



# Codes of Ethics & Standards of Practice for members of the UK Reiki Federation – October 2011

2d Fitz Gilbert Court, Castledown Business Park, Ludgershall, Wiltshire, SP11 9FA Tel: 01264 791441  
enquiry@reikifed.co.uk www.reikifed.co.uk

These Codes of Ethics & Standards of Practice were formulated following consultation with the UK Reiki Federation membership and the UK Reiki Federation Management Committee.

## PURPOSE

- (a) To establish and maintain standards of ethics and practice relating to the conduct of members of the UK Reiki Federation and their relationship with the public at large.
- (b) To inform and protect:
  - Members of the public seeking and/or using Reiki, &
  - Members of the UK Reiki Federation.

All Practitioner members of the UK Reiki Federation will be required to sign their agreement to uphold this Code of Ethics & Standards of Practice and agree to abide by the Disciplinary Procedures as a condition of membership. This Code of Ethics & Standards of Practice is in the process of constant development and will be reviewed as necessary.

## ETHICAL PRINCIPLES Integrity - Respect – Trust

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

- To work with integrity, impartiality and respect for all individuals. All professional relationships and interactions will be ethical and non-exploitative.
- The highest standards of practice must be observed.
- Confidentiality must be respected.

## CODES OF PROFESSIONAL PRACTICE

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

### 1. Insurance

All Reiki Practitioners must be adequately insured to practise. The insurance policy must state provision for public liability and employee liability (if personnel are employed) and professional indemnity, as well as provision for professional treatments.

### 2. Clear Contracts

- a) Before treatment, Reiki Practitioners must explain fully, either in writing or verbally, 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.
- b) Reiki Practitioners must never claim to 'cure'.
- c) If another therapy is used in conjunction with Reiki, permission must be obtained from the client at the outset.
- d) Reiki Practitioners must act with consideration concerning

fees and justification for treatment.

- e) A Reiki Practitioner has the same obligation to the client whether being paid or working in a voluntary capacity.
- f) Reiki Practitioners should recognise the client's right to refuse Reiki or disregard advice.
- g) Reiki Practitioners must retain 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 the Reiki session, eg,
  - if the client is under the influence of alcohol or mind-altering substances;
  - if the client is intimidating or offensive, in a physical or sexual manner, or otherwise;
  - if the client behaves in any way which may lead the Reiki Practitioner to feel physically unsafe, disrespected, or abused;
  - in the case of late attendance of the client, the Reiki Practitioner may exercise discretion in refusing treatment;
- h) A copy of the Codes of Ethics & Standards of Practice should be available to the client on request.
- i) Reiki Practitioners must not use titles or descriptions to give the impression of being medically qualified, unless they hold appropriate qualifications, and must make it clear to their clients that they are not medical professionals and do not purport to have their knowledge or skills. (*See Appendix 2 – No.1. Prohibited Appellation*)
- j) Certificates and other qualifications shall be displayed or be made available by the Reiki Practitioner.

### 3. Empowerment of the client

- a) 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.
- b) Reiki Practitioners must not countermand instructions or prescriptions given by a doctor. Reiki Practitioners 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 his/her own decision in the light of medical advice.
- c) Reiki Practitioners should refrain from making judgements upon the choices made by clients, and the way in which clients choose to conduct their lives. (*See Codes of Ethics & Standards of Practice - No. 5 Confidentiality and Appendix 2 – No. 5. Guidelines for dealing with Clients expressing suicidal feelings*)

### 4. Client Assessment

- a) Reiki Practitioners must never give a medical diagnosis to a client in any circumstances, this being the responsibility of a registered medical practitioner. Reiki does not take the place of conventional medical treatment.
- b) The Reiki Practitioner will make a base-line assessment prior to the first Reiki session and discuss appropriate aftercare.

- c) All clients should be asked what medical advice they have received, but it is the client's decision as to whether or not this information is disclosed. If appropriate they should be advised to consult their GP if they have not already done so. Since it is legal to refuse medical treatment, no client can be forced to consult a doctor. A Reiki Practitioner may suggest that it would be advisable to seek an allopathic diagnosis but should not attach a medical name to the perceived condition.
- d) A client should not be advised to discontinue prescribed medication without consulting their doctor.
- e) All advice must be recorded for the Reiki Practitioner's protection.

