

Code of Members' Professional Values and Behaviour





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Foreword

As the chair of the CSP's Council, I am delighted to introduce the Society's new Code of Professional Values and Behaviour. The Code sets out the CSP's expectations of all members: qualified physiotherapists, associates (physiotherapy support workers) and physiotherapy students. It asserts high standards of behaviour, while supporting members in fulfilling their physiotherapy roles in rapidly changing environments.

The Code presents a person-centred approach to professionalism. As such, it puts patients' and clients' needs to the fore. The Code is intended for a range of audiences - particularly patients, clients and carers who receive services from CSP members, and the public at large – as well as forming a key document for members themselves.

The Code aligns strongly with other codes for health care professions in the UK (including those published by regulatory bodies) and physiotherapists overseas, and is underpinned by core, generic ethics of professionalism. At the same time, it reflects CSP members' distinctive contribution to health and well-being and the breadth and evolving nature of UK physiotherapy practice. It also highlights members' responsibility to maintain and enhance the reputation and standing of the physiotherapy profession.

We are publishing the Code for an initial two-year period. We are keen to review how the document is received and used, with a view to refining and updating it. Your feedback is therefore very important to us. It will help to ensure that the Code continues to reflect the delivery and receipt of physiotherapy services, while upholding high standards of professionalism, and help us to develop additional guidance and tools to support the Code's practical application and use.

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CSP Chair of Council

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- Members of the CSP Charting the Future project steering group and implementation group
- Members of the CSP Regulatory Board
- Members who participated in the Code pilot exercise
- Individuals who commented on their expectations of CSP members
- The CSP Charting the Future project team

The Code's four principles

1 CSP members take responsibility for their actions

Members

- Demonstrate appropriate professional autonomy and accountability
- Act within their individual scope of practice
- Make informed decisions.

2 CSP members behave ethically

Members

- Adhere to legal, regulatory and ethical requirements
- Act with integrity, honesty and openness
- Engage with relevant professional and social contexts.

3 CSP members deliver an effective service

Members

- Put the needs of service users at the centre of their decision-making
- Respect and support individuals' autonomy
- Communicate effectively
- Work effectively with others.

4 CSP members strive to achieve excellence

Members

- Seek to continuously improve
- Demonstrate innovation and leadership
- Support others' learning and development
- Support the development of physiotherapy.

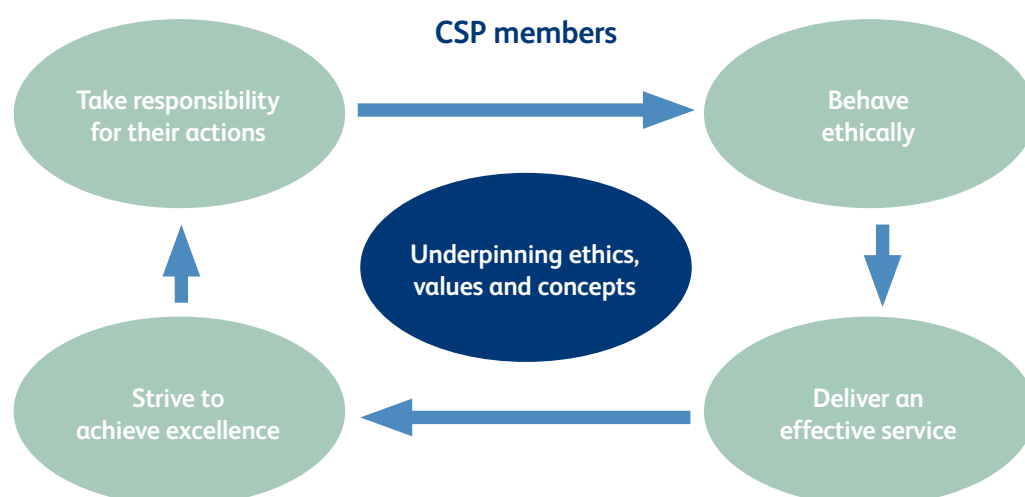
Each principle is supported in Section 3 by supplementary statements. Together, the principles and statements form a positive expression of the professional values and behaviour that the CSP expects of all its members.

