

CODE OF ETHICS & PROFESSIONAL PRACTICE

For
Members of the
UK Reiki Federation

October 2021



**UK REIKI
FEDERATION**

CODE OF ETHICS & PROFESSIONAL PRACTICE 2021

The Code of Ethics and Professional Practice has been formulated following consultation with the UK Reiki Federation membership and the UK Reiki Federation Management Committee.

1. PURPOSE

- 1.1. To establish and maintain standards of ethics and practice relating to the conduct of members of the UK Reiki Federation and their relationship with fellow members, other professional bodies and the public at large.
- 1.2. To inform and protect:
 - i. Members of the public seeking and/or using Reiki.
 - ii. Members of the UK Reiki Federation.

All Associate, Student, Practitioner/Teacher members of the UK Reiki Federation will be required to sign their agreement to uphold the Code of Ethics & Professional Practice and agree to abide by the Disciplinary Procedures as a condition of membership. This Code of Ethics & Professional Practice is in the process of constant development and will be reviewed and revised as necessary. It is the responsibility of the individual member to ensure that they are fully acquainted with the current requirements.

2. ETHICAL PRINCIPLES: Integrity - Respect – Trust

The UK Reiki Federation holds the following fundamental ethical principles, which all members are expected to uphold.

- 2.1. To work with integrity, impartiality and respect for all individuals. All professional relationships and interactions will be ethical and non-exploitative.
- 2.2. The highest standards of practice must be observed.
- 2.3. Confidentiality must be respected.
- 2.4. To treat fellow members of the UKRF, the public at large and other health care professionals with respect and courtesy.

3. CODES OF PROFESSIONAL PRACTICE

This introductory section applies the UK Reiki Federation's ethical principles to specific situations that may arise during the course of professional practice.

NB. The term 'Reiki Practitioner' is used as a general term whether trained to work with people or specifically trained to work professionally with animals also.

3.1. INSURANCE

All Reiki Practitioners must be adequately insured to practice. The insurance policy must state provision for public liability, employee liability (if personnel are employed) and professional indemnity, as well as provision for professional treatments. If offering Reiki to animals on a professional (i.e. paid) basis, insurance cover should be extended to animal treatments. It should not be assumed that Animal Reiki treatments are automatically covered within Reiki Practitioner insurance. An Animal Reiki level 2 training certificate is often required.

3.2. CLEAR CONTRACTS

- 3.2.1. Before treatment, Reiki Practitioners must explain fully, either in writing, verbally, demonstration or a combination of the above, all the procedures involved in the treatment, including such matters as client records, likely content and length of consultations, likely number of consultations, and fees, etc. It is not possible to guarantee the outcome of any course of treatment, therefore, the terms on which it is offered should be stated clearly before the first session of Reiki, with subsequent revisions being agreed in advance of any change. When the client is an animal, such matters must be explained to the animal's owner/caregiver.
- 3.2.2. Reiki Practitioners must never claim to 'cure'.
- 3.2.3. If another therapy is to be used in conjunction with Reiki, permission must be obtained from the client at the outset.
- 3.2.4. Reiki Practitioners must act with consideration concerning fees and justification for treatment.
- 3.2.5. Reiki Practitioners have the same obligation to the client whether being paid or working in a voluntary capacity.

- 3.2.6. Reiki Practitioners should recognise the client's right to refuse Reiki or disregard advice, even when the treatment has been requested by, or consent has been given by the parent/guardian, or in the case of animals, the owner/caregiver.
- 3.2.7. Reiki Practitioners retain the right the right to refuse or postpone giving Reiki to a client should the Practitioner believe the giving of Reiki to be inappropriate. The Reiki Practitioner should make it clear to the client why they are refusing or postponing treatment, e.g.:
- i. The client is under the influence of alcohol or mind- altering substances.
 - ii. The client is intimidating or offensive, in a physical or sexual manner, or otherwise.
 - iii. The client behaves in any way which may lead the Reiki Practitioner to feel physically unsafe, disrespected or abused. This also applies to animals that may be aggressive or reactive.
 - iv. In the case of late attendance of the client, the Reiki Practitioner may exercise discretion in refusing treatment.
 - v. Reiki is requested to avoid necessary medical or veterinary treatment, surgery or medication
 - vi. Red flag symptoms are evident or a notifiable disease is suspected that requires notification.
 - vii. Matters are/become evident that must be legally reported.
- 3.2.8. A copy of the Codes of Ethics & Professional Practice should be available to the client on request.
- 3.2.9. Certificates and other qualifications must be displayed or be made available by the Reiki Practitioner.
- 3.2.10. Before providing training, Reiki Teachers must explain fully either in writing or verbally, what the training entails. This should include full information about the course and its limitations, expectations, the investment of finances, time required by the student to complete the course, and assignments which must be completed in order to achieve certification.
- 3.2.11. Reiki Teachers must not allude to their course being 'NOS accredited' if they have not been passed by the UKRF Course accreditation programme.

