

## **The Shiatsu Society UK**

### **Professional Code of Conduct and Ethics (last updated June 2025)**

#### **Introduction**

All those wanting to become members of the Shiatsu Society (UK) (hereafter, *the Society*) must familiarise themselves with this Code of Ethics (available from the Society office or website) and confirm they have done so by signing the *New Membership Form*. Thereafter, as long as they remain members of the Society, they must adhere to this Code of Ethics.

The purpose of the Code is to give guidance to practitioners in relation to professional conduct. It is also designed to allow some remedy for those who may have a complaint against a member and to give the public confidence in the practice of Shiatsu as regulated by the Society.

The Society does not accept complaints where members wish to complain against other members. However, if a member is concerned about the professional conduct of another member, in their capacity as a practitioner or where it is possible they may be bringing the profession into disrepute, then this should be brought to the attention of the Ethics Director or appropriate officer of the Society. It may then be investigated and a complaint brought. In cases where a member has a personal grievance against another member, this may be reported to the Ethics Director or appropriate officer of the Society and the Society may agree to facilitate mediation between the parties.

Allegations against a member in their role as practitioner will be investigated according to the Complaints Procedure (available through the office) and will sometimes include examination by a panel. Complaints against Shiatsu Teachers registered with the Society (MRSS(t) or (T)) in their role as teachers must be taken to the relevant school. If the teacher is independent of a teaching institution, then complaints may be brought to the Society according to the Complaints Procedure.

Sanctions can be imposed on a member if an allegation is upheld. Any and all sanctions will be proportionate to the seriousness of transgression of the Code.

If you are not clear about any aspect of the Code, you must contact the designated complaints manager through the Society Office who may refer you to the Ethics Director for clarification.

There may be other issues not covered in this Code which, if made the subject of a complaint, may be considered to be within the remit of the Society's Complaints Procedure.

Where a specific piece of legislation is referred to, it is accepted that this may be superseded by subsequent legislation. Wherever possible the Society will inform you of new legislation. However, it is always your responsibility to comply with current law.

## **The Code of Conduct and Ethics**

### **1. The Interests and Wellbeing of Clients**

- a. You must act in the interests and for the wellbeing of your client.
- b. It is your responsibility to take all reasonable steps to communicate clearly and effectively with your client.

### **2. Safe Practice**

- a. Ensure that you practise Shiatsu in an environment that is safe and clean.
- b. If you know you have an infection or contagion, you must be careful not to pass it on to clients. If in doubt about this, you must seek medical advice and act upon it.

### **3. Equal Opportunities**

- a. You must treat all your clients with respect. You must not allow your views about a client's age, race, sexuality, disability or any other of their characteristics, to adversely affect how you treat them. If you have any personal doubts or issues to do with a client's characteristics that make you unsure whether you are the best person to treat them, then you must refer that client to a

practitioner or organisation you are reasonably certain will be able and willing to offer the help they are seeking.

- b. You have a duty to make reasonable adaptations to enable people with disabilities to access your service. This must be in alignment with the definitions and requirements of the Equality Act 2010. This means you should make any sensible adjustments that are not significantly disruptive to your practice or expensive beyond what is reasonable for your practice income to support. This might mean, for instance, ensuring the pathway to your practice room is not awkward for people with mobility difficulties, providing a small ramp where a threshold is difficult to negotiate, or working with someone in a chair if they are unable to lower themselves to the floor (assuming you are competent to do so). It may also mean liaising with a person's support worker to enable the session to take place. If possible, toilet facilities should be accessible. If, after reasonable adjustments have been discussed and/or made and the situation is still not satisfactory, reasonable adjustment may mean referring clients to a practitioner able to meet a person's specific requirements.

#### 4. **Informed Consent**

- a. Commonly, when clients request treatment, they are understood to be giving implied consent to that treatment. The ethical principle of informed consent means that clients should be given full information on the treatment and its likely impact.
- b. Some people may lack capacity to give consent to treatment. The legal test for capacity is that someone can, not only understand the treatment and its consequences, but also retain, use and weigh up this information and explain their decision to others. For further information on this, see the Mental Capacity Act 2005.
- c. You can presume that a young person has capacity to consent at 16 years. Prior to that, a parent or guardian can consent on their behalf. If a person has significant learning disabilities or mental health problems or dementia, they may lack capacity to consent. Someone

else may have legal authority to make a decision on their behalf, in their best interests.