The Code explained

The nature of physiotherapy

The Code reflects the distinctive nature of physiotherapy's contribution to health and well-being and the breadth and evolving nature of physiotherapy practice. The Code's four principles encapsulate the professional values and behaviour that the CSP expects all its members to demonstrate [see Fig.1]. The principles' underpinning ethics, values and concepts are set out in Table A.

Figure 1: The four principles



The principles support members in making informed and reasoned decisions about professional and ethical issues that they encounter in their day-to-day activity. In so doing, the principles support members in fulfilling their duty of care to the individuals whom they serve.

The principles reflect the purpose and context of CSP members' activity:

- CSP members work with individuals to maximise their quality of life by restoring, maintaining and improving function and movement
- CSP members work with individuals to promote physical approaches to optimising health, well-being and illness prevention, through the delivery of high-quality, innovative services
- Physiotherapy in the UK is founded on a strong, evolving evidence base and is delivered by an adaptable, engaged workforce
- CSP members practise in a range of roles and settings, independently, as first-contact practitioners and as part of multi-disciplinary teams
- Physiotherapy activity is inherently and necessarily complex and diverse
- CSP members undertake physiotherapy activity within changing structures and increasingly diverse sectors, settings and roles.

The purpose of the Code

The Chartered Society of Physiotherapy (CSP) is the professional body and representative organisation for physiotherapy in the UK. The Code defines, in positive terms, the professional values and behaviour that the CSP expects of all of its members. It also reinforces the imperative that members adhere to regulatory requirements, the law and the requirements of their employing organisations and education institutions.

In doing this, the Code supports members in taking responsibility for their decision-making and actions and fulfilling their duty of care to those whom they serve. It also promotes members' professionalism, while reflecting their diverse physiotherapy roles.

Members agree to adhere to the Code as part of the contract that they make with the CSP in choosing to take up membership. Doing this and periodically reaffirming this acceptance are integral to becoming and remaining a CSP member (in all membership categories).

Acceptance of the Code demonstrates members' commitment to all individuals with whom they interact in their physiotherapy roles. It also demonstrates members' commitment to maintaining and enhancing the reputation and standing of the physiotherapy profession and to fulfilling the broader social responsibilities that their physiotherapy role places on them.

The Code is intended for broader audiences, as well as for members and prospective members. These audiences include the following:

- Individuals receiving services from CSP members (as patient/clients and carers)
- Individuals affected by members' activity (including research activity and the dissemination and implementation of research findings)
- Other professionals and colleagues (within multi-disciplinary and inter-agency teams) with whom CSP members work
- Employees of CSP members
- Regulators and employers
- The public at large.

The Code replaces the CSP Rules of Professional Conduct and Code of Conduct for Associate Members (although the former is retained to underpin the Society's disciplinary processes for certain member categories; see The Code's context.

It is published for an initial two-year period and will be reviewed in 2013. The review exercise will be informed by feedback on the Code's receipt and use and by developments in physiotherapy activity and practice contexts.

The Code's context

The Code reflects the legal, regulatory and organisational requirements and responsibilities that CSP members must fulfil in their conduct and practice of physiotherapy. It reinforces these requirements and responsibilities, as well as supporting members in fulfilling them.

Under the Health Professions Order 2001, 'physiotherapist' is a protected title. It can only be used in the UK by a person who is registered with the Health Professions Council [HPC], the statutory regulator of physiotherapists. All qualified practising members of the CSP must be registered with the HPC. Securing and maintaining registration with the HPC is a condition of eligibility for qualified CSP membership.

The exceptions to this requirement are qualified members who are

- Taking a career break
- Retired
- Practising outside the UK
- Practising exclusively on animals.

Members to whom one or more of the above applies can remain as CSP members without maintaining HPC registration.

The particular ways in which the Code reflects HPC requirements are mapped in Appendix C.

The HPC handles complaints concerning the professional conduct or fitness to practise of physiotherapy registrants. In enacting this process, the HPC may draw on relevant resources from the CSP (such as this Code) to explore the case against a registrant and to provide a professional context. However, judgments made by the HPC are founded on its own regulatory standards.

The CSP considers individual members' status with itself based on the outcome of any HPC case against them.

Individuals enrolled on a qualifying programme in physiotherapy (for which HPC approval is a condition of its delivery) are eligible to apply for CSP student membership. Individuals who are employed in a support role relating to physiotherapy are eligible to apply for CSP associate membership.

