Occupational Therapy Association of South Africa
Code of Ethics and Professional Conduct (revised July 2005)

Preamble
This Code of Ethics and Professional Conduct is compiled by the Occupational
Therapy Association of South Africa for its members. Its provisions apply equally to
registered occupational therapists, occupational therapy auxiliaries, occupational
therapy technicians and students in each of these categories.

South African occupational therapy personnel live and work in a society characterised
by a diversity of cultures, value systems and a disparity of socio-economic situations.
We need to practise occupational therapy within an environment of rapid change and
technological development, as well as the emergence of a human rights culture within
a society fraught with poverty, HIV/AIDS, limited access to health and welfare services
and a serious limitation of health and social resources.

As registered practitioners we have the right and privilege to practise our professions.
This however confers many duties and obligations on us towards the public in general
and our patients/clients specifically; we all must at all times strive to contribute to the
betterment of society.

Occupational therapy personnel should exhibit core ethical and professional values and
standards, as these are fundamental to the maintenance of good professional practice.
These values include, but are not exclusive to, a positive regard to and respect for
persons, honesty, empathy, trustworthiness, compassion, tolerance, a strong sense of
justice and duty, but above all, unquestionable professional integrity.

Introduction
The Occupational Therapy Association of South Africa (OTASA) Code has been
revised with cognisance of the Code of the World Federation of Occupational
Therapists (WFOT) and has drawn heavily on the provisions of the Codes of the British
Association of Occupational Therapy (BAOT) and the American Occupational Therapy
Association (AOTA) and the Health Professions Council of South Africa (HPCSA)
Guidelines.

The purpose of this Code is to provide a structured set of principles and values which
occupational therapy personnel at all levels shall aspire to.

These principles and values require a life long effort to act in an ethical manner, they
also provide a standard and resource for professional behaviour in occupational
therapy and are used to set and maintain high standards of such behaviour.

This document takes cognisance of the Guidelines for Ethical Conduct of the HPCSA
as well as the Ethical and Professional Rules, as these apply to the professions
registered under the ambit of the Health Professions Act (56 of 1974) as amended.

This document is written with due respect for the supremacy of the Constitution of
South Africa and takes cognisance of the provisions of:
• Bill of Rights, Constitution of the Republic of South Africa 103 of 1996
• National Health Act 16 of 2003
• Mental Health Care Act 17 of 2002
• Patients’ Rights Charter -Department of Health
• Relevant regulations and policy documents.
This Code applies to occupational therapy personnel in all settings and roles including, but not exclusive to, roles of clinician, educator, fieldwork supervisor, manager, administrator, student, researcher, public servant or private practitioner.

The Code addresses different areas of responsibility of relevance in terms of professional behaviour. These are:
- Relationship with patients/clients
- Relationship with colleagues
- Service provision
- Personal/professional integrity
- Professional standards.

Section A - Responsibilities towards patients/clients and their care providers
- Occupational therapy personnel shall demonstrate sincere concern for the wellbeing of patients/clients and their providers and act in the best interests of the individuals/groups as the foremost consideration, at all times preventing and avoiding harm (beneficence).
- Occupational therapy services shall be provided equitably and shall not allow prejudice or discrimination toward a patient/client on the basis of race, culture, language, gender, age, sexual orientation, disability, socio-economic status, to result in an infringement of their privileges or rights. Neither personal bias nor personal favour shall be permitted to influence service delivery.
- Occupational therapy practitioners shall fulfil their duty of reasonable care to patients/clients whom they have accepted for intervention.
- Occupational therapy personnel shall respect the autonomy of the patient/client throughout all phases of the intervention process.
- Practitioners shall respect the patient’s uniqueness and right to self determination, to make choices and decisions about their own health and welfare, to refuse treatment and to seek a second opinion.
- Occupational therapy practitioners shall provide sufficient and accurate information of the nature, risks, potential outcomes, limitations of occupational therapy intervention, as well as alternate intervention options, to the patient/client to enable informed consent. The practitioner shall not withhold information or mislead the patient/client in any manner that would limit his/her autonomy. Such information will be provided in a form and language which makes it possible for the information to be useful and understood, without causing undue alarm or engendering feelings of helplessness.
- Informed consent will be obtained prior to commencing intervention. Except where authorised by a court of law or in exceptional instances, such as a child, uncommunicative or mentally ill individual, informed consent will be obtained to the extent and at the stage in which the person is able to provide such consent. Where necessary the informed consent of the parent/guardian shall be obtained.
- The dignity and privacy of the patient/client shall be respected at all times.
- Personal information about a patient/client learnt both inside or outside of the practice situation shall be kept confidential unless the patient/client gives consent, there is legal justification for disclosure or where a real risk of serious harm, injury or damage to third party/public exists.
- The occupational therapy personnel shall not deliberately cause harm to be inflicted on the patient/client. Reasonable precautions shall be taken to protect the patient (non-maleficence).
- The practitioner shall avoid any relationship or activity that may exploit the patient/client or that may be deemed to compromise professional integrity, the therapist-patient/client relationship or professional independence of the practitioner.
• Occupational therapy personnel shall not engage in or condone any behaviour or activity which inflicts unnecessary or avoidable pain, causes mental or physical distress, neglect, or exploitation of a patient/client.

