



Rehabilitation Workers Professional Network Code of Ethics and Professional Conduct

The Rehabilitation Workers' Professional Network (RWPN) is the professional body for Vision Rehabilitation Workers and Habilitation Specialists in the United Kingdom of Great Britain and Northern Ireland, and in the Republic of Ireland.

The RWPN code of Ethics and Professional Conduct has been written and produced for Vision Rehabilitation Workers and Habilitation Specialists who are practising across these countries and are registrants on RWPN's professional register. Acknowledgement is given to the Welsh Rehabilitation Officer Forum who wrote the original version of this document in relation to those professionals solely practising in Wales.

The titles of Vision Rehabilitation Worker or Habilitation Specialist are not, at this time, protected titles. However, it is an objective of RWPN that they should be protected titles. RWPN believes the title should only be used by those who have qualified through an approved course. The qualifications accepted by RWPN are stated in our constitution.

Exact employment titles vary throughout the United Kingdom and the Republic of Ireland. The titles "Vision Rehabilitation Worker" "Rehabilitation Worker, Visual Impairment" "Habilitation Specialist" and "Rehabilitation Officer, Visual Impairment" are the most frequently used titles. The title "Vision Rehabilitation Worker" will be used henceforth throughout this document for brevity.

It is the duty of all RWPN registrants to fulfill their duties with regard to the professions' principled obligations as written here, and that members of the profession are afforded the professional rights, as necessary, to actively promote and meet the needs of all visually impaired service users.

The objective of this Code is to provide guidance and expression to the values and principles that are fundamental to the profession. It is a public statement of the profession's moral governance. Its use is intended to promote and maintain the highest standards of professional conduct. This code should be used in conjunction with all reasonable policies and procedures within their employing organisation.

The Code of Ethics and Professional Conduct requires that all Vision Rehabilitation Workers and Habilitation Specialists (hereafter known as

registrants) discharge their duties responsibly in a professional and ethical way. If any uncertainty as to the interpretation or application of this Code of Ethics and Professional Conduct should arise, enquiry should, in first instance, be made to the committee of RWPN.

Rehabilitation Workers Professional Network Professional Values

- 1.Integrity & Conduct
- 2.Competence
- 3.Responsibility & Respect
- 4.Confidentiality & Recording
- 5.Equality & Inclusion
- 6.Consent

1. Integrity & Conduct

The registrant has a duty:

- 1.1 To be able to account for their actions in practice in accordance with the values and principles of the RWPN Codes of Ethics and Professional Conduct
- 1.2 To meet the highest standards of personal integrity and not engage in any criminal or unlawful behaviour
- 1.3 To behave with dignity and respect
- 1.4 To dress appropriately for the workplace setting and activity and in accordance to health and safety requirements
- 1.5 To take appropriate action if ill health or any other factor is likely to interfere with their ability to maintain professional judgment or wellbeing during working hours
- 1.6 To maintain their emotional and physical wellbeing and autonomy in professional judgment and decision making
- 1.7 To abide by employer policy and requirements for lone working
- 1.8 To take responsibility and care of their own safety and ensure that there is an effective diary / paper trail of planned diary activities, times and whereabouts and anticipated time for return to office/ safe location
- 1.9 To not participate in any professional activities whatsoever under the influence of alcohol, drugs or other toxic substances
- 1.10 To not encourage others in the misuse of alcohol, drugs or other toxic substances
- 1.11 To not engage in conduct in private or professional life that may be deemed as compromising to the fulfillment of their professional duty or responsibility
- 1.12 To be honest about their qualifications and experience within their work
- 1.13 To be honest about their competence and achievements within their work.
- 1.14 To be honest about their employment history
- 1.15 To be open regarding their affiliations
- 1.16 To avoid engagement in discussions and behaviors that could be deemed damaging to the integrity of the profession