Complaints received by the CSP regarding its members whose activity is not regulated by the HPC are investigated through the Society's own disciplinary procedures. This applies to student and associate members, and qualified members who practise on animals. The CSP's own disciplinary procedures are defined by its Bye-laws and Statutes and founded on its *Rules of Professional Conduct* (CSP, 2002).

The CSP produces *Standards of Physiotherapy Practice* to support members in their day-to-day activity and to define its expectations of members' practice in more detail. The Standards are currently being reviewed. The new version is due for publication in 2012.

The Code's underpinning values and concepts

The Code's four principles are underpinned by contemporary healthcare ethics and by professional values and concepts derived from these. These are summarised in Table A. An explanation of core concepts and terms is provided in Appendices A and B.

Table A: Underpinning ethics, values and concepts

Underpinning ethics	Underpinning values	Core professional concepts
<ul style="list-style-type: none"> ■ Respect for individual autonomy ■ Promoting what is best for an individual ■ Avoiding harm ■ Fairness in how services are delivered 	<ul style="list-style-type: none"> ■ Altruism, in terms of giving priority to the interests of individuals ■ Advocacy ■ Honesty and integrity ■ Compassion and caring ■ Accountability for decision-making and actions ■ Fulfilment of duty of care and social responsibility ■ Commitment to excellence 	<ul style="list-style-type: none"> ■ Competence ■ Person-centred practice ■ Professional autonomy ■ Professionalism ■ Scope of Practice

Interpreting the Code

The Code relates to CSP members in all membership categories, in all occupational roles, at all career stages, and in all sectors and settings. It applies to members' interaction with individuals as patients/clients and carers, as well as to members' broader roles to do with the following:

- Managing, developing and delivering services
- Policy and leadership
- Education
- Research
- Administration and support functions.

How members demonstrate their fulfilment of the Code's four principles depends, in part, on the nature of their physiotherapy role and career stage.

The supplementary statements in Section 3 are designed to support members' and others' understanding of the intended meaning and range of each Code principle. It is important to recognise the following about the statements:

- They are not intended to be exhaustive
- They complement one another
- They collectively reflect the complex range of values and behaviour that underpin and make up physiotherapy activity
- Individual statements are not designed to be taken in isolation
- Any one statement does not override the significance of another.

Given the intended breadth of the principles and their application, not all elements of the statements are relevant to all CSP members at all times. Judgment and discretion in interpreting and using them is therefore required. Where there are key differences in how they relate to members in different member categories, this is explained in Appendix A. Where the nature of a statement's application to members relates strongly to their role, this is indicated by use of the word "appropriate" (e.g. "as appropriate to role").

The Code in full

1 CSP members take responsibility for their actions

1.1 Members demonstrate appropriate professional autonomy and accountability

Members

- 1.1.1 Use their professional autonomy to benefit others
- 1.1.2 Understand and accept the significant responsibility that professional autonomy brings
- 1.1.3 Accept and uphold their duty of care to individuals
- 1.1.4 Are responsible and accountable for their decisions and actions, including the delegation of activity to others
- 1.1.5 Justify and account for their decisions and actions
- 1.1.6 Ensure that their activity is covered by appropriate insurance.

1.2 Members act within their individual scope of practice

Members

- 1.2.1 Limit their professional activity to those areas in which they are competent and qualified to work safely
- 1.2.2 Delegate and refer to others appropriately
- 1.2.3 Act upon delegation or referral appropriately
- 1.2.4 Undertake continuing professional development [CPD] to maintain and develop their competence
- 1.2.5 Understand that their individual scope of practice sits within the evolving scope of physiotherapy practice in the UK
- 1.2.6 Recognise that their individual scope of practice evolves and must be supported by appropriate CPD
- 1.2.7 Take account of individual, service and workforce needs in developing their scope of practice.

1.3 Members make informed decisions

Members

- 1.3.1 Use sound professional judgment in their physiotherapy activity
- 1.3.2 Ensure that their practice is informed by the profession's evolving evidence base
- 1.3.3 Use the available information and evidence when making decisions and assessing risk
- 1.3.4 Evaluate the impact and outcome of their decisions, reflect on this and use their learning inform their subsequent activity and to help others
- 1.3.5 Decide when it is appropriate to act in particular situations or scenarios and are able to explain a decision that they have made.