3.3. **EMPOWERMENT OF THE CLIENT**

- 3.3.1. Reiki Practitioners should be empathic, supportive and positive, thus encouraging uplift in the client's mental outlook, and a belief in a progression towards good health practices. It is the client's prerogative to make their own choices with regard to their health, lifestyle and finances.
- 3.3.2. Reiki Practitioners must not countermand instructions or prescriptions given by a doctor, vet, or other healthcare or animal care professional.

3.4. **CLIENT ASSESSMENT**

- 3.4.1. Reiki does not take the place of conventional medical treatment.
- 3.4.2. Reiki Practitioners will make a baseline assessment prior to the first Reiki session and discuss appropriate aftercare.
- 3.4.3. All clients and owners or caregivers of animal clients should be asked what medical or veterinary diagnoses and advice they have received, but it is the client's decision as to whether or not this information is disclosed. Where appropriate, they should be advised to consult their GP/Veterinarian if they have not already done so. Since it is legal to refuse medical treatment, no client can be forced to consult a doctor.
- 3.4.4. A client should not be advised to discontinue prescribed medication.
- 3.4.5. Any advice given must be within the professional expertise of the Reiki Practitioner.

3.5. **CONFIDENTIALITY**

- 3.5.1. Reiki Practitioners, and professional support team, have an implicit duty to keep all information relating to attendance and client records entirely confidential. No disclosure may be made to a 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.
- 3.5.2. Reiki Practitioners must ensure that they comply with current data protection (GDPR) legislation.
- 3.5.3. Reiki Practitioners who sell or otherwise transfer their interest in a practice must inform all their clients of the change and give the name of the Reiki Practitioner who has taken over. No information on a client shall be provided to the incoming Reiki Practitioner without the permission of the client or the owners or caregivers of animal clients.
- 3.5.4. Teachers of Reiki must ensure that all correspondence, documentation and discussion with students and prospective students must be kept entirely confidential. Teachers should avoid making personal comments to students and should not discuss other students.

3.6. **CLIENT'S RECORDS**

- 3.6.1. Reiki Practitioners must ensure they keep clear and comprehensive records of their treatments including dates and advice given. These records should be factual and avoid opinion. This is especially important for the defence of any negligence actions as well as for efficient and careful practice.
- 3.6.2. Records are to be kept in safe custody for eight years from the time of the last consultation or if the client is a child, until her/his 25th birthday, or 26th birthday if the client was 17 when treatment ended.
- 3.6.3. Reiki Practitioners should arrange for the correct disposal of case records in the event of their death.

3.7. **PERSONAL RELATIONSHIPS – BOUNDARIES**

- 3.7.1. The relationship between the Reiki Practitioner and client should be of the highest professional standard. Due diligence of care, skill and integrity should be demonstrated at all times.
- 3.7.2. Reiki Practitioners/Teachers must not exploit their clients/students financially, sexually, emotionally or in any other way.
- 3.7.3. Practitioners must not request the removal of clothing except for coat and footwear.
- 3.7.4. Reiki Practitioners/Teachers shall be without judgment concerning the race, colour, creed, gender, sexual orientation or the religious, spiritual, political and social views of others.

3.8. **RESPONSIBILITIES TO SELF**

- 3.8.1. Reiki Practitioners shall recognise the value of self-treatment and also receiving Reiki from another, as part of their continuing self-development.
- 3.8.2. Reiki Practitioners have a responsibility to themselves to maintain their own professionalism.
- 3.8.3. Reiki Practitioners should not offer treatments to others if unwell.
- 3.8.4. Practitioner Members must take all reasonable steps to monitor, develop and advance their professional competence, and to work within that capacity. Continuing Professional Development (CPD), is a requirement for Professional Practice.
- 3.8.5. A Reiki Practitioner shall be aware of their personal professional limitations and refer a client elsewhere when the need demands.