- 1.17 To clarify, when making public statements, the individual's capacity in speaking e.g. whether views expressed are personal opinion, or as representatives of the Rehabilitation Worker profession
- 1.18 To protect the integrity of the profession and their employing organisation, but on witnessing malpractice or unprofessional conduct on no account remain silent about it
- 1.19 To give due care to protect reputations of others when expression of criticism are made by third parties
- 1.20 To give considered responses when requested to provide second opinions. In such circumstances they should confine comment to the issue in question, with care not to question the competence of the initial professional
- 1.21 To adhere to all their employing organisation's policies
- 1.22 To work with careful observation and regard to policies of discrimination, harassment and bullying
- 1.23 To observe and work to promote the rights, abilities and independent choices of visually impaired service users before personal aims, views or advantage
- 1.24 To promote equality, dignity, independence, wellbeing, rights, identity and abilities of others
- 1.25 To fulfill their duty of care by carefully evaluating service user right to choice, with that of professional judgment in relation to potential risks of harm to service user, self or other
- 1.26 To maintain their professional duty and accountability in all areas of decision-making, skills teaching and recording
- 1.27 To not use their professional relationships for personal, material or financial gain
- 1.28 To respect the choices, beliefs, values, culture, goals, needs, preferences, relationships and affiliations of all others, and work without prejudice
- 1.29 To reduce the risk of conflict, exploitation or harm in all professional relationships by setting and maintaining appropriate boundaries
- 1.30 To avoid any activity or behaviour which violates professional boundaries, or causes harm or damage to professional relationships. This would include intimate or sexual contact with both previous and current service users, carers or family or with others directly involved in a professional relationship where authority held over another individual could deem intimacy as a form of exploitation
- 1.31 To avoid activities of organisational fundraising, particularly where service users willingness to donate can be deemed as unethically influenced e.g. where access to services or use of resources could be perceived to be dependent on their donation
- 1.32 To not accept gifts or hospitality from service users or other where it could be construed as seeking to obtain preferential treatment
- 1.33 To declare all tokens of gratitude given by service users and be guided by employing organisation policy regarding the receiving of token gifts and bequests

2. Competence

The registrant has a duty:

- 2.1 To recognize, develop, demonstrate and disseminate awareness, knowledge, skills and theories within their rehabilitative practice
- 2.2 To invest in their ongoing self improvement to enhance competence in practice
- 2.3 To remain reflective in their practice and make appropriate adjustments to improve and develop knowledge and skills
- 2.4 To expand their practitioner skills by engaging in new concepts, methodologies and theories within rehabilitative practice
- 2.5 To recognize their own boundaries and limitations of professional competence. Advise service users and action referrals to appropriate professionals/services where needs fall outside of their expertise
- 2.6 To embrace change and constructively engage with new approaches to service delivery
- 2.7 To engage in a variety of workplace and specialist continuous professional development
- 2.8 To understand the terms and purpose of supervision, both managerial and technical, and actively participate in the supervision process
- 2.9 To advocate for professional supervision at regular intervals from a senior rehabilitation officer or other appropriate professional
- 2.10 To reflect on the nature and causes of vision loss and rehabilitation needs and on ways of addressing them
- 2.11 To reflect on society and its response and impact on those experiencing vision loss and consider ways of addressing this
- 2.12 To engage in facilitating awareness raising of sight loss, and contribute to research and information request projects to improve awareness and understanding of sight loss prevalence, trends and outcomes
- 2.13 To contribute to the education and training of colleagues and students
- 2.14 To contribute to the development and implementation of policies appropriate to services for people with visual impairment
- 2.15 To contribute to promoting culturally inclusive services
- 2.16 To observe health and safety legislation in their practice
- 2.17 To observe safety of self, service users and others at all times during rehabilitative input and skills teaching

3. Responsibility & Respect

Responsibilities to the profession

Registrants have a duty, in both their private and professional life, to avoid any behaviour or activity that is likely to bring the profession into disrepute or to cause embarrassment to the profession at large.

Conflicts of interest

Registrants will acknowledge any conflicts of interest that may arise that compromise their ability to exercise and express professional judgment. Where conflicts of interest arise, the registrant must take appropriate action to declare it and to proceed in a manner that is equitable and ensures the professional duties are not prejudiced.

