

Section 4 - Legal Obligations

Criminal and civil law

- 39) Registered and student clinical members are required to comply with the criminal and relevant civil law of the country, state or territory where they are practising. Practitioners must report to the Society if they are charged anywhere in the world with an offence of:
- Violence
 - Sexual offences
 - Dishonesty
 - Alcohol or drug abuse
- 40) Registered and student clinical members must observe and are responsible for keeping up to date with all legislation and regulations relating directly or indirectly to the practice of homeopathy.
- 41) References to any legislation or regulations throughout this code shall include any amendments or other alterations, repeals or replacements made in law since the date they came into force. Any reference to the singular shall include the plural and references to the feminine shall include the masculine.

Advertising and Media

- 42) Members must ensure that they do not allow misleading advertising and information about their practice. Advertising must be honest, decent, legal and truthful, and must comply with the relevant laws relating to advertising including The Trade Descriptions Act 1968; The Consumer Protection from Unfair Trading Regulations 2008 and The Blue Guide from the Medicines and Healthcare products Regulatory Agency (MHRA). Examples of Codes the Society will also take account of are the relevant clauses of The UK Code of Non-broadcast Advertising, Sales Promotion and Direct Marketing (CAP Code), and the current guidelines of the Society. See also s39.
- 43) Professional advertising must be factual and not seek to mislead or deceive, or make unrealistic or extravagant claims. Advertising may indicate special interests but must not make claims of superiority or disparage professional colleagues or other professionals. No promise of cure, either implicit or explicit, should be made of any named disease. All research should be presented clearly honestly and without distortion; all speculative theories will be stated as such and clearly distinguished.
- 44) Under the Cancer Act 1939, it is a criminal offence to take any part in the publication of an advertisement (which is likely to include electronic publications, such as websites, emails and social media) containing any offer to treat any person for cancer, or to prescribe any remedy for it, or to give any advice in connection with the treatment of cancer.
- 45) Advertising content and the way it is distributed must not put prospective patients under pressure to consult or seek treatment from a registered or student clinical member.

- 46) No registered or student clinical member may use their Society registration status in the advertisement or promotion of any product or remedy.

Potential misrepresentation

- 47) The use of the title 'Doctor' must be avoided, when the use of that title may create a false impression that the individual concerned is a registered medical practitioner or entitled to be a registered medical practitioner in the United Kingdom.
- 48) Reference to assistants as 'Nurse' is not acceptable unless the individual concerned is registered with the Nursing and Midwifery Council (NMC).
- 49) Claims, whether explicit or implied, orally or in writing, implying cure of any named disease must be avoided.

Notifiable diseases

- 50) Registered and student clinical members should be aware of those diseases which are notifiable under the Health Protection (Notification) Regulations 2010. Where the registered or student clinical member believes that the patient's symptoms may indicate the presence of such a disease, they should advise the patient to see their GP and/or write to the GP with this information.

Treatment of animals

- 51) Registered and student clinical members should be aware of and observe the law with regard to the treatment of animals with homeopathy.

Section 5 - Organisational Issues

Premises

- 52) Registered and student clinical members must comply with national and local legal obligations and regulations regarding premises and the safety of staff and patient facilities. Premises, equipment and medicines are to be kept in a serviceable, hygienic and secure condition.
- 53) A regular review of facilities and working practices must be undertaken to ensure they comply with current standards. Registered and student clinical members should be aware of their responsibilities under Health and Safety legislation (Health & Safety Act 1974); the Fire Safety in the Workplace legislation and other relevant legislation whether employer, employee or self-employed.

Insurance

- 54) Practising registered and student clinical members shall have appropriate professional indemnity insurance cover at all times.

Section 6 - Practice Issues

Problems with health

- 55) If the mental, emotional or physical health of a registered or student clinical member is impaired for any reason, and patients may be put at risk, the registered or student clinical member must seek and follow professional advice on whether, and how, to modify their practice so as to safeguard the interests of their patients.