3.9. **RESPONSIBILITIES TO OTHERS**

- 3.9.1. Reiki Practitioners shall seek a good relationship and work in a co-operative manner with other healthcare professionals, recognising and respecting their particular contribution within the healthcare team. Reiki Practitioners will not undermine a client's faith in any other form of treatment and shall respect and support the client's choices.
- 3.9.2. Reiki Practitioners will encourage accurate understanding of Reiki within other fields and modalities within the healthcare sector.
- 3.9.3. Reiki Practitioners/Teachers shall at all times conduct themselves with due diligence and respect in their relations with all members of the public, students, professional bodies and other UKRF members whilst conducting their professional practice.
- 3.9.4. Reiki Teachers should not engage in the criticism of other health professionals or teachers with their students.
- 3.9.5. Reiki Teachers must only use their own training materials unless they have received specific permission to use any other.
- 3.9.6. Reiki Teachers should endeavour to provide students with the required information, support and guidance during their training. This should include regular reviews and updates of their training to ensure students reach their full potential.

3.10. **SOLICITING OF CLIENTS**

Reiki Practitioners shall not encourage clients away from other professional colleagues.

3.11. **REIKI IN FORMAL CARE SETTINGS**

- 3.11.1. The care setting is responsible for the client.
- 3.11.2. Reiki Practitioners may only give Reiki to clients in care settings with permission from the client, or the person authorised to make decisions on their behalf, and the person responsible for their medical care.
- 3.11.3. Reiki Practitioners shall not give the impression that they are a medical professional or a member of staff. The Reiki Practitioner may have some form of identification, such as a lapel badge.
- 3.11.4. Where permission is given to provide Reiki on the ward, this must be carried out without intrusion or inconvenience to other clients and staff.
- 3.11.5. If other clients request treatment, the permission of the ward charge nurse, nursing officer (and if relevant, the client's doctor) must first be obtained. Reiki Practitioners must never undermine the client's faith in

hospital treatment or regime.

3.12. PREMISES

All Reiki Practitioners shall ensure that their working conditions are suitable for the practice of Reiki. (See below Appendix 2 – No. 3. Premises)

3.13. UK REIKI FEDERATION DISCIPLINARY PROCEDURES

- 3.13.1. All members will follow and abide by decisions made under the disciplinary procedures of the UK Reiki Federation.
- 3.13.2. The primary concern of the UK Reiki Federation shall be to protect the public and to uphold the reputation of the organization and its members.
- 3.13.3. To protect both the public at large and UK Reiki Federation members from discrimination, harassment, bullying and inappropriate behaviour.

3.14. ADVERTISING/PUBLIC STATEMENTS

The UK Reiki Federation's logo may only be used to advertise events that are being officially organised on behalf of the UK Reiki Federation, and by Practitioner Members subject to specific criteria, available on request.

4. CODE OF PROFESSIONAL PRACTICE – APPENDIX 1

Members of the UK Reiki Federation are required to ensure that they abide by all current local and national legislation in their country of residence; as applicable to their category of membership and in regard to their practice of Reiki. Failure to comply with the law may result in the termination of membership.

4.1. REIKI AND LEGISLATION

In the UK the following are noted:

- 4.1.1. A parent or guardian who wilfully fails to provide adequate medical aid for a child under the age of 16 may be committing a criminal offence. Reiki is not defined as a medical aid by law so anyone who gives Reiki to a child whose parents refuse medical aid could be seen to be aiding and abetting that offence. When giving Reiki to a child, it is advisable to secure the signature of the parent or guardian to the following statement. "I have been advised by (Reiki Practitioner's name) that according to Law I must consult a doctor concerning the health of my child (child's name)." This statement should be signed and dated by both parent/guardian and a witness and kept with the client records.
- 4.1.2. It is an offence to offer treatment or prescribe a remedy or advice for cancer. (*Please note – this does not mean that you cannot give Reiki to someone with cancer, you just cannot claim to specifically treat cancer.*)
- 4.1.3. Any advertising should be dignified and should not make any claims that could be considered health or medicinal claims, especially relating to the cure of any disease. It is useful to be aware of the guidance of the Advertising Standards Agency Code of Advertising Practice.
- 4.1.4. The Royal College of Veterinary Surgeons (RCVS) is the regulatory body for veterinary surgeons and veterinary nurses in the United Kingdom and has statutory responsibilities under the Veterinary Surgeons Act 1966 ('the Act'). Section 19 of the Act creates a criminal offence for non-veterinary surgeons to practice veterinary surgery. Section 27 of the Act defines veterinary surgery as meaning the art and science of veterinary surgery and medicine and shall be taken to include:
 - i. The diagnosis of diseases in, and injuries to, animals including tests performed on animals for diagnostic purposes.
 - ii. The giving of advice based on such diagnosis.
 - iii. The medical or surgical treatment of animals.
 - iv. The performance of surgical operations on animals.