Workplace responsibility

The registrant has a duty:

- To engage in the stated duties of their employing organisation, provided that they are consistent with the RWPN's Code of Ethics and Professional Conduct
- To ensure that their employers are aware of this Code and look where appropriate to advocate working conditions and policies which reflect its guidance for Rehabilitation Workers
- To observe the values and content of this Code when attempting to resolve conflicts between ethical principles and employing organisations policies and practices
- To refer to and use as guidance this Code, particularly when engaging in activities to improve services or working conditions for the profession
- To familiarise themselves and comply accordingly with all appropriate work place policies and procedures, including those for grievance, whistle-blowing on misconduct, incompetence, unethical behavior or negligence by a colleague

3.1. Receiving & Responding to Referrals.

3.1.1 To respond effectively and efficiently to service enquiries. Giving clear regard to their employing organisation's policy and procedure regarding criteria prior to accepting referrals

3.1.2 To redirect to other service and support providers when enquiries do not meet criteria

3.1.3 To work in a manner that meets the employing organisation's obligation to timescales for responding, delivering and completing service provision

3.1.4 To recognize, respond and discharge appropriately professional responsibilities

3.1.5 To clearly define their own core skills and role, and ensure at all times that they are not taking on work, which could be deemed outside their role or competence

3.1.6 To only provide services and use techniques in which they are professionally qualified and skilled by educational training and experience. Skills, and techniques used within the role must be within the professional competence

3.1.7 To gain additional training, either through self directed learning or other relevant training, when working in unfamiliar areas of visual impairment rehabilitation service beyond that of their existing experience and knowledge base

3.1.8 To make effective use of the organisation's resources, with regard to policy, efficiency and financial implications

3.1.9 To manage, adhering to criteria and local policy, and safeguard from internal loss, theft, misuse, any specialist equipment and teaching resources intended for use with, or provision to, service users

3.1.10 To acknowledge and respect the responsibilities, practices and roles of other professionals and organisations that contribute to the holistic wellbeing of service users and specifically offer services within the visual impairment sector

3.1.11 To be responsible for the rehabilitation plan and input of an individual service user. Where the situation arises that two registrants are working with the same service user, to work in close collaboration and agree where boundaries and responsibilities lie for the rehabilitation plan. The service user must be made aware of these boundaries and responsibilities

3.1.12 To recognize the need for multi-professional and agency collaborative working is required to ensure efficient coordination of services.

3.2 Contribution

3.2.1 To constructively engage in discussion and work to improve policies, procedures, practices and service provisions which are not in the best interests of service users

3.2.2 To highlight areas of service or practice that may be considered to be inequitable or discriminatory, oppressive, disempowering or culturally inappropriate to service users, carers, family, groups or professionals within the service provision

3.2.3 To actively consult with organisations where policies or procedures of employers contravene professional standards, and to initiate a dialogue for advising and implementing change

3.2.4 To recognize and challenge all demonstrations discriminatory practice amongst colleagues

3.3 Responsibilities to Service Users

3.3.1 To not behave in such a way that causes unnecessary emotional or physical distress. This includes negligent responses to needs, indifference to the various emotional impacts of sight loss and the rehabilitation process and physical discomfort or pain

3.3.2 To respond to presenting emotions of service users appropriately. Not to leave a service user in distress after intervention

3.3.3 To exercise professional duty of care at all times and protect service users from harm, avoidable injury or accident

