



2 COHPA MEMBERS' CODE OF CONDUCT

Introduction

As a non-regulatory Organisation, COHPA offers guidelines to its membership in the key areas of conduct, performance, ethics and probity. It would be COHPA's hope and expectation that each member would display within its contracts with its clients' reference to the fact that it follows the COHPA Code of Conduct Guidelines.

1. Confidentiality

Occupational Health matters commonly involve the management and processing of sensitive medical data. Statutory instruments govern such matters, and in the case of medical reports, members should ensure that all personal data is treated in strict medical confidence, and only passed on to employer or other party with the employee's express consent. The only exception to this is if information is received which is considered to pose a significant risk to health of an employee or the public in general, and obligations to disclose to the relevant authority (e.g. Police, GP) in such matters overtakes the responsibility to the individual employee.



2. Data Protection

The Data Protection Act (DPA) applies to information held about individuals ("personal data"). It provides the individual the right to access personal information from the OH provider, subject to a qualifying subject access request (SAR). COHPA members should be expected to comply fully with the requirements of the DPA and charge appropriately for any SAR. All employee data shall be stored to the highest possible standards, both physical and electronic.

3. Conduct & Standards

Matters of clinical professional conduct are regulated by the appropriate medical bodies, e.g. GMC (General Medical Council), HCPC (Health & Care Professions Council), NMC (Nursing & Midwifery Council), but COHPA would expect all members to conduct themselves with honesty and integrity and to ensure that such conduct does not damage the public's confidence in the profession. COHPA members should not become involved in behaviours or activities likely to damage the public's confidence, and should treat fellow COHPA members accordingly.

Any advertising in relation to professional activities should be accurate, should not be misleading, false, unfair or exaggerated. COHPA members should not claim that their skills, equipment or facilities are better than their peers unless they can demonstrate that this is true. In particular, written or verbal disparagement of competitors and in particular other COHPA members or their staff would not be regarded as acceptable conduct by a COHPA member, and likely to bring the industry into disrepute.

COHPA members should subcontract tasks to other persons or organisations only when they can substantiate that the knowledge, skills and experience of the subcontractor is sufficient to carry out the task safely, and effectively. Contractors should not be asked to perform work outside the scope of practice. COHPA members will still be responsible for the output from the subcontractor, and should ensure that the subcontractor works safely and effectively as if it were complying with COHPA's standards of conduct itself.

All key administration and clinical staff should be appropriately DBS (Disclosure & Barring Service) checked yearly (fka CRB – (Criminal Records Bureau)), written references taken at appointment with photo ID and utility bills to evidence residency, and CPD (Continuing Professional Development) should be enforced to ensure that key skill sets are maintained and relevant.



4. Personal Conduct & Responsibility

COHPA recognises that poor conduct even outside professional life may still effect public perception and confidence in the profession in general. Consequently, each COHPA member and key operational and clinical staff member should inform COHPA if at any time they are convicted of a criminal offence or have accepted a police caution. Clients should be made aware of these events, as should regulatory bodies.

At annual renewal, each COHPA member should disclose if any key operational or clinical member of staff has been convicted or cautioned in relation to any one of the following types of behaviour:

- violence or threat of violence
- offences involving dishonesty or probity
- offences receiving a prison sentence or community service order
- sexual misconduct including offences in relation to pornography
- abuse (domestic or otherwise)
- supplying or use of illegal drugs, or alcohol dependency

This is by no means a full list; COHPA will look at each declaration on its own merits and recommend accordingly.

5. Complaints

COHPA members shall have and display within their contracts with clients a clear, unambiguous and straightforward process for receiving, investigating and adjudicating upon complaints. The process should include the right of Appeal, and in the event of dispute, should nominate an adjudicator whose recommendations shall be binding on both parties.

6. Equality

COHPA members should recruit and treat all staff with equality, regardless of ethnicity, disability, creed or sexual orientation, in compliance with the requirements of the Equality Act (EA). All staff should be paid within the current legal hourly rate.