2 CSP members behave ethically

2.1 Members adhere to legal, regulatory and ethical requirements

Members

- 2.1.1 Ensure that they meet the legal, regulatory and ethical requirements relevant to their physiotherapy activity (including those specific to data protection, access to health records requests, equality and research)
- 2.1.2 Complete records in accordance with legal, ethical, and organisational requirements
- 2.1.3 Deliver services that are of value to an individual, supported by evidence of their effectiveness
- 2.1.4 Ensure confidential information that they acquire in all types of activity remains secure.

2.2 Members act with integrity, honesty and openness

Members

- 2.2.1 Understand and manage the impact of their own beliefs, values and behaviours on their practice and their interaction with others
- 2.2.2 Use sound professional judgment when endorsing, advertising, supplying or selling particular services or products
- 2.2.3 Provide truthful and accurate information (including when advertising and promoting services)
- 2.2.4 Disclose any financial benefit that they expect to receive through endorsement or advertising
- 2.2.5 Declare any conflict of interest
- 2.2.6 Recognise the potential impact of their personal behaviour, life-style and activity outside work on their physiotherapy role.

2.3 Members engage with relevant professional and social contexts

Members

- 2.3.1 Strive to challenge and address health inequalities in how services are delivered
 - 2.3.2 Recognise their role as advocates for the physiotherapy profession
 - 2.3.3 Recognise the potential impact of their personal behaviour, life-style and activity on the reputation of the physiotherapy profession.
-

3 CSP members deliver an effective service

3.1 Members put the needs of service users at the centre of their decision-making

Members

- 3.1.1 Seek to understand, and take full account of, individuals' needs, preferences, expectations and goals in delivering a service to them
- 3.1.2 Advocate for individuals' quality of care and others' safety and alert appropriate authorities if these are at risk of being compromised
- 3.1.3 Respond to individuals compassionately and sensitively (being aware of individuals' vulnerability or potential vulnerability)
- 3.1.4 Show empathy with individuals' situations and circumstances
- 3.1.5 Respect individuals' rights, dignity, sensibilities, beliefs and identity and the implications that these may have for acting in accordance with individuals' best interests
- 3.1.6 Behave in non-discriminatory, non-oppressive ways.

3.2 Members respect and support individuals' autonomy

Members

- 3.2.1 Promote and uphold individuals' rights and choices, including their right not to consent to decisions or actions affecting them
- 3.2.2 Ensure individuals have given valid consent to any decision or action affecting them
- 3.2.3 Share all relevant information to support individuals in making their own decisions, including that relates to issues of risk and consent
- 3.2.4 Share knowledge and skills with others to promote effective joint decision-making, planning and evaluation
- 3.2.5 Promote, support and empower individuals to participate in decision-making, to self-manage and be independent.

3.3 Members communicate effectively

Members

- 3.3.1 Use appropriate methods to ensure good communication with others
- 3.3.2 Take account of individuals' different communication needs, preferences and expectations
- 3.3.3 Provide full, accurate and truthful information about the services that they deliver, including the outcomes of their activity
- 3.3.4 Consult with colleagues and share information appropriately, respecting confidentiality, in line with individuals' interests and needs.

3.3 Members work effectively with others

Members

- 3.4.1 Collaborate with colleagues within and across settings, sectors and professions in the best interests of service users
 - 3.4.2 Respect colleagues' perspectives and contribution
 - 3.4.3 Promote and maintain a safe, positive and healthy working environment
 - 3.4.4 Support and enable others to work within their individual scope of practice
 - 3.4.5 Use all available information and evidence when assessing risk, both to themselves and others.
-

4 CSP members strive to achieve excellence

4.1 Members seek to improve continuously

Members

- 4.1.1 Maintain, promote and support high standards of physiotherapy in ways that are appropriate to their role
- 4.1.2 Evaluate the relevance of new developments, research findings and evidence and measures of effectiveness and apply them appropriately to their physiotherapy activity
- 4.1.3 Critically reflect upon and evaluate their own practice
- 4.1.4 Identify their own development needs and take appropriate action to address these
- 4.1.5 Enhance their knowledge, understanding and skills, in response to individual, service and practice needs.