- 3.3.4 To recognise and respond appropriately to protect service users identified as vulnerable and/or at risk
- 3.3.5 To be familiar with the employer's safeguarding policy and procedures, and develop competence and confidence in identifying and applying them in practice
- 3.3.6 To maintain concern and responsibility for upholding the interests of individual service users, even in circumstance where forced to withdraw direct involvement in order to protect self or others
- 3.3.7 To be "client centered" and work to maintain or regain the autonomy of the service user in all aspects of their eye care and rehabilitation
- 3.3.8 To respect service user's individual beliefs and views without personal prejudice
- 3.3.9 To maintain an informed "needs led" approach to service provision
- 3.3.10 To provide service users with information about their rights in relation to service provision
- 3.3.11 To provide service users with the information they need to make choices
- 3.3.12 To support service users to make informed choices and decisions about their lives and promote their autonomy, independence and functionality.
- 3.3.13 To support and enable service users to identify and satisfy realistic and achievable goals, whilst taking into consideration and appropriately responding to the interests of relevant others e.g. family and carers
- 3.3.14 To explain and provide information on the nature and purpose and likely effect of intervention that contributes to the individuals rehabilitation plan
- 3.3.15 To uphold and promote the best interests of service users with due regard to the interests of others
- 3.3.16 To use professional judgment to evaluate risks and seek professional guidance whenever doubts arise
- 3.3.17 To advise service users of the professional's responsibility to override the interests of the service user in situations where they are outweighed by the need to protect the service user and /or others or in response to a legal requirement
- 3.3.18 To uphold and promote the rights of service users whenever possible
- 3.3.19 To assess rehabilitation needs, teach and deliver skills training in a manner that is structured and planned, that maintains goal focus and needs led
- 3.3.20 To identify where compensatory skills development remains functionally limiting and therefore where assistive equipment should be incorporated into the rehabilitation plan to assist individual service users remain independent
- 3.3.21 To give service users the opportunity to decline services or exercise refusal at all stages of rehabilitation input, if service is declined/lesson terminated by service user, this shall be respected
- 3.3.22 To ensure that services are offered and delivered in a culturally appropriate manner
- 3.3.23 To provide service users with information about their right to complain, and ensure that they have any support they may require in making complaints
- 3.3.24 To maximise opportunity for service user participation in decisions about their lives when impairment or ill-health requires the registrant to advocate on their behalf

3.3.25 To maximise opportunity for service users to participate in all areas of decision-making regarding their own circumstances by advocating and ensuring information is provided in the individual's preferred accessible format

3.3.26 To advocate that service user's views are sought to contribute to developments in practice and policy development and in the evaluation of services

3.3.27 To consult with service users to accurately and objectively advocate and raise awareness of visual impairment issues

3.4 Responsibilities in Management

A registrant in management will observe the following specific, additional duties:

3.4.1 To work for the recognition and acceptance by employers and employees of the values and principles and requirements of the RWPN Code of Ethics and Professional Conduct

3.4.2 To promote policies and practices and advocate for resources to meet visually impaired service users' needs

3.4.3 To enable the provision of an efficient and accountable rehabilitation service

3.4.4 To ensure employment of appropriately qualified Vision Rehabilitation Worker and Habilitation Specialist staff

3.4.5 To ensure, as far as possible, that employers recognise the specialism of Vision Rehabilitation Worker and Habilitation Specialist and do not subject staff to unreasonable demands and expectations beyond their specialism

3.4.6 To maintain adequate staff levels, acceptable working conditions and a safe working environment for staff

3.4.7 To promote a strong supportive team with efficient teamwork and communication

3.4.8 To arrange/provide appropriate professional managerial and technical supervision opportunities for all Vision Rehabilitation Workers and Habilitation Specialists

3.4.9 To demonstrate leadership and court confidence from staff and others

3.4.10 To ensure that staff have equality of opportunity to attend training courses and are supported to identify and attain developmental aspirations

3.4.11 To recognise individual duty of care to staff, treat workers fairly and without discrimination or bias, and provide appropriate support and protection for staff who may be vulnerable to experiencing difficulty within the workplace e.g. as an outcome of complaints policy protocols etc.

3.5 Responsibilities in Education and Supervising and Delegating

In applying the general provisions of the RWPN those registrants who are engaged in education, student placement, training, or supervision will observe the additional specific ethical duties:

3.5.1 To possess and maintain the recognised qualifications required to practice, and additional training to support appropriate skill and levels of competence for the role.

- 3.5.2 To maintain and continue to develop knowledge, skills and methodology fundamental to the Vision Rehabilitation Worker/Habilitation Specialist role.
- 3.5.3 To establish and maintain professional relationships which are constructive, transparent and non-exploitative.

