



CODE OF CONDUCT & ETHICS

Shamanic Healers Circle

January 2020



Code of Ethics and Practice for professional Shamanic Healer practitioners

The purpose of this Code is to set standards for all members of the Shamanic Healers Circle who are practising healing. It protects members and also provides a source of reference for these standards for the public.

Members in all healing categories should be fully conversant with this document. All Members must heal in accordance with the general principles of their training with the Shamanic Healers Circle.

It is the responsibility of every practitioner to understand the content of this Code and to keep up to date with current legislation and local byelaws.



Key Values for Practice

Every practitioner shall:

- Respect the client's dignity, individual needs and values without discrimination.
- Be non-judgemental concerning race, colour, creed, gender or sexual orientation.
- Provide comprehensive and accessible information to allow clients to make informed choices, including choosing to stop a healing.
- Act honestly and maintain professional integrity.
- Practise only within the boundaries of the Shamanic Healer practitioner's competence/qualifications.
- Acknowledge and respect all practitioners and disciplines.
- Work to foster and maintain the trust of clients and the general public.
- Keep all client information confidential unless required by law to do otherwise.
- Comply with the Continuing Professional Development requirements of the Shamanic Healers Council/specific regulators
- Respond promptly and constructively to concerns, criticisms and complaints.
- Comply with relevant legislation.



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Section 1 Membership

1.1 There are three categories of membership for practising healers:

- Student – (Completed a 1 year Shamanic training with third party)
- Associate – (Successfully completed year 1 SHC training)
- Practitioner – (Successfully completed year 2 SHC training)

1.2 No category of membership allows members to present themselves as accredited tutors until the criteria required for this position have been fulfilled and appropriate training has been undertaken.

Definitions

1.3 Shamanic Healing is the act of restoring the balance of the body, mind and spirit of the client. It is a therapeutic approach that is natural, non-invasive and holistic and has the intention of promoting self-healing, and to bring a sense of wellbeing and peace to the client.

1.4 The practitioner prepares the space to be used for healing by clearing any negative or unwanted energies with the use of Smudge, Holy water or other spiritually cleansing method. (Spaces with Fire alarm systems and smoke detectors will require non-smoke cleansing to be used.)

1.5 The practitioner stills themselves to find the inner peaceful core, and to connect with Spirit and Spirit guides. Then with guidance from Spirit, channel that state through oneself with the intention of benefiting another person, situation or space.

1.6 Healing is carried out in the presence of the client who may be sitting on a chair or lying. The healer may lay hands on the client or the hands may be held away from the body. The healers may also use a drum, rattle, feather or other spiritual object to facilitate the healing. Permission is always sought of the client before contact healing is given.



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1.7 Remote Healing (or Absent Healing) is healing which is given when the healer is not in the presence of the client. By attunement, visualisation and clear intent, the healer seeks to promote the wellbeing of, and self-healing in, the client.

1.8 Shamanic healing is offered as complementary, and not as an alternative, to prescribed medical treatment.



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Section 2 - Standards for Healers

The Healing Environment

2.1 Healers have a duty of professional responsibility towards clients at their first point of contact, before a contract has been entered into, and irrespective of whether or not they are charging for their services. They should always act lawfully, with integrity, courtesy, discretion and tact towards their clients, and should uphold the trust placed in them. They should never behave in a manner that is not within the recommendations of this Code of Conduct or that could bring Shamanic Healers Circle (SHC) into disrepute, including forming an intimate relationship with a client. They should not discriminate on grounds of gender, race, religion, political persuasion, sexual preference, age or disability.

2.2 Healing can take place anywhere. Healers should always do their best to ensure that the working conditions are suitable and conducive to an appropriate atmosphere and the space has been cleared of any negative or unwanted energies prior to healing. Intrusions of sound and smell should also be taken into consideration.

2.3 Healers should understand the importance of making a risk assessment of any environment where they will give healing, on each occasion that healing is given. This will include ensuring that anyone attending for healing does not come into contact with anything dangerous i.e. items that can be fallen over or slipped on, such as uneven floors, rugs, wires, etc.

2.4 Healers should always have evidence available of current membership of the SHC when healing i.e. membership certificate.

Relationship with the Client

2.5 Before healing commences, a description should be given of the process and how it is generally experienced.

2.6 Healers must not make a diagnosis or claim an ability to cure. It is Attunement to the Highest Good that is important.



