



**British Association of Prosthetists and Orthotists**

# *Ethical Code*

**Standards of Conduct, Performance and Ethics  
for Prosthetists, Orthotists, Associates and Affiliates**

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## *Opening Remarks*

These standards replace any previous code and will be used as a measure of the professional values and behaviours that BAPO expects of all its members. By choosing to take up membership of BAPO, members are agreeing to adhere to these standards and demonstrating a commitment to maintaining and enhancing the reputation and standing of the Prosthetic & Orthotic profession.

In order to practice in the UK, Prosthetists/Orthotists are required to be registered with the Health & Care Professions Council and conform to the HCPC's own Standards of Conduct, Performance and Ethics. For this reason, the way in which these standards reflect the HCPC's own requirements, is clarified at the beginning of each section.

As the regulatory body for Allied Health Professions, HCPC deals with concerns regarding registrants fitness to practise or professional conduct and in doing so may draw down on standards from BAPO to provide a professional context to the case. However, any judgement or sanction imposed by HCPC will be based on their own standards but could adversely affect a member's status within BAPO and so each situation will be considered by the Executive Committee on an individual basis.

These standards will be reviewed and/or updated every two years to take account of changes within prosthetic and orthotic practice and BAPO would welcome feedback from members which would support this development process.

# *HCPC Standards of Conduct, performance & ethics*

## *Registrants must:*

1. Promote and protect the interests of service users and carers (*includes consent*)
2. Communicate appropriately and effectively
3. Work within the limits of their knowledge and skills (*includes keeping your professional knowledge and skills up to date*)
4. Delegate appropriately (*includes appropriate supervision*)
5. Respect confidentiality
6. Manage risk (*includes managing your health*)
7. Report concerns about safety
8. Be open when things go wrong
9. Be honest and trustworthy (*includes high standards of personal conduct / providing any important information about conduct and competence /honest advertising*)
10. Keep records of their work

*Source: Health & Care Professions Council  
Standards of Conduct, performance & ethics 2016  
<http://www.hcpc-uk.org/publications/standards/index.asp?id=38>*

## *1. Introduction*

- 1.1 The purpose of these standards to provide a set of principles that apply to Prosthetists, Orthotists, Associates and Affiliate members. It is a public statement of the values and principles used in promoting and maintaining high standards of professional behavior.
- 1.2 Any action that is in breach of the purpose and intent of these standards shall be considered unethical. Moreover, these standards may be used evidentially to withhold or exclude membership of BAPO.
- 1.3 BAPO is strongly committed to patient-centred practice and the involvement of patients and clients as a partner in all stages of the rehabilitation process.
- 1.4 The standards require that full members, Associates and Affiliates discharge their duties and responsibilities in a professional, ethical and moral manner. It bestows no rights on any person for its indiscriminate use for purposes other than those stated above. Further, it is without prejudice to any sanction imposed by the laws of the United Kingdom.
- 1.5 The compilation, revision and updating of the standards is the delegated responsibility of the Professional Affairs Committee of BAPO.
- 1.6 If there is uncertainty or dispute as to the interpretation or application of the standards, then enquiries should be referred to the Executive Committee of BAPO who may then seek further advice from any other appropriate body.

## *2. Patient Autonomy and Welfare*

*WRT: HCPC Standards 1,2,5,10*

- 2.1 **Respecting the autonomy of the patient:** Prosthetists/Orthotists shall at all times recognise, respect and uphold the autonomy of patients and their role in the rehabilitation process, including the need for patient choice and the benefits of working in partnership. Prosthetist/Orthotists shall promote the dignity, privacy and safety of all patients with whom they come into contact. *See also Health Service Circular (HSC) 2001/023.*
- 2.2 **Responsibility towards the patient:** Prosthetist/Orthotists have a duty to take reasonable care for patients whom they accept for rehabilitation.
- 2.3 **Record keeping:** Prosthetists/Orthotists must keep full, clear, accurate and up-to-date records for all patients that they care for and treat. *See also BAPO Standards for Best practice Section 3*
- 2.4 **Confidentiality:** Prosthetist/Orthotists are ethically and legally obliged to safeguard any confidential information relating to the patient. *See also BAPO Standards for Best Practice Section 3 & Information Governance Guidance Paper (2014)*

### *3. Services to Patients*

*WRT: HCPC Standard 1*

- 3.1 **Referral of Patients:** Prosthetist/Orthotists and Assistants shall accept referrals which they deem to be appropriate and for which they have the resources.
- 3.2 **Equity of service provision:** Prosthetist/Orthotists and Assistants shall provide services to all patients in a fair and just manner.
- 3.3 **Provision of services to patients:** Services should be patient centred and needs led.
- 3.4 **Violent and abusive patients:** Treatment may be withheld in accordance with local procedures. *See also Health Service Circular (HSC) 2001/18*

### *4. Personal and Professional Integrity*

*WRT: HCPC Standards 1,2,6,7,8,9*

- 4.1 **Personal integrity:** The highest standards of personal integrity are expected of Prosthetist/Orthotists and Assistants. They must not engage in any criminal, unprofessional or other unlawful activity or behaviour.
- 4.2 **Personal relationships with patients:** Prosthetist/Orthotists and Assistants shall not enter into relationships that exploit patients sexually, physically, emotionally, financially, socially or in any other manner. BAPO considers it unethical for Prosthetist/Orthotists or Assistants to enter into relationships which may impair their professional judgement and objectivity and/or may give rise to advantageous/disadvantageous treatment of the patient.
- 4.3 **Professional integrity:** Any reference to the quality of service rendered by, or the integrity of, a professional colleague will be expressed with due care to protect the reputation of that person.