3.6 Placement and Workplace Supervisor

- 3.6.1 To gain a clear understanding of the roles and responsibilities of both the supervisor, the student and the educational institution when accepting a student for practice placement
- 3.6.2 To transfer awareness to students and supervisees comprehensive knowledge and competence in the reasoning and methodology of rehabilitative practice and issues of visual impairment.
- 3.6.3 To demonstrate and share comprehensive knowledge of the profession's role and specialism within the visual impairment world and its variants or remit within various workplace environments.
- 3.6.4 To emphasize and incorporate into practice the RWPN Code of Ethics and Professional Conduct and the relevance of this knowledge to their practice.
- 3.6.5 To inform students, and where appropriate remind supervisees of their ethical responsibilities and act in accordance with the principles of the Code
- 3.6.7 To respect privacy and confidentiality in the supervisory relationship.
- 3.6.8 To evaluate the performance and competence of students and supervisees fairly and responsibly.
- 3.6.9 To recognize and demonstrate in practice that the role of supervision is work-focused, reflective, directional practice support, and educationally developmental. It is not intended as a regular source of workplace counseling support
- 3.6.10 To supervisees who present as using supervision support to discuss emotional difficulties, issues aligned with workplace stress, conflicts within work should be considered for referral on, with consent, to appropriate support through Occupational Health Departments.

3.7 Delegation

- 3.7.1 To delegate only intervention or actions where professionally satisfied that the person to whom they delegate e.g. student, carer, support worker or volunteer is competent. In all circumstances of delegation the qualified Rehabilitation Officer, Visually Impairment retains ultimate responsibility for the service user and the actions of the delegatee.

3.8 Responsibility for Self Employed & Locum Practitioners:

All registrants, including self employed and locum agency workers must observe responsibility to the RWPN Code of Ethics and Professional Conduct while working, with specific regard to the following additional ethical responsibilities.

3.8.1 Practice

- 3.8.1.1 In the case of commencement of professional registration, to register with the RWPN's professional register

- 3.8.1.2 To practice only within their areas of competence and to refer on appropriately when service users' needs fall outside them
- 3.8.1.3 To support effective information sharing and handovers of cases when employment contract expire
- 3.8.1.4 To maintain practice records in accordance with the requirements of the recruiting organisation and the Code

3.8.2 In Business

- 3.8.2.1 To resist exploitation of position of employment when soliciting for ongoing private independent employment opportunities
- 3.8.2.2 To maintain adequate professional indemnity and public liability insurance cover as appropriate to practice and provide evidence of insurance to employers
- 3.8.2.3 To prepare and provide written contracts advising service users of all costs before beginning to provide professional service. To charge only for hours and services that have been contracted and provided
- 3.8.2.4 To be accurate in advertising, avoiding misleading and sensational sales methods
- 3.8.2.5 To avoid explicit claims in respect of professional superiority, success rates, equipment and facilities

3.9 Responsibility of Engagement in Research Projects

Registrants who participate in research will observe the following specific ethical responsibilities:

3.9.1 Practice

- 3.9.1.1 Registrants will maintain professional capacity and responsibility and exercise professional judgment and accountability at all times throughout research projects
- 3.9.1.2 At all stages of the research process maintain and proceed to take practical and moral responsibility for their work, continuing to observe the ethics of this Code
- 3.9.1.3 The aims and process of rehabilitation research, methodology, interpretation and use of findings, will maintain the Code of Ethics

3.9.2 Purpose

- 3.9.2.1 Seek to engage in research which contributes to empowering, promoting, and improving experiences and outcomes for service users
- 3.9.2.2 Ensure that research is completed with competence and professionalism and demonstrates careful consideration for its methodology and execution.
- 3.9.2.3 Avoid instigating or contributing to research procedures that involve concealment in/of any form.
- 3.9.2.4 Declare and seek to exclude from their research any areas that may be perceived by others as areas of personal bias.

3.9.3 Participants

- 3.9.3.1 Communicate information regarding the research openly and fairly with all participants in the research process, e.g. service users, colleagues, and employers etc.

3.9.3.2 During research maintain concern for the physical and emotional wellbeing of any service user participants and act accordingly to ensure their wellbeing throughout the research process at all stages.

3.9.3.3 Ensure that all participants in research projects are fully informed as to the aim and nature of research and the methodology and process that the research will take

3.9.3.4 Ensure that all participants in research projects give willing consent to take part, this should be secured by a formal written agreement to the terms of participation

3.9.3.5 Recognise and declare any potential factors within research that may influence an individual's willingness to participate, particularly where access to services may be perceived to be affected by or dependent on participation. In all cases ensure participants are aware of their right to refuse to take part in or to withdraw from research. In such a circumstance of refusal or withdraw this decision shall be respected.