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2.7 Healers are to ask new clients whether they have seen a doctor concerning their condition. If they have not seen a doctor, they are to be advised to do so and this should be noted on their record card.

2.8 Healers do not express or discuss their personal beliefs and views with a client unless invited to do so. This should always be done simply and discreetly and should not interfere with the purpose and conduct of the healing session. Healers should always respect the religious, spiritual and personal views of others.

2.9 Students should advise a client that they are under training with SHC and should ask the client's agreement before giving healing.

2.10 The presence of another person who is acceptable to both parties is advised when healing in a private setting. Third parties present during healing may include a carer, signer or an interpreter; however, they should only ever be present with the express consent of the client. The presence of a third party ensures the safety and protection of all concerned, particularly when healing in a home environment.

2.11 Healers should never be intrusive and should give healing only in response to an invitation.

Relationship with Self

2.13 Healers should aspire to good health and make every effort to ensure that they themselves are fit to practice. It is strongly advised that they do not give healing if they are not medically and/or psychologically fit to do so.

2.14 Healers should recognise their own limits (physical, mental, emotional and spiritual), and should be aware of their own vulnerability. In order to remain in balance, it is advisable for healers to accept healing from time to time, and so be in the most effective state of mind and spiritual health when giving healing to others. For the same reason, daily spiritual practice is also strongly recommended.

2.15 Healers will seek to improve their self-awareness, knowledge and abilities through Continuing Personal/Professional Development (CPD). A minimum of 15 hours per year CPD for all members.

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The Act of Healing

2.16 Consent for Healing

(a) Healers must always ask permission from the client before healing, consent to touch the client must always be obtained.

(b) Healers should never seek to touch in a manner or place that is inappropriate and should always respect the client's wishes. Healers should always be aware that what is considered appropriate will vary across different cultures.

2.17 Guidance for Healers

(a) Healers should never treat a client for conditions that exceed their capability, training and competence. In these circumstances the healer should always refer the client to a more experienced and suitably qualified practitioner.

(b) Healers should never ask a client to remove clothing except for outdoor clothing, shoes and possibly spectacles.

(c) Healers should not use manipulation or massage during healing, but it is acceptable to gently rest the hands on the shoulders (with the permission of the client) to assist relaxation.

(d) Healers should always ensure that those who have received healing are well-grounded and in a state of full consciousness before departure.

(e) Healers should not refer to spirit messages, spirit guides, angelic forms, deceased relatives or offer a clairvoyant reading during, or after, a healing session.

2.18 Supervision

Members should mention that sometimes they will need to discuss difficult issues and cases with their Mentor as part of their Continuing Professional Development. Clients can be reassured that in these circumstances they would never be identified.

2.19 Personal Standards

Healers should always dress appropriately when giving healing. Good standards of personal cleanliness and hygiene are important, and breath should be clear and

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fresh. Strong perfume, deodorant and aftershave could trigger allergic reactions in some clients.

2.20 Healing in Public

Only Practitioner's should give healing at exhibitions and similar events.



SECTION 3 - ADMINISTRATION

3.1 Data Protection

(a) The General Data Protection Regulation (GDPR) is a legal framework that sets guidelines for the collection and processing of personal information of individuals within the European Union (EU). There is an obligation of looking after people's personal data, including online details. Sensitive personal information includes client notes, emails/txt and contact forms.

(b) As a self-employed healer you are considered the Data Controller. This is the most senior position in regards to data security. If you work for an agency you will be a Data Processor.

(c) The Data Protection Commission does not stipulate a minimum amount of time to keep records however your insurance company may.

(d) Information needs to be kept safe. This includes if on computer, the right kind of up to date virus guards, password protection and if held on cloud-based storage this must be located within Europe. Paper based records must be kept in a fireproof locked cabinet.

3.2 Confidentiality

(a) Healers have a contract with their clients and should make the client aware of what information they collect. Data should be kept to a minimum, client has the right to see, amend and delete information. When a client first contacts a healer, the healer is not responsible for this information. However, when replying it is good practice to delete the original email and state, '*Thank you for sharing your details... email is not a secure medium and I would like to arrange a phone conversation or meeting*'.