4.2 Members demonstrate innovation and leadership

Members

- 4.2.1 Transfer and apply their knowledge and skills to different situations and settings
- 4.2.2 Respond appropriately to new and changing needs
- 4.2.3 Seek to demonstrate the value of services and to improve service delivery
- 4.2.4 Demonstrate leadership appropriate to their role.
- 4.2.5 Contribute to cycles of evaluation, reflection and improvement.

4.3 Members support others' learning and development

Members

- 4.3.1 Contribute to creating a learning environment and culture in ways that are appropriate to their role
- 4.3.2 Share their own learning appropriately with others
- 4.3.3 Facilitate and support others' learning and development in ways that are appropriate to their role, including by providing learning opportunities.

4.4 Members support the development of physiotherapy

Members

- 4.4.1 Contribute to the development of physiotherapy, including by enhancing its evidence base and implementing this in practice
- 4.4.2 Recognise and take appropriate action where personal practice is potentially pushing the boundaries of the scope of physiotherapy practice in the UK
- 4.4.3 Evaluate factors affecting the development of physiotherapy, acting appropriately by changing their own practice and/or supporting and leading colleagues.

Explanation of core professional concepts

This appendix provides an explanation of the concepts that underpin the Code. Where a concept cross-references to another, this is highlighted by emboldened text.

Competence

Competence is the synthesis of knowledge, skills, values, behaviours and attributes that enables members to work safely, effectively and legally within their particular scope of practice at any point in time. It involves awareness of the limits of personal practice and the practice of the profession and depends on members engaging in individualised, structured, career-long learning to meet their identified development needs.

Competence changes as members progress through their career, with their competence developing and deepening in some areas and diminishing in others. It relates to members' particular scope of practice at any particular point in time within the broad scope of the practice of physiotherapy in the UK. Given its individual and evolving nature, members' competence cannot be defined simply or prescriptively.

Maintaining and developing competence hinges on members undertaking continuing professional development [CPD]. The CSP expects members' CPD to be based on a process of reflection, planning and evaluation, through which members' learning and development needs are identified, members pursue learning to address these, and members apply and reflect on their new learning within their physiotherapy activity.

As HPC registrants, practising qualified members are required to fulfil the statutory regulator's requirements for CPD.

Person-centred practice

Person-centred practice is an approach to health care within which the goals, expectations, preferences, capacity and needs of individuals (patients/clients/service users) and their carers form the focus of all activity. All planning, decision-making, activity and evaluation are undertaken with this focus.

Person-centred practice hinges on members' genuine collaboration with individuals and their carers, with full consideration given to their needs and with demonstrable sensitivity to issues of communication, confidentiality and valid consent.

Examples of person-centred practice include

- Ensuring that an individual's perspective is listened to and reflected at all points
- Ensuring that an individual is fully involved in planning, engaging and evaluating their experience and the outcomes of physiotherapy
- Actively seeking user involvement to inform how a service is developed and delivered to maximise its effectiveness
- Acknowledging and understanding that, at times, the view of an individual may conflict with the view of a member, the profession or the organisation within which a service is being delivered.

Professional autonomy

Professional autonomy is the application of the principle of autonomy whereby a member makes decisions and acts independently within a professional context and is responsible and accountable for their decisions and actions.

A key element of professional autonomy is understanding and working within the limits of personal competence and scope of practice. Members are responsible for seeking advice and guidance from others through appropriate forms of professional supervision and mentorship to inform their decision-making and action.

Neither CSP student nor associate members hold professional autonomy in their physiotherapy-related activity. Both groups of members undertake their activity with appropriate forms of supervision.

Physiotherapy students are prepared to assume the responsibilities of professional autonomy on qualification through their qualifying education. This includes developing the knowledge, skills, understanding and attributes necessary to accept this responsibility, and developing an understanding that they must undertake physiotherapy activity within the limits of their personal competence and scope of practice.

While not autonomous practitioners, associate members take responsibility for undertaking the tasks delegated to them within their physiotherapy activity.

Professionalism

Professionalism defines what is expected of a professional, and what it means to be professional. Broadly, it can be summarised as

- A motivation to deliver a service to others
- Adhering to a moral and ethical code of practice
- Striving for excellence, maintaining an awareness of limitations and scope of practice
- A commitment to empowering others (rather than seeking to protect professional knowledge and skills).

