

**PODIATRISTS BOARD
OF
NEW ZEALAND**

CODE OF ETHICS

**The attached Code of Ethics is issued by the Podiatrists
Board.**

Effective from October 2002, updated October 2004

**The Standards of Practice referred to in C8.3
was first published in June 1996 and updated in October 2003.**

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CODE OF ETHICS

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A. DEFINITIONS

In this Code of Ethics (hereinafter referred to as "this code"), unless the context otherwise requires:

- "the Act" means the Health Practitioners Competence Assurance Act 2003 (HPCA Act);
- "Board" means the Podiatrists Board constituted by and under Section 114 of the HPCA Act 2003;
- "Registered Podiatrist" means a person registered as a podiatrist under the HPCA Act 2003.

B. OBJECTIVES OF THIS CODE OF ETHICS

Ethical dilemmas and moral conflicts are an everyday reality in modern podiatric practice.

One of the functions of the New Zealand Podiatrists Board is to promote high standards of professional conduct amongst podiatrists. This code of Ethics is issued by the Board in pursuance of their responsibility and is effective from 1 March 1995.

This code serves to unify the practices of the professions and establishes a standard against which podiatrists' professional behaviour may be evaluated.

The ethical principles set out in this code are intended to aid the registered podiatrist, both individually and collectively, in maintaining a high level of ethical conduct in the practice of their professions. In particular they are designed to provide standards by which podiatrists may determine the priority of their conduct and relationships with patients, colleagues, members of allied health professions and the public.

C. ETHICAL PRINCIPLES

1. Competence and accountability
2. Confidentiality
3. Responsibility towards patients
4. Professional relationships
5. Research and education
6. Publications and public statements
7. Relationships and third party payers
8. Responsibility under other legislation
9. Responsibility as an employer

1. COMPETENCE AND ACCOUNTABILITY

- 1.1 Podiatrists confine their practice as a podiatrist to that as defined in the Act.
- 1.2 Podiatrists ensure they have current knowledge of scientific, technical and professional information relevant to the services they offer.
- 1.3 Podiatrists provide only those services for which they have adequate knowledge and skills, and for which they can be held accountable. They refer matters outside their area of competence to appropriately qualified persons.
- 1.4 Podiatrists are aware of the current standards of practice and consciously compare their position to those standards.
- 1.5 Podiatrists are responsible for continually updating their professional knowledge and skills through literature review and by participating in postgraduate education programs in order to provide the best possible service.
- 1.6 Podiatrists deliver podiatric care only as long as it is beneficial to the patient. Podiatrists protect their patients from over-servicing.
- 1.7 Podiatrists do not knowingly undertake any professional activity that would cause harm to a patient, colleague or to the community.

- 1.8 Podiatrists have the right to professional independence and autonomy:-
- i) Podiatrists and their patients together determine treatment plans. Such decisions should not be subject to third party approval and any modification or referral should be at their discretion.
 - ii) Podiatrists may terminate a clinical or consulting arrangement if it is clear that the patient is not benefiting from that arrangement.
- 1.9 When a podiatrist does not have sufficient knowledge and/or skills to cope with a particular problem they should either seek guidance from a person with the relevant experience or refer the patient to the appropriate professional.
- 1.10 Podiatrists keep adequate clinical records of their professional treatments for all patients under their care for a minimum of 10 years. All original records are to be held by the podiatrist, and, when required, copies only are to be made available.
- 1.11 Podiatrists are not knowingly involved in any practice arrangement which is ethically and legally unsound.
- 1.12 Podiatrists ensure that billing for their professional services is reasonable and do not allow professional practice to be prejudiced by motives of profit.
- 1.13 Podiatrists do not condone, or engage in, sexual harassment, which is defined as deliberate or repeated comments, gestures, or physical contacts of a sexual nature that are unwanted by the recipient. Sexual relations with patients are unethical.

2. CONFIDENTIALITY

- 2.1 Podiatrists never betray the confidence of a patient or divulge diagnostic finding acquired during the consultation in the course of professional treatment to anyone without the consent of the patient or their representative or when failure to take action would constitute a danger to the patient or to another member of the community. When the patient is under the age of sixteen years the parents or guardian must give permission.
- 2.2 Podiatrists always maintain privacy during patient interviews.
- 2.3 Podiatrists ensure that computer and other records are protected in such a way that unauthorised personnel cannot access them. Podiatrists make provision for protecting patient confidentiality in the disposal of research and clinical records.
- 2.4 Information recorded during a research project must not identify the subject unless prior written consent has been obtained.