(b) In specified circumstances, the law can require any practitioner to come to court as a witness and disclose details of client records and case notes and/or answer questions about the content of healing sessions. It would be an offence for the healer not to attend and original notes would need to be brought to court. Usually the court will understand and respect the wish of healers to keep client confidentiality, and



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only seek information if the court considers it absolutely necessary. (It should be noted that legal circumstances requiring disclosure are exceedingly rare.)

(c) Healers cannot therefore offer absolute confidentiality to clients, but need to explain, if asked, that confidentiality is subject to certain limitations.

(d) If a client tells a healer during a consultation that they are considering, planning or have committed an act of terrorism or committed a crime under the Proceeds of Crime Act (which includes not paying Council Tax or fraudulently claiming Benefits), the healer must inform the police without informing the person that they intend to do so. If the healer tells the person what they have done, they can be subject to prosecution and imprisonment.

(e) Adult clients can, of course, give their consent for healers to disclose information, and may specifically request the healer in writing to do so. Except in circumstances required by the law, or local regulations on the protection of children and vulnerable adults, healers should not breach confidentiality unless they have the client's prior consent, which must be in writing and clearly dated.

(f) In law, children under 16 may also be able to request confidentiality in the same way as adults, depending on their age, maturity and understanding.

(g) Confidentiality regarding younger children is always subject to the consent of those with parental responsibility for them, and to the law and the guidance in force for professionals relating to child protection.

3.3 Payment

(a) Healers may charge for their time and expenses. However they should always act with sensitivity and consideration regarding fees or donations and these should be clearly indicated at the time of enquiry. Due care should be taken to ensure that payment requirements are fully appreciated by those of possibly limited understanding.

(b) Policies on non-payment and cancellation should be available to the client at the initial meeting/contact, as this forms part of the contract the healer has with the client.

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(c) When working on behalf of the SHC (e.g. at an exhibition), all monies received, after payment of reasonable expenses, must go to Charity.

3.4 Insurance

(a) Healers must have insurance for the act of Shamanic Healing as carried out in accordance with this Code of Conduct. When healing at home, their house and contents may not be covered by their Household Insurance unless they have made suitable provision. At a minimum, healers are advised to inform their household insurance company of their healing activities.

(b) Whether healing in a public or private building, healers should ensure that the owner/leaseholder of the building holds a current, valid Public Liability Insurance certificate. Note: an Employers Liability Insurance Certificate is NOT the same thing as a Public Liability Insurance Certificate and is often shown in error.

(c) Healers are also recommended to check their professional indemnity cover to ensure that the amounts are appropriate and adequate for purpose.

(d) Healers are responsible for insuring their own equipment and should check that their household insurance covers the use of a couch.

3.5 Local Authority Regulations

Healers who are using their home as a place to give healing as a full or part time occupation or business are advised to ensure that they are complying with local government regulations. Local councils will advise on this.

3.6 Complaints

Healers are advised to respond to criticism and complaints promptly and constructively. A complainant should be encouraged to contact SHC, where a Complaints & Disciplinary Procedure is administered that covers healers and members of the public.

3.7 Advertising

(a) If testimonials are to be included, they should be with the written permission of each client and they must be authenticated.

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(b) Members should never use titles or descriptions for themselves or their treatment that may mislead the public.

(c) Practitioner members may use the initials PSHC after their name to indicate membership of the SHC.

(d) Only Practitioner members are permitted to use a business card or promotional literature bearing the SHC logo.

(e) Tutors are permitted to use the SHC logo when promoting SHC healing courses.



SECTION 4 - WORKING WITH OTHER PROFESSIONALS

General

4.1 The aim of SHC is to offer a service that is complementary and not an alternative to orthodox medicine.

4.2 Healers are to be aware of the rights of other professionals in both the orthodox and complementary fields and are to hold these in respect.

4.3 The healer should never countermand instructions or any treatments prescribed by a doctor.

4.4 The healer should not give advice to a client on a particular course of medical treatment, a surgical operation or the taking of medication. It must be left to the client to make their own decisions in the light of medical advice. If a client has any doubts regarding their medical treatment, they should be referred back to their GP.

4.5 Diagnosis is the responsibility of the doctor. Healers should never give a diagnosis to a client in any circumstances. If, however, healers are made aware of a condition that would benefit from further medical treatment, they should encourage the client to seek further advice from their GP.

The Client in Healthcare or Social Care Settings

Healers who wish to develop a relationship with a care home or hospice may find it helpful to first offer healing to staff members before arranging to give healing to specific residents/clients.