3.9.4 Findings

3.9.4.1 Report findings clearly and accurately.

3.9.4.2 Take steps to avoid distortion either by omission or political tempering. Accuracy in reporting findings which may reflect unfavorably on any influential body, sponsor, participant or on the researchers own interests etc should be included

3.9.4.3 Seek assurances that research findings are not misused or misrepresented

3.9.4.4 Provide due attention and acknowledgement to the contribution of all participants in a research program and never take credit for the work of others

3.9.4.5 Registrants will respect and maintain the confidentiality of all data or information produced in the course of their research, except as agreed in advance with participants or where required by law.

4. Equality and Inclusion

In practice registrants have a duty:

4.1 To promote a fair and equitable distribution of equipment and resources with adherence to organisational eligibility and assessment criteria.

4.2 To promote access to public services and referral to benefit advice appropriate to visual impairment and other identified need

4.3 To promote the achievements for service users when provided with early intervention and access to appropriate eye care and rehabilitative service provision

4.4 To observe the rights and duties of individuals, families, groups and communities in relation to visual impairment service

4.5 To engage in the pursuit of equality by identifying, seeking to alleviate and advocating strategies for overcoming disadvantage to service users with visual impairment

- 4.6 To advocate for contact and correspondence to be provided and available in preferred communication formats
- 4.7 To advocate for buildings and venues utilized or promoted by service providers to meet the access needs of visually impaired people
- 4.8 To work to minimize social and structural barriers and expand choices for visually impaired people
- 4.9 To highlight and bring to the attention of those in position of influence, any policies or activities that introduce or contribute to the disadvantage or exclusion of people with visual impairment in our society
- 4.10 To promote policies, practices and social conditions which uphold all human rights, and which seek to ensure access, equity and participation for all
- 4.11 To promote the inclusion of service users in any decision making that will affect them individually
- 4.12 To promote organisational consultation with visually impaired service users to establish clear understanding of their ideals, needs, aspirations
- 4.13 To promote the right to live in an inclusive society with equal access to community services and resources
- 4.14 To ensure practice is equitable and that they do not act out of prejudice against any person or group on the basis of ethnicity, class, status, sex, sexual orientation, age, disability or beliefs etc.

Ethnicity and Culture:

- 4.15 To recognise and respect ethnic and cultural diversity, and promote policies, procedures and practices that respond to diverse and individual needs.
- 4.16 To recognise diversity within society and amongst different ethnic and cultural groups
- 4.17 To consult and promote the inclusion of service users of differing ethnicity and cultural groups to making contribution to service planning, policy and procedure
- 4.18 To always consider and work towards identifying appropriate service provisions that are sensitive and meet ethnic and cultural needs
- 4.19 To gain awareness of service users ethnic and cultural identities and the values, beliefs and customs, which are normally attributed, understanding that these may vary amongst individuals
- 4.20 To acknowledge the significances of their own ethnicity and culture, and its potential impact during professional practice
- 4.21 To arrange, where desired for communication with service users, in their first language, and by an accessible format, which they can understand
- 4.22 To arrange independent, qualified interpreter services as appropriate to need and refrain from reliance on service user family, friends, carer interpreting where bias /misrepresentation could be deemed a risk
- 4.23 To support policies and practices that promote equality and aim to assist individuals, families, groups and communities in the pursuit and achievement of access to services and resources that enhance visual, emotional and functional wellbeing, independence and safety

4.24 To promote access to independent advocacy support for service users seeking to resolve issues where there are conflicts of interest or issues fall outside of professional role

5. Consent

Registrants have a duty:

5.1 To ensure service users' are equipped with necessary information to make informed decisions, and ensure that service users and carers participate in decision-making processes and consent to service delivery outcomes

5.2 To not engage in direct service provision or information sharing without the informed consent of service users, other than in situations where it is deemed necessary to act without consent to protect the service user or others from harm