Reiki as understood by the RCVS is healing by the laying on of hands and not generally regarded as the practice of veterinary surgery as defined by the Act.

On this basis, unless a veterinary surgeon, it is illegal for Reiki Practitioners to perform any of the above. Consequently, although there is no formal requirement to gain veterinary consent prior to offering Reiki, animals for whom Reiki is requested should first be seen by a vet for a diagnosis where they have a known or suspected physical or mental condition, or other health related issue. (Behavioural issues may have health implications). Reiki Practitioners working with animals should also familiarise themselves with the 2006 Animal Welfare Act and give due consideration to its content.

4.2. NOTIFIABLE DISEASES

Doctors in England and Wales have a statutory duty to notify a 'Proper Officer' of the Local Authority of suspected cases of certain infectious diseases.

Reiki Practitioners should be aware of the following diseases notifiable (to Local Authority Proper Officers) under the Health Protection (Notification) Regulations 2010: Acute encephalitis, Acute meningitis, Acute poliomyelitis, Acute infectious hepatitis, Anthrax, Botulism, Brucellosis, Cholera, Diphtheria, Enteric fever (typhoid or paratyphoid fever), Food poisoning, Haemolytic uraemic syndrome (HUS), Infectious bloody diarrhoea, Invasive group A streptococcal disease and Scarlet fever, Legionnaires disease, Leprosy, Malaria, Measles, Meningococcal septicaemia, Mumps, Plague, Rabies, Rubella, SARS, Smallpox, Tetanus, Tuberculosis, Typhus, Viral haemorrhagic fever (VHF), Whooping cough, Yellow fever, Corona Virus (Covid-19 / SARS-CoV-2).

It is no longer a requirement to notify the following diseases: Dysentery, Ophthalmia neonatorum, Leptospirosis, and relapsing fever.

Reiki Practitioners are advised to be aware of and co-operate with local by-laws and all relevant Health and Safety legislation.

Ignorance of the law is no defence.

4.3. NOTIFIABLE DISEASES IN ANIMALS

'Notifiable' diseases are animal diseases that must legally be reported to the Animal and Plant Health Agency (APHA), by owners/care givers of animals who are showing signs or may possibly be affected.

Notifiable diseases can be:

- i. Endemic – already present in the UK, such as bovine TB.
- ii. Exotic – not normally present in the UK, such as foot and mouth disease

Some endemic and exotic diseases are zoonotic which means they can pass between animals and humans, such as rabies.

If a notifiable animal disease is suspected the animal's owner/caregiver must report it immediately by calling the Defra Rural Services Helpline on 03000 200 301. In Wales, contact 0300 303 8268. In Scotland, contact the local **Field Services Office**. Failure to do so is an offence.

Reiki Practitioners who work with animals should be aware of the following notifiable diseases, for which published guidance exists:

African horse sickness, **African swine fever**, **Anthrax**, **Aujeszky's disease**, **Avian influenza (bird flu)**, BSE, Bluetongue, Bovine TB, Brucellosis, Chronic wasting disease, Classical swine fever, Contagious agalactia, Contagious bovine pleuro-pneumonia, Contagious epididymitis, Contagious equine metritis, Dourine, Enzootic bovine leukosis, Epizootic haemorrhagic disease, Epizootic lymphangitis, Equine infectious anaemia (swamp fever), Equine viral arteritis, Equine viral encephalomyelitis, Foot and Mouth disease: Glanders and farcy, Goat plague, Lumpy skin disease, Newcastle disease, Paramyxovirus infection, Porcine epidemic diarrhoea, Rabies: Rabies in bats, Rift Valley fever, Rinderpest, Scrapie, Sheep and goat pox, Sheep scab, Swine vesicular disease, Teschen disease, Vesicular stomatitis, Warble fly, West Nile fever.

Last updated 23 October 2018

Reiki Practitioners are also advised to be aware of, and co-operate with, local by-laws and all relevant Health and Safety legislation.