- 2.5 When Podiatrists become aware of a possible misconduct by a colleague, that cannot be resolved by discussion with the colleague concerned, they take steps to bring the matter to the attention of those charged with the responsibility to investigate it, doing so without malice and without breaches of confidentiality other than those necessary to the proper investigatory processes.
- 2.6 Where information is gathered by a podiatrist for use by a third party, the informed consent of those to whom the information refers is obtained and the recipient is informed by the podiatrist of the need to protect confidentiality.
- 2.7 Podiatrists are professionally and legally bound not to disclose information about:
 - i) Any identifiable individual's medical history.
 - ii) Any disability that an individual has or has had.
 - iii) Health services or disability services that are being provided to that individual.

3. RESPONSIBILITY TOWARDS PATIENTS

- 3.1 Podiatrists give their patients complete current information concerning the diagnosis, treatment and prognosis of their condition in language/terms that the patient can reasonably be expected to understand. An interpreter is employed if necessary. When it is not medically advisable or appropriate to give such information to the patient, podiatrists make the information available to those authorised to represent the patient's interest on their behalf.
- 3.2 Podiatrists have a responsibility to give patients such information necessary to give informed consent prior to the start of any procedure and/or treatment. Informed consent means obtaining the agreement of the patient or, where the patient is judged incapable of giving informed consent, of those authorised to represent the interests of the patient.

Such information should include, but not necessarily be restricted to, the specific procedure and/or treatment, the medically significant risks involved, the probable duration of incapacitation (if relevant), and an estimation of the fees involved.

When medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information.

- 3.3 The patient must be informed of the right to access their own file, and the continuing right to refuse or withdraw consent to participation in the treatment process without fear of penalty for exercising that right.

- 3.4 If a patient's condition, or lack of progress gives cause for anxiety, or when it is apparent that confidence has been lost, podiatrists do not hesitate to arrange a second opinion, either from another podiatrist or from another appropriate practitioner or specialist.
- 3.5 Podiatrists make provision for the continuing care of their patients during their absence from practice and provide after hours emergency care where appropriate.
- 3.6 The podiatrist who undertakes the treatment of a patient because the patient's own podiatrist is not available, renders assistance to the best of their ability and returns the patient with all the relevant details of the case at the earliest opportunity.
- 3.7 Podiatrists never suggest that a patient's condition is worse than it really is, or that he/she has a condition not evidently present, thereby exploiting the patient.
- 3.8 Patients have a right to considerate and respectful care and podiatrists will act as patient advocate if required.
- 3.9 Podiatrists are sensitive to cultural and social diversity. They recognise that there are different needs, values and beliefs amongst people and are morally obliged to help all those who seek their professional care.

Standards of practice will not be compromised by considerations of age, gender, religion, sexual orientation, nationality or ethnic backgrounds, politics, social or economic status or by the nature the patient's health problems.

Wherever necessary or appropriate, podiatrists obtain training, experience or advice to ensure that judicial treatment has been offered and if, for whatever reasons, the podiatrists are unable to provide the service themselves they are bound, where ever possible, to arrange delivery of the service elsewhere.

- 3.10 Podiatrists always respect the customs of their patients in the performance of their professional duties.

4. PROFESSIONAL RELATIONSHIPS

4.1 Relationships between Registered Podiatrists

- i) Podiatrists establish and maintain cordial relations with fellow practitioners. They consider one another to be colleagues and endeavour to assist each other whenever possible.
- ii) Podiatrists do not knowingly try to persuade their colleagues' patients to change allegiance to themselves, when
 - (a) an associate leaves a principal
 - (b) a podiatrist acts or has acted as a locum tenens
 - (c) a podiatrist is called upon to provide emergency care to a patient of a colleague.

4.2 Relationships with other Health Professionals

- i) Podiatrists see it as their obligation to work with others in the planning, development and management of services so as to provide optimum care for the individual and the community.
- ii) Podiatrists accept referrals from other health professionals and treat the patient by applying all ethical principles outlined in this code.
- iii) Podiatrists always acknowledge referrals, providing information regarding their own clinical findings and complete treatment details.
- iv) Podiatrists recognise and accept their own limitations in the provision of complete health care and willingly refer patients on to other health professionals whenever appropriate.

4.3 Relationships with the public

- i) Podiatrists recognise their obligation to work towards achieving justice in the provision of appropriate health care for all people:-
 - a) locally
 - b) nationally
 - c) internationally
- ii) Podiatrists ensure that, wherever possible, they improve the quality of life for those within their sphere of influence.
- iii) Podiatrists recognise their duty to inform the public truthfully about the nature of their professional services so that individuals can make an informed and educated choice whether to use them.