4.8 A client in hospital or a hospice can freely request a visit from a healer. In some circumstances distant healing may be more appropriate.

4.9 When a healer visits a hospital or hospice to treat a client, the following procedures apply:

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- (a) Healers should always obtain permission of the ward manager or deputy before seeing a client.
- (b) Healers should be dressed appropriately. A current SHC membership certificate should be carried to provide 'credentials' if requested. It is important that healers should demonstrate their competence and confidence whilst in this public domain.
- (c) Healing should be carried out without fuss. If no screens are provided, the healer should offer healing through the client's hands or in an undemonstrative way.
- (d) If, during the visit, other clients request healing, further permission of the ward manager should be obtained.
- (e) It is important that healers support and encourage the client's faith in hospital treatment and the care regime.
- (f) Clients in hospital or hospices are very vulnerable to infection and healers should not attend if suffering from any kind of cold, cough or stomach upset. It is advisable to have a bath or shower before visiting a client. Hands should be washed thoroughly before going onto a hospital ward and after touching anyone or anything. Items should never be passed from one client to another. It is important for all visitors to use the alcohol gel provided by hospitals before and after seeing a client.
- (g) Infections can be carried on clothes; therefore, a healer should never sit on a client's bed. If you become ill after visiting a client in hospital, then common sense dictates you contact your GP.

Midwifery

4.10 (a) In October 2008 the Midwifery Association of the UK changed its ruling on the subject of healers attending a woman during pregnancy. Mothers currently have the right to choose where and how they will have their babies, and who will be present. They have the right to request healers to attend them at any time, including the time of the birth.

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(b) Legal advice offered suggests that a midwife can still legally sue a healer. We therefore advise that if Contact Healing is to be undertaken at all during pregnancy, that the healer concerned has written permission from the midwife in question, which covers healing during the pregnancy and a period of 10 days after the delivery, as well as from the consultant in charge, in the case of a hospital birth.

(c) For organisational reasons there may be uncertainty concerning the specific medical personnel who may be in attendance at the time of delivery. For this reason it may be difficult to obtain the required written permission. In such cases Distant Healing is recommended at the time of delivery and for 10 days afterwards.

Healing and other therapies

4.11 Healers may only prescribe or sell remedies, herbs, supplements, oils, etc, if they have a separate training and/or qualification that legally permit them to do so.

Treatment of Animals

4.12 (a) The Royal College of Veterinary Surgeons (RCVS) recognises as acceptable the complementary treatment of animals by contact healing (i.e. the laying-on of hands), distant healing or prayer in strict accordance with the provisions and spirit of this Code of Conduct.

(b) The RCVS accepts Healing and no longer insists that an animal is seen by a vet before healing is given.

(c) If the healer is aware that any animal visited is in particular distress, the healer is obliged to advise the owner to arrange for the animal to be seen by a veterinary surgeon.

(d) The healer should make a note of this instruction on their record card in such a way that it is clear that no diagnosis has been made.

4.13 Where an animal has already been seen by a vet, the veterinary surgeon remains in charge of the case and the healer shall not countermand any instructions or medicines given by the vet.

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4.14 The healer shall should not suggest a medical diagnosis or advise any course of veterinary treatment.

4.15 The administration of first aid in an emergency for the purpose of saving life or relieving pain is permissible.



SECTION 5 – WORKING WITH VULNERABLE PEOPLE

Working with Children

5.1 (a) A child is defined in law as someone who is under 18 in England, Wales and Northern Ireland, and who is under 16 in Scotland.

(b) A married person aged between 16 and 18 is considered an adult. If seeking healing, the individual concerned would need to provide evidence of marital status in the form of a marriage certificate.

5.2 Parental responsibility is a legal concept that lasts until a child reaches the age of 18 (see 5.1 for exceptions). Those who can have parental responsibility are as follows:

- The mother of a child always has parental responsibility.
- The biological father of a child automatically has parental responsibility if he is married to the child's mother.
- If the father is not married to the mother, he can acquire parental responsibility by agreement with the mother or by court order.
- Others can, by court order, acquire parental responsibility such as guardianship or a residence order.
- Local authorities can also acquire parental responsibility when a child is placed under a care order by the court.
- Parental responsibility can be shared.