- d. If you cannot be sure that valid consent can be given, then it may be advisable not to give a treatment. If you do something to someone *without* consent, the worst-case scenario is that this may be considered an assault.
- e. Where you need to access near to an intimate part of the body, you should gain explicit consent to do so at the time.
- f. Techniques such as ginger compress, moxibustion and cupping that are performed directly onto the skin are not Shiatsu and you may need separate insurance for them, particularly if they were not part of your original Shiatsu training curriculum. You have a responsibility to check this with your insurers. You need to inform your client about such techniques and obtain explicit consent to perform them. You need to be aware that, should a complaint be made, these techniques are outside this Code of Ethics. It should be noted that it is commonly understood that Shiatsu is performed through clothing and not on uncovered skin except where this is normally accessible (such as on hands, neck and face).
- g. It is recognised that in a medical emergency it may not be possible to gain informed consent.

## 5. **A Contractual Relationship**

- a. By agreeing to treat a client you are entering into a contractual relationship. You should agree such matters as how long each session will last and be clear with them about expectations as to outcomes. You are also advised to agree how long the course of treatment should be, with a review point and cancellation policy.
- b. You must make clear what your charges are before you treat the client.

## 6. **Competence**

- a. You must practise within the limits of your competence. This means you must have received appropriate training in relation to your practice. It is your responsibility to ensure you engage in sufficient

continuing professional development (CPD) to maintain your competence.

- b. If the issues that need treatment are beyond the limit of your competence you must advise the client to consult their GP or other appropriate health professional.
- c. When a client presents with symptoms you believe could be best treated by conventional medicine, either alongside or instead of Shiatsu, you should recommend that your client sees their GP.
- d. If you believe the client would benefit from other complementary therapies, you should only give specific advice about particular therapies if you have sufficient knowledge of those therapies to do so.
- e. You must not practise while affected by alcohol or drugs. It is your responsibility to monitor your physical and mental health to ensure you are fit to practise. Where you are in doubt about this, you must seek assistance from a qualified medical practitioner.

## **7. Inappropriate Behaviour**

- a. The practitioner should always be aware that they are, or are potentially, in a position of power in relation to the client. Some clients will be vulnerable due to a history of sexual abuse, other trauma, physical or mental illness etc. It is your role as practitioner to keep the boundaries between you and the client clear and professional. Such clients may find it difficult to say they do not wish to receive a particular form of treatment. It is especially important that you are sensitive to issues of consent with vulnerable clients.
- b. You must not start or invite the client into a sexual relationship with you. If you realise you are becoming inappropriately involved with a client, you must end the professional relationship immediately and refer the client elsewhere if they wish to continue with Shiatsu treatments.
- c. If a client shows signs of becoming inappropriately involved with you, you must obtain supervision and may need to end the professional relationship. Inappropriate behaviour may be hard to define and sexual attraction per se can be considered normal. It is

when attraction becomes problematic that action may need to be taken and you may need to seek advice and support in deciding what is inappropriate. It may also be that if you are uncomfortable with a client's apparent attraction to you, even if this is not acted out in an inappropriate way, it may be wise to seek advice and possibly to end the professional relationship and suggest alternatives for them.

- d. There may be occasions when, for reasons of your own safety, you need to end treatment straight away. You are advised to seek supervision\* as soon as possible after such an event and make a statement of events for your own records in case of any action on the part of the client.
- e. In most situations, where you are ending the professional relationship, you should be able to do this in a planned way and should recommend an alternative source of care.
- f. If you are considering a sexual relationship with an ex-client, you must obtain supervision to consider the timing of this and whether there are issues such as the power imbalance that make this inappropriate.
- g. You must allow privacy for the client to change for treatment.
- h. In the treatment of friends or relatives you should be sensitive to any issues that could arise due to any dual relationship as therapist and friend or relation. If you are unsure about this it is recommended that you seek advice or supervision from an appropriate professional (such as a fellow, senior Shiatsu practitioner or teacher or a professional in a similar role).
- i. You should not enter into any business or other relationship with a client that could exploit your privileged relationship with them.

8. **Safeguarding the welfare of children, young people and adults at risk because of abuse, neglect or self-harm**

- a. If you come into contact professionally with children, young people or adults at risk because of abuse, neglect or self-harm you must safeguard and protect their welfare. You must find out about local

procedures in your area and follow them if you suspect a child, young person or adult is at risk.