5. RESEARCH AND EDUCATION

- 5.1 Podiatrists engaged in research conduct unbiased investigations relevant to the practice of podiatry, or associated medical disciplines, through the selection and development of appropriate research techniques, and through the timely and adequate disclosure of research findings to the professional and scientific community.
- 5.2 Podiatrists ensure that research investigations meet general scientific standards of competency and are sensitive to the welfare and dignity of the participants.
- 5.3 Podiatrists obtain the informed consent of research participants. This means obtaining their agreement to participate in research which is free from physical and mental discomfort, harm or danger.
- 5.4 Podiatrists do not take part in research that may, or is likely to, cause serious or lasting harm to participants.
- 5.5 Podiatrists who use animals in teaching, research and in applied settings give every consideration for their welfare.
- 5.6 Podiatrists engaged in teaching help students to acquire knowledge and skill, encouraging students to achieve high standards of education and to develop independent thought.
- 5.7 Podiatrists engaged in teaching are charged with the responsibility of ensuring students understand, and comply with the ethical principles outlined in this code.
- 5.8 Podiatrists engaged in teaching have a responsibility to ensure that research carried out by others under their supervision conforms to this code.

6. PUBLICATIONS AND PUBLIC STATEMENTS

- 6.1 All publicity material, information material, advertising material and communication material produced by or on behalf of a podiatrist by facsimile, video, radio or television (including professional letterhead and memorandum forms and other printed matter, and including plates and signs of every description) shall only contain material which can be verified; and shall not contain any material which cannot be verified; and shall not contain information likely to mislead, offend public decency, deceive the public, or bring the profession into disrepute.
- 6.2 Whenever using advertising or other form of publicity to represent their professional abilities, skills and services, podiatrists do so responsibly, truthfully and completely.
- 6.3 Podiatrists never at any time intentionally misinform a patient as to their professional qualifications.

- 6.4 Podiatrists always attribute credit in a publication in proportion to the contribution made by individuals and organisations. Accurate acknowledgment is always given to sources of ideas and information.
- 6.5 Podiatrists avoid excessive and exaggerated claims for their research findings or professional activities in all publications and public statements made through the news media. All reasonable steps are taken to correct any error if incorrect or misleading information has been inadvertently given.
- 6.6 Podiatrists do not state or imply that personal statements are made on behalf of other podiatrists, the Board, or any other organisations, unless such authority has been made in advance.
- 6.7 Podiatrists are accurate and objective in reporting data or information and do so in a manner that encourages responsible discussion.
- 6.8 Podiatrists restrict their public comments as podiatrists to areas of podiatry in which they have satisfactory knowledge and to information derived from research findings and theory which can be substantiated if they are required.

7. RELATIONSHIPS WITH THIRD PARTY PAYERS

- 7.1 Podiatrists are consistently fair and honest when reporting to and claiming fees from third party payers. Third party payers are considered to be the Accident Compensation Corporation, Health Insurance Companies, Social Services, and any other organisation from which a patient may be granted podiatric fee reimbursement.
- 7.2 Such reports and claims are always a true and accurate record taken from the patient's records and account as filed at the podiatrist's office.

8. RESPONSIBILITY UNDER OTHER LEGISLATION

- 8.1 Podiatrists are aware of their responsibility under other legislation such as:

- The Medicines Act 1981
- The Radioactive Substances Act
- The Commerce Act 1986
- The Fair Trading Act 1986
- The Holidays Act 1981
- Parental Leave and Employment Protection Act 1987
- Employment Contract Act 1991
- The Privacy Act 1993
- The Official Information Act 1982
- The Consumers Guarantee Act 1993
- The Resource Management Act 1991

and any new legislation that may be enacted from time to time.

- 8.2 Podiatrists who in the course of their work visit hospitals, nursing homes, clinics, institutions, rest homes or work in their own premises or are employed by an authority, hospital, nursing home, clinic, rest home or any other area where the conduct the practise of podiatry in accordance with the standards of practice set out by the Board as required by the Health Practitioners Competence Assurance Act 2003. Practitioners must also be aware of the provisions of the Health and Disability Commissioner Act 1994 and the Code of Health and Disability Services Consumers Rights 1996.
- 8.3 Podiatrists are required to comply with, and practice according to, the guidelines defined in the current Standards of Practice.

9. RESPONSIBILITY AS AN EMPLOYER

- 9.1 The Podiatrist as an employer provides opportunities for their employees to develop and grow professionally. Employees must have suitable qualifications to undertake their responsibilities.
- 9.2 Podiatrists engage in appropriate professional development to equip themselves with such planning and management skills necessary to effectively and fairly manage the staff under their employ.