Registered and student clinical members must not treat patients while under the influence of alcohol or drugs, either illegal or prescribed, which may affect competence and performance, e.g. prescribed opioids.

It may be necessary to stop practising or to receive professional supervision in order to establish fitness to practise. The registered or student clinical member should inform the Membership and Registration Supervisor in confidence, if this is the case. If a registered or student clinical member has any concerns about another registered or student clinical member's mental, emotional or physical health, they should seek appropriate advice from the Professional Conduct Supervisor.

- 56) In the event of the retirement, illness or death of a registered or student clinical member, arrangements must be made to ensure that patients are notified and their notes are, with their consent, passed to any successor practitioner.

When trust is compromised

- 57) Where, for whatever reason, the necessary relationship of mutual trust breaks down, either the registered or student clinical member or the patient may terminate the professional relationship. If this happens, the registered or student clinical member should ensure that the patient has an alternative source of homeopathic care if they want it. With the patient's permission, the new practitioner should be provided with sufficient information to take over responsibility for the patient's care without delay.

Complaints

- 58) Homeopaths trained to The Society standards and who follow the guidance in this Code are able to practise homeopathy safely, competently and ethically.

However, if for whatever reason, their practice is brought into doubt and the matter cannot be resolved by mediation between the registered or student clinical member and the complainant, the matter should be referred to The Society.

- 59) Patients, members of the public, other professionals and those registered with The Society have the right to complain to the Professional Standards Department of The Society if they perceive that a registered or student clinical member has not treated them, or conducted themselves, in accordance with this Code.
- 60) Registered and student clinical members should ensure that a patient has clear information about how to express any concern they may have about their treatment. In handling any complaint directly, the registered or student clinical member should act promptly and constructively, putting the interests of the patient first, and co-operating fully with any external investigation.
- 61) Any patient bringing an apparent failure in care, as described within this Code, to the registered or student clinical member's attention is entitled to proper investigation and a sensitive explanation of what has occurred. The registered or student clinical member will take the initiative to put things right, and, where appropriate, offer a suitable apology and assurance that steps have been taken to prevent recurrence.
- 62) Registered and student clinical members are encouraged at an early stage to ensure that any steps taken are in conjunction with The Society's Professional Conduct Procedures.
- 63) Members must co-operate fully with any investigation initiated by The Society whether arising from a complaint or not. If a registered or student clinical member resigns, or allows their registration to lapse, during the complaints procedure, the procedure will carry on and any outcomes published in line with its publication policy.
- 64) The procedures and powers of The Society provide a mechanism for patients, members of the public, other professionals or registered and student clinical members of The Society to raise allegations of professional misconduct and for registered and student clinical members involved to have the right to respond to any such allegations.
- 65) The public's trust and confidence in the profession, and the reputation of Homeopathy, can be undermined by a Homeopath's professional or personal conduct. You should have regard to your professional standing, even when you are not acting as a Homeopath. Where the conduct of any registered or student clinical member may have an adverse impact on their reputation as a homeopath and/or the reputation of homeopathy or the Society of Homeopaths, such matters may be brought to the attention of the Professional Conduct Committee for their consideration, and taken further if required.

Reference links

1. <https://homeopathy-soh.org/core-criteria-2020/>
2. <https://homeopathy-soh.org/resources/national-occupational-standards/>
3. <https://homeopathy-soh.org/conduct/professional-conduct-procedures-july-2020/>
4. GDPR documents and pages, <https://homeopathy-soh.org/?s=gdpd>
5. <https://homeopathy-soh.org/scopeofpracticev2dec2020/>
6. <https://www.mwscot.org.uk/the-law/mental-health-act/>
7. <https://learning.nspcc.org.uk/media/1541/gillick-competency-factsheet.pdf>
8. <https://homeopathy-soh.org/safeguarding-policy-2021/>

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Code of Ethics and Practice is available in PDF with interactive references, available here:
<https://homeopathy-soh.org/about-us/corporate-documents/>



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