- b. If you have concerns about the welfare of a child, young person or adult at risk you should discuss your concerns with a colleague in your practice (if you work with others) or with colleagues in other agencies, and notify SSUK of your concerns so that we can support you, bearing in mind confidentiality and the "need to know" principle. If, after these discussions, you consider that the person is, or may be, in need you should contact your local statutory social services department. This includes cases when you think someone may be at risk of suffering significant harm.
- c. In general, you should try to discuss your concerns with the child, young person or adult at risk – as far as their age and understanding allow – and with their parents or guardians. You should try to get their agreement to make a referral to statutory social services, unless you consider that such a discussion would place the child, or you or your practice staff, at risk of significant harm.
- d. SSUK members who are employed within the NHS or who volunteer at cancer centres, for example, will have received an enhanced check by the Disclosure and Barring Service or a Protecting Vulnerable Groups certificate from Disclosure Scotland. In this case the safeguarding procedures for the setting must be followed.

## 9. **Keeping Records**

- a. The Data Protection Act states that you should keep records for no longer than necessary and your insurer may require you to keep them for a certain number of years as a minimum. You should be familiar with any requirements of your insurance provider to keep client records for a specified length of time. Balens require Shiatsu practitioners to keep records for 7 years after a client's final treatment. For a minor, the time period is 7 years after they reach their legal majority.
- b. You must only pass records on to a third party with the specific permission of your client. This might happen, for instance, where your client has transferred to another practitioner. In that case, the

client's *written* consent must be obtained and only *copies* of the original notes should be passed on.

- c. You must explain to your client what your policy is about record keeping and why you need to keep them.
- d. Your client has a right to see their records.
- e. You are required by law to follow the Data Protection Act of 2018 in relation to keeping records; it has specific requirements in relation to computer records. If you keep computer-based records on clients you must register with the Information Commissioner. Failure to do so is a criminal offence.
- f. Generally you must only use records for the purpose of treating your clients. Any other purpose e.g. use of a case study for training, must only be with the client's agreement and must then be anonymised.
- g. The records must be kept in a secure place and if you do dispose of them, this must be done so that they cannot be read e.g. by shredding.
- h. You must make appropriate arrangements for the storage of client records in the event of your death. A member of the family within the estate should retain them in case a claim is ever brought against the estate. If no-one is willing to do this, then a solicitor could be asked to hold them.
- i. It is your responsibility to supply a copy of your records in English if they are required for a legitimate purpose such as client request or as part of the Complaints Procedure (with the agreement of the client).

#### 10. **Content of Records**

- a. Records should include the full name and contact details of your client, their age at first treatment and relevant medical history including a contact for their GP. Your insurance company may require you to keep certain information; you should be aware of their policy on this. After each treatment it is advised that you should record the reported effects of your previous treatment, an outline of your treatment, any recommendations you may make and the date of treatment. They must be legible.



## 11. **Confidentiality**

- a. Clients' records and what they tell you must be kept confidential. There are very few exceptions to this; for example when you have good reason to believe a client is a serious risk to themselves or others or if you discuss your cases with a supervisor or mentor; in which case the client should be made aware that you share client information with your supervisor or mentor for the purpose of improving and monitoring your work and that supervision remains within the bounds of strict confidence between you.
- b. If you have good reason to believe that children are at risk of sexual or serious risk of physical abuse, you should seek advice and may be required to inform the relevant authorities.
- c. There may be situations where a client tells you about suicidal thoughts or attempts where you should inform their GP. Wherever possible, you should seek the consent of the client to disclose.
- d. In all the situations where you need to disclose information about your clients, wherever possible you must get supervision/consultation for guidance. However it is recognised that there may be urgent situations where you need to inform someone immediately and do not have time to consult.
- e. There are also a very few occasions when a court may require you to disclose records in which case you should seek legal advice.

## 12. **Treatment with Shiatsu on Animals**

- a. If you wish to practise on animals you need to be appropriately trained, have relevant insurance and ensure that you are aware of the law in this area. You are prohibited from treating animals unless you are a qualified veterinary surgeon. This includes diagnosis (The Veterinary Surgeons Act 1966). The Royal College of Veterinary Surgeons view Shiatsu as a form of physiotherapy. This can be administered to an animal if the animal has been seen by a veterinary surgeon and they prescribe the treatment.
- b. Emergency first aid can be given to an animal to save life or to relieve pain. If the animal needs treatment from a veterinary

surgeon you are required to advise the animal's owner. (The Animal Welfare Act 2006)