A profession that fulfils these expectations establishes and maintains its credibility with the public and demonstrates its capacity to carry the privileges of professional practice – autonomy and self-regulation. In turn, fulfilment of these expectations demonstrates a profession's ability to fulfil the parallel responsibilities of professional practice - accountability, transparency and openness.

Professionalism recognises that professional activity

- Has strong ethical dimensions
- Is complex and diverse, constantly changing, and uncertain and unpredictable
- Cannot be defined simply in terms of possessing and implementing a fixed body of knowledge and skill
- Cannot be undertaken in isolation
- Depends on engaging in career-long learning and adapting and developing activity accordingly
- Requires the member to cope with the non-routine, unknown and incomplete, and potentially conflicting, information.

A key element of physiotherapy students' preparation for practice on qualification is their being supported in developing their understanding of, and engagement with, the responsibilities and privileges that professionalism encapsulates.

The concept of professionalism also relates strongly to the physiotherapy activity of associate members.

Scope of Practice

Scope of practice relates strongly to competence and professionalism. It describes both the collective activity of the profession and the activity of individual members.

The concept recognises the following:

- The profession's scope of practice is evolving, and needs to evolve, in line with changing patient and population needs, developments in the evidence base, changes in service design and delivery and changing opportunities for professional and career development
- Practice includes a diversity of activity that is shaped by the collective, shared principles and thinking of the profession
- Individual members have a responsibility to limit their activity to those areas in which they have established and maintained their competence
- Individual members need to evaluate and reflect on their personal activity, taking account of the profession's evolving evidence base and responding appropriately to their learning and development needs
- Individual members' competence changes and shifts as they progress through their physiotherapy career
- Individual members have a responsibility to be aware of how their practice may challenge the boundaries of the scope of practice of UK physiotherapy and to take appropriate action.

As the UK professional body for physiotherapy, the CSP is the guardian of the profession's body of knowledge and skills. It therefore defines scope of practice for physiotherapy in the UK.

Glossary of key terms

The intended meaning of terms used within the Code are explained below.

Accountability – taking responsibility for, and accepting the consequences of, a personal decision or action

Advocacy – acting on behalf, and in the best interests, of an individual or group of individuals with the intention of having a positive influence on a decision or action affecting that individual or group

Altruism – a concern for others, with personal actions motivated by a desire to help others above anything else, without considering recognition or reward

Autonomy – the ability to make decisions and act independently (for an explanation of professional autonomy, see Appendix A)

Beneficence – a fundamental ethical concept of ‘doing good’ and ‘avoiding evil’

Client – a person in receipt of a service; where the term uses ‘individual’ or ‘client’, this should be interpreted to include any other responsible person such as a carer, parent or guardian, as appropriate to circumstances; in the case of animal physiotherapy, the term may be interpreted to mean an animal and its owner/carer

Compassion – a human emotion initiated by the experiences or suffering of others and leading to a desire to alleviate their suffering

Competence – see Appendix A

Conflict of interest – a clash between a professional or public obligation and a personal need or interest

Continuing professional development (CPD) – a wide range of learning activities through which members’ abilities are maintained and developed throughout their career to ensure the capacity to practise safely, effectively and legally within an evolving scope of practice (including, in the case of qualified, practising members, fulfilment of the CPD requirements of the Health Professions Council [HPC])

CSP member – a person who is a member of the CSP in one of the following categories: as a qualified (chartered) physiotherapist, physiotherapy student, or associate (as a physiotherapy support worker)

CSP membership – open to physiotherapists who hold registration with the Health Professions Council (HPC) and are therefore eligible to practise physiotherapy in the UK, physiotherapy students, and physiotherapy support workers; physiotherapists who have been eligible for HPC registration but who have retired, are taking a career break, or who reside/work outside the UK may also be members, as may physiotherapists who practise on animals

Delegation – the process through which one person allocates work to another person on the basis of deeming that individual competent to undertake that task, with the delegated individual then carrying responsibility for undertaking the delegated task

Dignity – an individual being respected and esteemed

Duty of care – the responsibility held by members to ensure that their decisions and actions are in the interests of the individuals receiving or affected by physiotherapy services that they deliver

Empowerment – the process of giving someone power or authority over a decision or action

Ethics – issues of correct conduct informed by moral principles

Evidence – different forms of valid and relevant information that are used to underpin decision-making; and action that are often, but not exclusively, the outcome of research activity; evidence may support, refute or identify the need for further enquiry regarding the safety, effectiveness and efficacy of a method of service delivery, a management approach, a treatment or a modality