5.3 To recognise when service users' capacity to give informed consent is restricted or absent. In such circumstance registrants will, as far as possible, seek to gain insight into the service user's individual preferences and choices before offering or participating in any visual impairment rehabilitative or habilitative provision

5.4 When working with children, to ascertain and respect the child's wishes and feelings, with careful consideration to the child's level of maturity and understanding

5.5 To assist people using services to maintain as much autonomy as possible. This will be supported by provision of factual information as to service options and outcomes whilst upholding the rights of individual choice. Information should be provided in a format and/or communication method that optimises service user understanding and encourages them to participate in decision-making

5.6 To inform service users of their rights to services and any limitations that have been made to this

5.7 To advise service users of any requirements to share information about them with others

5.8 To recognize the potential impact of their own presence and contribution to service user circumstance

6. Confidentiality and Recording

Registrants have a duty:

6.1 To maintain professional responsibility and respect for service user privacy, and maintain confidentiality with information and knowledge gained from and regarding service users

6.2 To recognise that information initially obtained for one purpose, must have permission sought before sharing for a different purpose

6.3 To clarify with service users, organisational information sharing protocols with regard to the storing and sharing of the information that individuals may provide about themselves

6.4 To acknowledge if there are any service user preferences or restrictions in relation to the sharing of information about them

6.5 To only disclose information shared with the recorded consent of the service user. Exception must only be made where there is legal justification (by statute or court order) or evidence presented of serious risk to the service user or others. In these circumstances disclosure must be given due care and consideration in consultation within professional supervision with the decision-making process recorded, and disclosure limited and not to go beyond the needs of the presenting situation

6.6 To not engage in third party discussion with family, carers, and support staff regarding service user, their diagnosis treatment and prognosis or future requirements without specific service user consent to do so

6.7 To carefully consider, when asked to share information across professions or agencies, that appropriate measures are adhered to with reference to ethical requirements in respect of permission, privacy and confidentiality

6.1.0Recording

6.1.1 To advise service user of confidentiality policy and protocols prior to gathering any recordable information

6.1.2 To ensure service users are aware of their access rights to information held and recorded about them. Service users have a right of access to all information recorded and stored in relation to them. Restrictions to viewing information held are only applied where it is appropriate for the preservation of the rights of others to privacy and confidentiality

6.1.3 To store information on service users securely, and protect from unauthorized access. Employ procedures to ensure due care and attention to management and handling of confidential information

6.1.4 To protect and, with close adherence to policy and procedure, make confidential recordings available only to those who have legal or justifiable right to see them

6.1.5 To record information within the required timescales of the employing organisation

6.1.6 To record using tools, formats, policy and systems as set by employing organisation

6.1.7 To maintain written records of case-work activity that provide accurate and succinct reflections on all contact with individual service users

6.1.8 To record specific, relevant information

6.1.9 To record and highlight for the attention of other workers any hazards and risk, in connection with individual service users, others involved, or environmental risk factors

6.1.10 To record names of persons present and/or contributing to contact

6.1.11 To record the completed assessment of need, and provide a copy to the service user in a format of their choice

6.1.12 To draw up and agree outcome objectives from the assessment for rehabilitative input, and provide a copy to the service user in a format of their choice. Store original as required by employing organisation

6.1.13 To devise, record and agree individual “rehabilitation/habilitation plans” with service users. Plans should outline rehabilitation/habilitation aims and objectives and how they will be met. Plans should include an estimation of the frequency of intervention and timescales for the commencement and completion of input. A copy of the plan should be provided to the service user in a format of their choice and the original stored as required by employing organisation policy.

6.1.14 To record and bring to the attention of service users any areas of unmet need and assist to find alternative options, service providers

6.1.15 To record the rehabilitation/habilitation objectives that need to be achieved in order for a service user to satisfy a safe and effective level of independent function. The registrant remains accountable for service user’s safety and skill acquisition throughout individual rehabilitative interventions. On the completion of rehabilitative input they should record the level of skill attained and their professional judgment as the success of skill transfer and service user ability. Where skills fail to be transferred or develop to a minimum level of safe practice this must be voiced to the service user and recommendation made towards exploring alternative strategies. Both successful and non-successful outcomes must be recorded.

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