13. **Treatment of Minors**

- a. Where a child is under 16, the written consent of their parent or guardian is required before you treat them. There are very few exceptions to this rule and you should obtain legal advice in relation to this issue.
- b. You must treat only with the consent of the child.
- c. It is a criminal offence for a parent not to obtain medical treatment for a child under 16 when it is required. If you believe a child needs medical treatment, you must advise the parent of this. If they do not seek medical treatment, you need to ask them to sign a statement. You should be aware that, regardless of such a statement being signed, you could be considered to be complicit in a criminal offence and, as such, liable in civil law.
- d. Suggested wording:  
*I (name of parent in full) have been advised by (full name) that it is a legal requirement that I consult a doctor about my child's health.*  
*Date: Signature:*

14. **Notifiable Diseases**

- a. If you become aware that your client is suffering from a notifiable disease or if you have any other public health concern, you are advised to recommend that your client consult their GP.
- b. Where you still have a public health concern e.g. if you become aware that the client is not going to consult their GP, you can access advice through the Health Protection Agency for England, the health protection unit of the NHS board where the person is resident in Scotland and NHS Wales for Wales. Please note that these guidelines are relevant for all of the UK, but that the list of notifiable diseases and the agency that gives advice is different for England, Wales and Scotland. These agencies have a list of notifiable diseases.

15. **Sexually Transmitted Diseases**

- a. There are special legal provisions in relation to confidentiality and sexually transmitted diseases (including HIV/AIDS). If in doubt, you should seek legal and or medical advice before treating clients presenting with STDs.

16. **Relationships with Other Practitioners**

- a. You should conduct yourself in an honourable way in your relationships with other practitioners. This includes not denigrating other health professionals in any way.
- b. It is advised that it is good practice to contact other therapists/medical practitioners who have a significant role in the care of your client, but only with the client's agreement.
- c. If you become aware of infringements of this Code by a person registered with the Society, then you should inform the nominated complaints manager via the Society office.

17. **Informing Clients of the Complaints Procedure**

- a. You must be aware of the main principles of the Society Complaints Procedure. If a client expresses a wish to complain about any aspect of your service as a Shiatsu practitioner, then you should make them aware of the Society Complaints Procedure and encourage them to contact the Society. It is recommended that you give them the contact details of the Society to help facilitate this process.

18. **Compliance with the Complaints Procedure**

- a. Where a Shiatsu Society Ethics Panel asks for relevant information about your conduct, competence or health, you must provide it, subject to the requirements in this Code about confidentiality. Failure to do so without good cause will be taken into account when deciding the case.
- b. If you withdraw from membership of the Society before a disciplinary process in which you are involved is able to be concluded and you re-apply to join at a later date, the disciplinary

process would restart at that point. If too great a time has elapsed for the investigation to be able to continue effectively, then you may be refused membership.

19. **Support in Professional Practice**

- a. It is good practice to have one-to-one supervision on a regular basis with an experienced practitioner or teacher.
- b. During supervision, you should have the opportunity to reflect on your practice and to get feedback from your supervisor. In addition you may wish to take part in the Mentoring scheme. Mentoring is not to be seen as a replacement for supervision and both the Mentor and the Supervisor should maintain the confidentiality of the client. You may also get support from group supervision and in practice groups; in these situations you must not identify the client.

20. **Research**

- a. You must obtain consent from your client for any research or evaluation that you conduct with clients. For detailed advice, see the Mental Capacity Act 2005
- b. You must inform them of how it is to be used.
- c. In writing reports and, particularly when material is to be published, you must conceal the client's identity.
- d. Where appropriate, you should consult a research ethics committee prior to conducting research or study.

21. **Advertising**

- a. You must follow the Committee of Advertising Practice (CAP) code. Adverts must be legal, decent, honest and truthful. This applies to all forms of advertising including websites and leaflets.

22. **Insurance**

- a. You must ensure that you have appropriate insurance cover which must include professional indemnity and public liability with a minimum of £2.5 million.

23. **Teachers' Code of Conduct and Ethics**

- a. Teachers of Shiatsu are in a special relationship with their students, during the period of training and any ongoing mentoring and supervision that is similar in many respects to the practitioner- client relationship covered in the points above. Shiatsu teachers must comply with this Professional Code of Conduct and Ethics with respect to their students in addition to their clients. Conversely, students may expect their Shiatsu teachers to treat them with the respect and confidentiality they would expect of a practitioner.

*\* Supervision in Shiatsu refers to a practitioner seeking advice from another practitioner (preferably at least as experienced) to review their work with clients and sometimes also for professional and personal development.*