Fairness – reasonable behaviour that is motivated by a consideration of the needs of others and the delivery of services equitably

Health Professions Council [HPC] – the statutory regulatory body for the allied health professions [AHPs], formed in 2002 (as the successor to the Council for Professions Supplementary to Medicine [CPSM])

Honesty – acting with integrity and adhering to known facts

Individual – a person receiving a service from a CSP member (as a patient or client, or as the carer of a patient or client), or a person who is affected by a CSP member's delivery of a service; e.g. deriving from research, education or management activity

Integrity – adherence to moral and ethical principles; having sound moral character; acting with honesty

Leadership – an act or instance of providing guidance or direction

Morals – personal, societal or cultural values or codes of conduct

Non-discriminatory – treating individuals and groups fairly and without prejudice

Non-maleficence – a basic moral duty that individuals should do no physical or mental harm or damage to another person

Non-oppressive – ensuring a position of authority or power is not exercised in arbitrary, unjust ways

Organisation – the structure(s) within which a member undertakes his or her physiotherapy activity, within the public, private, independent and third sectors

Person-centred practice – see Appendix A

Principle – the foundation for members' actions

Professional autonomy – see Appendix A

Professional judgment – the ability to form valuable opinions and make good decisions within a professional framework

Professionalism – see Appendix A

Reasoning – the ability to make logical inferences from available information

Service user – an individual or individuals in receipt of a service from a member

Scope of practice – see Appendix A

Valid consent – an individual being in receipt of sufficient knowledge of all relevant facts and factors to agree to, or refuse, a particular course of action

Value – the importance or worth of something (an outcome, intervention or service) for an individual

Values – ideals that individuals or a profession find morally compelling.

Mapping the Code against HPC and other CSP resources

This table presents the relationship between the Code and HPC standards and guidance current at the time of publication.

Many statements support or reflect the content of a number of the principles and are therefore repeated. Where a number is in brackets, this indicates that it partly relates to one of the Code's principles.

		HPC Standards of conduct, performance and ethics	HPC Standards of Proficiency Physiotherapists	HPC Guidance on conduct and ethics for students	HPC Standards for continuing professional development
Principle 1 – CSP members take responsibility for their actions					
1.1	Demonstrate appropriate professional autonomy and accountability	(1) (6) (7) (12) (13) 8	1a. 5 1a.6 1b.1 1b.3 1b.4 2b.2 2b.3 2b.4	7	
1.2	Act within their individual scope of practice	(4) 5 6 12	1a.1 1a.5 1a.6 1a.8 2a.2 2a.3 2b.1 2b.4 3a.1	5 6 7	3 4
1.3	Make informed decisions	(7) 11	1a.8 2a.4 2c.1 3a.1 3a.3	1	
Principle 2 – CSP members behave ethically					
2.1	Adhere to legal, regulatory and ethical requirements	2 4 10	1a.1 1a.3 2a.1 2b.5	2 4 10	1 2 5
2.2	Act with integrity, honesty and openness	3 10 (12) 13 14	1a.1 1a.2 1a.6 1a.8 1b.3 1b.4	3 13	
2.3	Engage with relevant professional and social contexts	(12) 13	1a.2 1a.6 1a.7 1a.8 3a.2	1 13	

Principle 3 – CSP members deliver an effective service					
3.1	Put the needs of service users at the centre of their decision-making	(3)	1a.1 1a.2 1b.3 2b.3 3a.2	1	
3.2	Respect and support individuals' autonomy	(1) 9 (10)	1a.4 1b.1 1b.2	9	
3.3	Communicate effectively	(2) 7 10	1a.2 1a.7 1b.1 1b.3 1b.4 2b.5	8 (12)	
3.4	Work effectively with others	6 (7) 11	2a.1 2b.2 2b.4 2b.5 2c.25	11	
Principle 4 – CSP members strive to achieve excellence					
4.1	Seek to improve continuously	(5)	2b.1 2b.2 2c.2	6 7	3 4
4.2	Demonstrate innovation and leadership	5	1a.7 2b.1 2b.3 2b.4 2c.1 3a.2		3 4
4.3	Support others' learning and development	6 8	1b.1 2b.1 3a.1		3 4

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