4.3.3 Full members, Associates and Affiliates must act to protect patients where there is reason to believe they are threatened by a colleague's conduct, performance or health. The safety of patients must come first at all times and should over-ride personal and professional loyalties. As soon as a Full member, Associate or Affiliate, becomes aware of any situation which puts the patient at risk, the matter should be discussed with a senior professional, or the Registrar at the Health Professions & Care Council, if raising the matter with a senior colleague is thought inappropriate or is not possible. *See also Public Interest Disclosure Act 1998. The Enterprise & Regulatory Reform Act 2013. HSC 1999/198. HSC 2004/001*

#### 4.4 **Duty of candour:**

4.2.1 Full members, Associates and Affiliates have a duty of candour to be open and honest with patients when something has gone wrong with the prosthetic and/or orthotic treatment or care provided. For transparency, this applies to near misses as well as incidents that lead to harm.

See also:

- *Care Quality Commission Regulation 20: Duty of Candour*
- *The Healthcare Quality Strategy for NHS Scotland: Putting People at the Heart of Our NHS (2010), The Scottish Patient Safety Programme (2015)*
- *The National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011)*
- *The Health and Personal Social Services (Quality, Improvement and Regulation)(Northern Ireland) Order 2003*

4.4.2 Full members, Associates and Affiliates must also be open and honest with their colleagues, employers and relevant organisations, and take part in reviews and investigations when requested. They must also be open and honest with their regulators, raising concerns where appropriate. They must support and encourage each other to be open and honest, and not stop someone from raising concerns.

4.5 **Use of social media:** Full members, Associates and Affiliates must be aware that their personal and professional conduct when using social media should be of an appropriate standard and should conform to the general principles stated in this code. See also *BAPO Social Media Policy (2014)*

4.5 **Substance misuse:** Full members, Associates and Affiliates must not be under the influence of any toxic substance which is likely to impair the performance of their duties.

4.6 **Personal profit/gain:** Full members, Associates and Affiliates must not accept tokens such as favours, gifts or hospitality from patients and their families, or from commercial organisations, when this might be construed as seeking to obtain preferential treatment or other professional gain.

4.7 **Advertising:** Prosthetist/Orthotists may make direct contact with potential referring agencies to promote their services.

4.8.1 **Information/representation:** Full members, Associates and Affiliates shall accurately represent their qualifications, education, experience, training and competence and the information about services they provide.

## 5. *Professional Competence and Standards* *WRT: HCPC Standards 2, 3, 4, 9*

- 5.1 Clinical competence:** Full members, Associates and Affiliates shall achieve and continuously maintain high standards of competence.
- 5.2 Delegation:** Full members, Associates and Affiliates who delegate treatment or other procedures must be satisfied that the person to whom these are delegated is competent to carry them out. Such persons may include students, support workers or volunteers. In these circumstances, the Full members, Associates and Affiliates will retain ultimate responsibility for the patient.
- 5.3 Collaborative practice:** Full members, Associates and Affiliates shall respect the needs, practices, special competencies and responsibilities of other professions, institutions and statutory and voluntary agencies that constitute their working environment.
- 5.4 Continuing professional development:** Full members, Associates and Affiliates shall be personally responsible for actively maintaining and developing their personal professional competence, and shall base service delivery on accurate and current information in the interests of high quality care.
- 5.5 Prosthetist/Orthotist student education:** Prosthetist/Orthotists have a professional responsibility to participate in the education of Prosthetist/Orthotist students.
- 5.6 Development of the profession:** Full members, Associates and Affiliates shall promote an understanding of, and contribute to, the development of prosthetics/orthotics.

## *Raising a concern*

- 6.1 When a concern or complaint is made to BAPO that a member is in breach of this Code of Conduct and/or the BAPO Standards for Best Practice and/or any of the supplementary guidelines associated with those codes and/or working outside of their competencies, then the procedure for considering the concern will be as laid down in Section 9: Disciplinary Procedures of the BAPO Constitution. If the concern is considered to have a possible impact on the fitness to practice of the practitioner, then the case will be referred to the HCPC by the Secretary of BAPO, where it would then be subject to the HCPC Fitness to Practice protocol.
- 6.2 Following the outcome of the HCPC protocol, it may then be necessary for the concern to be referred to the BAPO Ethics and Standards committee (a Standing Committee formed by the Chair of the Association but not including the Chair) who will recommend to the Executive Committee a course of action as outlined within Section 9: Disciplinary Procedures of the BAPO constitution.



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