## 5. Confidentiality

- a) Reiki Practitioners, their assistants and receptionists have an implicit duty to keep all information relating to attendance, records and views formed about clients, 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.
- b) Reiki Practitioners must ensure that they comply with the Data Protection Act.
- c) 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.
- d) If a Reiki Practitioner believes that there is a risk of self-harm by an individual, the confidentiality guidelines are overridden. (*See Appendix 2 – No. 5. Guidelines for dealing with Clients expressing suicidal feelings*)
- e) If a Reiki Practitioner believes an individual intends to harm or abuse a child, or learns of any terrorist activity then the confidentiality guidelines are overridden. The Reiki Practitioner is obliged by law to report this to the appropriate authorities.

## 6. Client's Records

- a) 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.
- b) Records are to be kept in safe custody for seven years from the time of the last consultation.
- c) Reiki Practitioners should arrange for the correct disposal of case records in the event of their death.

## 7. Personal Relationships – Boundaries

- a) 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.
- b) Reiki Practitioners/Teachers must not exploit their clients/students financially, sexually, emotionally or in any other way.
- c) Reiki Practitioners must not request the removal of clothing except for coat and footwear.
- d) Reiki Practitioners shall be without judgement concerning race, colour, creed, gender or sexual orientation.

## 8. Responsibilities to Self

- a) Reiki Practitioners shall recognise the value of self-treatment and also receiving Reiki from another, as part of their continuing self-development.
- b) Reiki Practitioners have a responsibility to themselves to maintain their own professionalism. They are advised to monitor their own personal functioning and to seek help and/or withdraw from giving Reiki if their personal resources are depleted.
- c) Practitioner Members must take all reasonable steps to monitor, develop and advance their professional competence, and to work within that capacity. Continuing Professional Development is a requirement for Professional practice.
- d) A Reiki Practitioner shall be aware of their own professional limitations and refer a client elsewhere when the need demands.

## 9. Responsibilities to Others

- a) 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, irrespective of whether they work from an allopathic or complementary perspective.
- b) Reiki Practitioners will not undermine a client's faith in any other form of treatment and shall respect and support the client's choices.
- c) Reiki Practitioners will encourage understanding of Reiki within other fields and modalities within the healthcare sector.
- d) Reiki Practitioners shall at all times conduct themselves with due diligence in their relations with all people whilst conducting their professional practice.
- e) Reiki Practitioners must not attend women in childbirth or give them Reiki for 10 days thereafter unless they hold an appropriate qualification in midwifery or unless the client, in consultation with a practising midwife or a Registered Medical Practitioner requests their services. (*See Appendix 1 - REIKI & LEGISLATION*)

## 10. Soliciting of Clients

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

## 11. Reiki in Hospitals

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

## 12. Premises

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

## 13. UK Reiki Federation Disciplinary Procedures

- a) All members will follow and abide by decisions made under the disciplinary procedures of the UK Reiki Federation.
- b) The primary concern of the UK Reiki Federation shall be to protect the public and to uphold the reputation of the organisation and its members.

## 14. Advertising/Public Statements

- a) Advertising must be discreet and dignified in tone. It shall not contain testimonials or claim a cure or mention any disease. It shall be confined to drawing attention to the therapy available, the qualifications of the Reiki Practitioner and offering general information regarding Reiki. (See Appendix 2 – No. 4 Advertising)
- b) The UK Reiki Federation's Logo can 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
- c) The UK Reiki Federation logo may not be used on certificates issued by Reiki Teachers.

## APPENDIX 1: REIKI AND LEGISLATION

### In the UK the following are noted;

- a) 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.
- b) 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*)
- c) Any advertising should comply with the British Code of Advertising Practice and meet the requirements of the Advertising Standards Agency. Adverts should be dignified and should not claim a cure or mention any disease.
- d) Reiki Practitioners must not attend women in childbirth or give them Reiki for ten days thereafter unless they hold an appropriate qualification in midwifery. The giving of Reiki with the permission of the Client and the Midwife is acceptable.
- e) The 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 practise veterinary surgery. Section 27 of the Act defines 'veterinary surgery' as meaning the art and science of veterinary surgery and medicine and includes –

- (a) the diagnosis of diseases in, and injuries to, animals including tests performed on animals for diagnostic purposes;
- (b) the giving of advice based on such diagnosis;
- (c) the medical or surgical treatment of animals; and
- (d) the performance of surgical operations on animals.