Section B - Responsibilities towards colleagues
• Occupational therapy personnel shall treat colleagues and other professionals with fairness, discretion and integrity.
• Any reference to the quality of service rendered by, or the integrity of, a professional colleague will be expressed with due care to protect the reputation of the person.
• Occupational therapy personnel shall take adequate measures to discourage, prevent, expose and correct any breaches of this Code of Ethics to the appropriate authority.
• The occupational therapist shall be vicariously liable for the actions or omissions of auxiliary staff who practise under their supervision; and shall maintain ultimate responsibility for patient/client care.
• Supervision shall be provided at a level appropriate to the level of competence of the individuals for whom they have responsibility.
• Occupational therapy personnel shall respect the needs, competencies and responsibilities of other professions and groups within their working environment.

Section 4 - Responsibilities towards the community
• Occupational therapy personnel shall respect the rights of individuals and groups in the community and take due cognisance of the diverse values, cultural belief and structures within any community.
• Occupational therapy personnel shall develop policies, programmes and priorities through using processes that ensure opportunity for input from community members; decision making shall be an interactive, collective process.
• Occupational therapy personnel should advocate and work for the empowerment of disenfranchised community members and shall ensure an equitable distribution of resources.
• Occupational therapy services shall be equitable, affordable and accessible.
• Occupational therapy personnel shall make every effort to ensure that services are available and accessible to those in need.
• Occupational therapy personnel shall ensure professional competency in contributing to promotion and protection of the health and wellbeing of community members.
• Research undertaken should be socially responsible and conducted in an ethical manner with due respect of human rights. The results of such research will be accurately and openly presented, with due acknowledgement of all sources of assistance and information.

Section D - Responsibility towards the self and the profession
• Occupational therapy personnel shall demonstrate the highest standards of personal integrity; and shall not engage in criminal, unprofessional or other unlawful activity or behaviour.
• All services shall be offered in a professional manner and promoted in accordance with the ethical rules of the Health Professions Council of South Africa.
• Occupational therapy personnel shall maintain their clinical/professional independence and shall not enter into unacceptable business practices or inappropriate commercial arrangements.
• Occupational therapy personnel shall achieve and continuously maintain high standards of competence and be aware of current trends and legal issues or developments affecting their practice.
• Occupational therapy personnel shall report violations and seek redress where there are good or persuasive reasons to believe that the rights of patients/clients are being violated.

Section E - Responsibility towards statutory and professional body.
• Occupational therapy personnel shall take cognisance and abide by and uphold the ethical rules as ascribed to by the Health Professions Council of South Africa and the Professional Board for Occupational Therapy, Medical Orthotics/Prosthetics and Arts Therapy.

References
• Code of Ethics, World Federation of Occupational Therapists (as revised and adopted by WFOT council 2004, Cape Town).
• Code of Ethics of British Association of Occupational Therapists (as revised July 2000 by College of Occupational Therapists). BJOT 2001; 64(12) 612-617.
• Health Professions Council of South Africa - Medical and Dental Professions Board. General Ethical Guidelines for Doctors, Dentists and Medical Sciences. Booklet 1 2002; 1-15.
• Health Professions Act 54 of 1976 (amended). Regulations as these refer to ethical rules.
• National Health Act 61 of 2003.
• Mental Health Care Act 17 of 2002.