

NCH Code of Ethics and Conduct

All practising members undertake to adhere to the following code:

1. Client Welfare

The welfare of the client is the primary concern of the therapist. It should only take second place if not to do so would seriously jeopardise other members of the public or the therapist's welfare.

2. Confidentiality

Confidentiality is to be maintained in all but the most exceptional circumstances. These can only include:

- legal action (criminal or civil court cases where a court order is made demanding disclosure – includes coroner's courts),
- legal REQUIREMENT, e.g. Children's acts,
- where there is good cause to believe that not to disclose would cause danger of serious harm to the client, the therapist and/or others

3. Service

Hypnotherapists will only offer services in areas in which they have demonstrated their competence, to the agreed National Occupational Standards level. They have a responsibility to provide the client with the best possible service available including onwards referral to another therapist or medical practitioner that may offer such a service. Trainee members may only use the techniques and work only with issues for which they have been given express permission by their course tutor, following formal assessment and monitoring of skill development. Trainee members must ensure that all clients are fully aware of their trainee status.

4. Development of 'Skill-base'

Hypnotherapists are required to maintain or improve their level of skills and professional competence by:

- undertaking formal continuing training (of at least 10 hours per year), by attending workshops, courses and seminars, of an NCH approved standard,

AND

- sharing of experiences and exploring such with supervisors/peer-support groups.

An awareness of research and developments in the field of Hypnotherapy and other linked fields must be maintained.

5. Exploitation

All exploitation is abuse.

Hypnotherapists shall not behave in any manner that gives rise to the exploitation of a client. They will

- Not enter into any other relationship, outside the professional/ therapeutic relationship, while treating a client. (See notes.)
- make their charges known to the client before therapy is commenced.
- Terminate therapy at the earliest time, commensurate with the good care and continuing welfare of the client.
- Not accept any inappropriate gifts, gratuities or favours from a client.

Hypnotherapists shall only deal with clients under the age of 17yrs or with special needs, after obtaining informed consent of an appropriate adult (parent or legal guardian). All sessions should be conducted in the presence of an appropriate adult (parent, guardian or agreed adult third party) OR recorded on time indexed video/audio format, unless informed consent is obtained from the appropriate adult to work on a 1:1 basis. Members who have specific training in assessing Gillick competence may utilise these skills.

6. Advertising

Advertising, no matter in what form or medium it is placed, shall represent a true picture of the hypnotherapist, their skill base, qualifications, facilities and any benefits that may be expected from hypnosis and shall conform to current Advertising Law.

TESTIMONIALS IN ANY FORM MUST NOT BE INCLUDED.

7. General Conduct

Hypnotherapists shall not behave in any manner, within or outside the context of therapy that would undermine the public's confidence in the profession or bring the profession into disrepute. Some examples:

- A failure to act appropriately when they become aware of another therapist's unethical activity in a clinical setting,
- Improper use of hypnosis,
- criminal conviction,
- Lack of courtesy towards other Health or Social Care professionals,
- Discrimination on the basis of ethnic or sexual factors,
- Anything that is the subject of any civil judgement regarding neglect of duty of care.

- Misuse of the Title 'Doctor'. Hypnotherapists must at all times avoid misleading the public in any way by using the title "PhD", "Dr" or "Doctor" in a manner which might convey a false impression of their qualifications or professional status. This includes, among other things, falsely creating the impression that: (a) they hold a medical qualification, (b) that the qualification is in an area relevant to hypnotherapy, or (c) that the qualification is of a similar nature or standard to degrees issued by accredited UK universities, if this is not actually the case. Any use of the titles "Doctor" or "PhD" must be accompanied by a defining statement which clearly explains the awarding body and subject of the qualification, e.g., in a footnote.

Clients should be made aware of appropriate avenues of complaint.

Notes

Notes of clarification to Bye Laws:

1(a)(2) Most standards of confidentiality applied in professional contexts are based on the Common Law concept of confidentiality where the duty to keep confidence is measured against the concept of "greater good". A stronger form, as advocated, may be provided by the use of a written contract containing a confidentiality clause. The sharing of anonymous case histories with supervisors and peer-support groups is not a breach of professional confidentiality. The sharing of open case histories with supervisors is also not a breach. Feedback to referring medical practitioners can take the form of general comments as to progress; specific details should be kept confidential. The Hypnotherapist should also be prepared to share information necessary for the continuing treatment of clients by other health-care professionals, where there is an overlap or hand on of care. This should not be a reason to dilute the standards of confidentiality.

1(a)(4), Continuing Professional Development may include attending live courses, seminars, workshops or conferences, taking courses via distance learning, conducting research, and writing books, articles or publishable book reviews. All must be relevant to the practice of hypnotherapy.

1(a)(5), Should at any time a relationship, other than as described above, develop between a client and therapist, then the client shall be referred on to another competent therapist, at the earliest time commensurate with the welfare of the client and in any case, no further fees shall be taken.

Working with children: The NCH wishes to highlight that members should only work with children if they are so qualified to do so, and to be aware of the potential risks to them of false or malicious claims being made by children if they are seen without an appropriate adult.

1(a)(7), In the clause regarding bringing the profession into disrepute, the NCH also considers it to be a breach of the code to bring the NCH into disrepute. Ways that members can bring the NCH into disrepute include:

- Utilising the NCH Membership for purposes not sanctioned or approved by the NCH
- Failure to show a fellow member of the NCH the respect and courtesy owed him/her

- Acting in a manner either professionally or privately that would bring the NCH into disrepute.
- Stage hypnosis. The NCH does not support nor condone the practice of hypnotism for entertainment purposes. It is the view of the NCH that hypnosis should be shown only in a therapeutic light. Demonstrations made by members should be in keeping with the spirit of this utilisation of hypnosis.

1(b)(3) A supervisor is suitably qualified if they hold Cert. Hyp. Sup. or higher grade of supervisory training.

1(b)(4) The inclusion of a clause that defines the scope of confidentiality, within therapy raises it from a Common Law duty to Contractual Limitation and duty to deliver.