5. CODE OF PROFESSIONAL PRACTICE – APPENDIX 2

5.1. PROHIBITED APPELLATION

In order to enable the public to distinguish between those who are professionally qualified and those who are not, the law makes it a criminal offence for anyone who does not hold the relevant qualification to use any of the titles specified hereunder, or to use any other title or description which suggests or implies that he or she is on the statutory register of the persons who hold those qualifications. The titles are Chemist, Chiropodist, Dental Practitioner, Dental Surgeon, Dentist, Dietitian, Doctor, Druggist, General Practitioner, Medical Laboratory Technician, Midwife, Nurse, Occupational Therapist, Optician, Orthoptist, Pharmacist, Physiotherapist, Radiographer, Remedial Gymnast, Surgeon, Veterinary Practitioner, and Veterinary Surgeon. Reiki Practitioners must scrupulously avoid the foregoing titles unless he/she is additionally qualified in any of the fields concerned when he/she is entitled to use the appropriate description.

5.2. FRAUDULENT MEDIUMSHIP

The law provides that anyone who purports to act as a spiritualistic medium with intent to deceive, or exercises any power of telepathy, clairvoyance or other similar powers or, in purporting to act as a spiritualistic medium, or to exercise the powers mentioned above, uses any fraudulent device, is guilty of an offence.

5.3. PREMISES

- 5.3.1. When carrying on a business from any premises an individual must ensure that their working conditions and facilities to which members of the public have access, are suitable and comply with all current legislation.
- 5.3.2. In the case of Reiki Practitioners using their own homes as a base for their practice, in addition to complying with national legislation for any therapy they practice, they should check on any local authority by-laws covering their practice as these vary considerably throughout the country. This applies equally for offering Reiki to animals.
- 5.3.3. Reiki Practitioners working from home should give special attention to insurance, the terms of their lease or other title deeds, and any local government regulations limiting such practice or under which he/she may be liable to pay business rates. This also applies for offering Reiki to animals if a garage, other room, or separate construction is used for such treatments.
- 5.3.4. Practitioners should check that their home insurance covers them for working as a Practitioner from home, including a room used for office/clerical side of running a Reiki/ Therapy business.
- 5.3.5. If staff is employed on the premises, Practitioners must pay equal attention in this area.

5.4. ADVERTISING

- 5.4.1. The law makes it an offence to take part in the publication of any advertisement referring to any article or any description in terms which are calculated to lead to the use of that article for the purpose of treating human beings for any of the following diseases: Bright's disease, Glaucoma, Cataract, Locomotor ataxy, Diabetes, Paralysis, Epilepsy or fits, Tuberculosis.
- 5.4.2. It is also an offence to publish any advertisement which:
 - i. Offers to treat or prescribe a remedy or advice for cancer.
 - ii. Refers to any article calculated to lead to its use in the treatment of cancer.

5.5. GUIDELINES FOR DEALING WITH CLIENTS EXPRESSING SUICIDAL FEELINGS

It is not against the law for an individual to commit suicide or to attempt to commit suicide (Suicide Act 1961). However, the law states that anyone, either a professional or lay person, can be charged with the offence of aiding and abetting a suicide in the following circumstances:

- i. If they actively assist a suicide
- ii. If they are aware of someone's decision to attempt suicide and do not inform an appropriate professional, e.g. the general practitioner, hospital psychiatrist or approved social worker.

5.6. DISCLOSING CONFIDENTIAL INFORMATION IN THE PUBLIC INTEREST

Decisions about the disclosure of confidential information must be made on a case-by-case basis. When considering if disclosure of information is appropriate members should observe certain considerations:

Members must determine between serious harm to the individual about whom the information relates or serious harm to others. In order to prevent serious harm or death to others, confidential information can be disclosed without prior consent. This is likely to be defensible in common law in the public interest.

A threat of suicide constitutes an exceptional circumstance where confidentiality has to be reviewed. It is always better to get the client's consent to break confidentiality and to keep the information disclosed to the minimum. If however, you cannot secure your client's consent you are still under legal obligation to seek other help and this should be explained to the client. It is vital you make clear to the client that the minimum of information will be disclosed to other relevant professionals. For example, it is not always essential to reveal their medical status or the circumstances, which may make the client feel such despair. It is usually sufficient to state you are concerned for their safety because you believe they are at risk of committing suicide. For more guidance visit;

<https://www.gov.uk/government/publications/share-consent-confidentiality-and-information-sharing-in-mental-healthcare-and-suicide-prevention/share-consent-confidentiality-and-information-sharing-in-mental-healthcare-and-suicide-prevention#sharing-information-and-public-safety>

<https://www.gov.uk/government/publications/confidentiality-nhs-code-of-practice-supplementary-guidance-public>