5.3 Care must be exercised if the parent is under 18 years. If in doubt, do not give healing.

5.4 It is considered best practice to gain permission for healing from those with parental responsibility for that child, as well as the consent of the child.

5.5 It is advisable to have a third person, either a parent, carer or another healer present, when giving healing to a child under 16.



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5.6 (a) Those with parental responsibility for a child should always be asked whether the child is being treated by a doctor for the presenting condition. If it transpires that s/he is not, healers must advise that, in Law, the child should be seen by a doctor, and secure the signature of the parent or guardian on the following statement:

“I have been advised by (name of healer) that according to Law I must consult a doctor concerning the health of my child (name of child).

Signed (Parent or Guardian) Date

Signature of Witness Date”

This statement should be kept with the healing records.

(b) A healer who treats a sick child under 16 with the knowledge that no doctor has been consulted, may run the risk of being accused of complicity in a criminal offence, as well as possible liability in civil law, if a serious illness is undiagnosed and the child suffers harm as a result.

(c) It should be noted however that many children who are brought for healing by their parents are already receiving medical treatment e.g. for cancer. Cases requiring careful consideration would include, for example, a request from a parent who might not approve of medical intervention for reasons of culture or personal belief. In such cases, the healer is strongly advised to suggest distant healing rather than contact healing.

(d) If a healer suspects that a child brought for treatment is suffering harm, or is at risk of harm, the healer should report their concern to the child’s doctor, or to the duty officer of the Social Services department serving the area in which the child lives. The term ‘harm’ includes ill treatment or impairment of their health or their physical, intellectual, emotional, social, behavioural or sexual development.

Working with Vulnerable Adults

5.7 (a) A third person should always be in attendance when a healer is working with a client who is perceived to be vulnerable in any way.

(b) Healers should be mindful of their own personal safety at all times. Discretion should always be used for the protection of both the healer and the client when

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carrying out spiritual healing with those who are known to have mental health problems, be addicted to drugs or alcohol, severely depressed, or hallucinating. The healer should be accompanied by another healer or a specialist in this area.

(c) In some instances distant healing may be more appropriate e.g. for those living with schizophrenia and psychotic conditions.

(d) In the event that the healer is informed by an individual that they intend to self-harm, the healer may have a moral duty of care. This can be discharged by encouraging and supporting the individual to seek help from their GP, or key worker if they are already known to mental health services.

(e) Before giving healing to anyone who may possibly be liable to self-harm, healers are strongly advised to get their confirmation in writing that they have been advised to seek help. Distant Healing is likely to be more helpful.

Consent for Medical Treatment

5.8 (a) Any person over the age of 18 in England, Wales or Northern Ireland, anyone over 16 in Scotland, or a married person over 16, is considered in law to be an adult, and can consent to medical treatment, unless there is evidence to prove that they have a mental incapacity.

(b) Clinicians and healers alike have a legal responsibility in determining whether a client has the capacity to consent or not. Although a healer is not clinically trained, s/he would be expected to show common sense in this regard.

(c) Healers may not enter a hospital or care home to give healing to residents/clients who lack capacity, without first obtaining consent from the person responsible for their welfare. Particular care should be taken if lasting Power of Attorney has been granted.

(d) Individuals may lose capacity permanently because of a degenerative illness, or brain injury, or may have suffered brain damage at birth. Some people who suffer from some forms of mental illness may be deemed to lose capacity during acute episodes of illness, but capacity will be regained during periods of health.



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(e) If it becomes evident that a client may suddenly need urgent medical or psychiatric help, the healer may have to obtain the client's consent to refer them to a GP or other agency, unless in the case of emergency or collapse. This is especially the case if the healer is concerned about a risk of harm to the client or others. The healer should bear in mind their duty to always act in a person's best interests.

General

5.9 (a) If a healer is concerned about any aspect of the welfare of a vulnerable person of any age, they should contact the local authority duty Social Work Team, which has a legal duty to investigate any concern.

(b) Many local authorities and voluntary organisations have a policy on the protection of vulnerable adults or children in their care, which will be relevant for example when visiting children and some adults in hospital or care/residential homes.

(c) Protection policies will restrict one-to-one contact unless a suitable check has been obtained (previously known as a CRB check). Anyone working with either children or vulnerable adults is required to register with the Independent Safeguarding Authority. [www.isa.gov.uk]