There are certain exemptions in the Act to this restriction for non-veterinary surgeons, some of which are listed in Schedule 3 to the Act and others are contained in Exemption Orders.

However, the restrictions and exemptions in the Act will only be relevant where a person is practicing 'veterinary surgery' as defined in the Act. However performing reiki on an animal is unlikely to fall within this definition and is therefore restricted to veterinary surgeons.

Information in relation to the treatment of animals by non-veterinary surgeons can be found in the RCVS Guide to Professional Conduct ('the Guide'), particularly the relevant paragraphs 15 and 16 in Part 2F. The Guide identifies the key responsibilities of veterinary surgeons to their patients, clients, the public and professional colleagues, as well as their responsibilities under the law. It is not a detailed rulebook, but rather it sets out fundamental principles which may be applied to all areas of veterinary practice.

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 and restricted to veterinary surgeons, provided there is no element of diagnosis. On this basis, there may otherwise be no formal jurisdiction to insist upon the involvement of a veterinary surgeon before the laying on of hands is given, although any person who provided healing to an animal that had not first been seen by a veterinary surgeon runs the risk that their actions would be considered to involve diagnosis and be a breach of the Act and criminal offence.

This is because often owners will be bringing an animal to a healer because there is something wrong. Leaving the determination whether an animal is sick or injured to a healer calls for diagnosis in breach of the Act. Where an owner asks a faith healer to maintain an animal's good health, by ensuring that the animal has first been seen by a veterinary surgeon who is content for healing to be given by the laying on of hands, the risk that the healer's actions may constitute diagnosis is removed and any matter requiring treatment by a veterinary surgeon can be resolved. It may also successfully fulfil any obligations an owner has to obtain appropriate care for their animal under the Animal Welfare Act.

Therefore the RCVS considers that any healers should ensure that animals have been seen by a veterinary surgeon who is content for healing to be given by the laying on of hands.

Members should also familiarise themselves with the 2006 Animal Welfare Act and give due consideration to its content.

## 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. 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.

## APPENDIX 2

### 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, Chiropractor, 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, Veterinary Surgeon. It need hardly be said that a Reiki Practitioner must scrupulously avoid the foregoing titles unless of course he/she is additionally qualified in any of the fields concerned when he/she is entitled to use the appropriate description.

### 2. Fraudulent Mediumship

The law provides that anyone who:

- a) with intent to deceive, purports to act as a spiritualistic medium or to exercise any power of telepathy, clairvoyance or other similar powers or,
- b) in purporting to act as a spiritualistic medium, or to exercise the powers mentioned in (a) above, uses any fraudulent device, is guilty of an offence.

### 3. Premises

- a) When carrying on a trade, business or profession 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 legislation.
- b) 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 practise, they should check on any local authority by-laws covering their practice as these vary considerably throughout the country.
- c) 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.

- d) Practitioners should check that their home insurance covers them for working as a Practitioner from home.
- e) If staff are employed on the premises, Practitioners must pay equal attention in this area.

### 4. Advertising

- a) 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.
- b) It is also an offence to publish any advertisement which:
  - offers to treat or prescribe a remedy or advice for cancer, or
  - refers to any article calculated to lead to its use in the treatment of cancer.
- c) At all times advertising should comply with standards laid down by the British Code of Advertising Practice and meet the requirements of the Advertising Standards Authority.

### 5. Guidelines for dealing with Clients expressing suicidal feelings.

#### a) The legal position

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:

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

#### b) UK Reiki Federation's position

##### Legal obligation

Each individual has his or her own beliefs about the acceptability of suicide as a choice in someone's life. However, in our role as UK Reiki Federation members, we are bound by law. This means that practitioners should never help a client to end their life or fail to take appropriate action to prevent a suicidal act.

#### c) Confidentiality

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.