



**CODE OF
CONDUCT, ETHICS
& STANDARDS OF
PRACTISE:**

A GUIDE FOR MEMBERS

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Introduction

The following Sports Therapy Association Standards of Practice, Code of Conduct and Ethics document has been written to inform all registered members (*Student, Affiliate, Full & Graduate*) of the Sports Therapy Association (STA) that these are the required levels of standards, conduct and professionalism expected of them.

The aim of providing such guidance is to maintain a high standard of care whilst also ensuring minimum safety requirements are met to effectively protect and safeguard members of the public. Members are expected to adopt and use this code within their professional and working capacity.

Members who may be found to not be acting in keeping with the spirit of the code may find their membership revoked and all member benefits and privileges revoked.

The details in this document do not replace legal requirements or laws set out in Government. Due to ongoing guidance and changes to laws within Government and Parliament, this document may be updated resulting in significant changes depending on the current laws.

The sections set out and outlined in this document are as follows:

1. Working within your scope of practice
2. Duty of care towards clients/patients
3. Professionalism
4. Data and GDPR
5. Commitments to education and Continual Professional Development
6. Working environment
7. Use of STA logo, name and intellectual property
8. Online, digital and written content aligned to the STA and its use.
9. Concerns and Whistleblowing
10. Complaints, Concerns and Investigations into Professional Conduct

1.0 Working within your scope of practice:

1.1 Members must work within their scope of practice based on training, education and qualifications.

1.2 STA Membership category will be determined by your highest industry qualification and will be stated on your membership certificate. This will be used to determine your scope of practice and appropriate title/s that may be used. The six STA membership categories are as follows;

i. Sports Massage Therapist Affiliate Member

Level 3 Sports Massage Therapy (for Qualifications issued after 2014)

ii. Soft Tissue Therapist Level 4 Member

Level 4 Sports Massage Therapy



iii. Soft Tissue Therapist Level 5 Member

Level 5 Sports Massage Therapy

iv. HND/FdSc Sports Therapist Member

HND or FdSc Sports Therapy

v. Graduate Sports Therapist Member(GST)

BSc or MSc Sports Therapy, BSc Sports and Exercise Therapy

vi. Graduate Sports Rehabilitator Member(GSR)

BSc or MSc Sports Rehabilitation

vii. Graduate Sports Member

BSc or MSc relevant sports degree with rehabilitation, injury management or soft tissue modules.

1.2.1 Members must not misrepresent their title or qualifications to mislead clients, patients and the general public with regards to your professional scope of practice.

1.3 The titles of Graduate Sports Therapist (GST) or Graduate Sports Rehabilitator (GSR), may only be used by those who hold a relevant qualification that assesses the appropriate professional competencies.

1.3.1 Must not call himself/herself “Doctor” unless they hold a recognised medical qualification in the country in which the Member is practicing or use titles that do not reflect qualifications or are statutory regulated such as: Sports Massage Therapist, Physiotherapist, Sports Therapist, Osteopath, Chiropractor, Bowen Therapist, Sports Rehabilitator

1.4 Members will only provide care and treatments that they hold an appropriate certificate of competency and relevant insurance policy extension to practice.

1.5 Where limitations to your scope of practice are present, you must refer clients to other appropriate healthcare or medical professionals.

1.6 Active STA members working in clinical practice must hold a current first aid certificate with a practical element of life saving or CPR. Those working in a pitchside or sports trauma setting are recommended to hold a relevant qualification, meeting the National Governing Body (NGB) minimum requirement.

2.0 Duty of care towards clients/patients: Members must;

2.1 Act in the best interest of clients/patients and the general public to provide treatment only where there is reasonable expectation that it will be advantageous to the client/patients/users.

2.2 Provide effective communication and discuss all relevant information surrounding the care and treatment of each client/patient so that they may provide appropriate informed consent. You must allow clients/patients to withdraw consent at any given time.



- 2.3 Respect the client/practitioner relationship, the confidentiality of the client and endeavour to foster and maintain trust at all times.
- 2.4 Respect the clients' right to refuse or terminate treatment at any time, regardless of prior consent given.
- 2.5 Members may exercise the right to refuse treatment to any person, or part of the body, for just and reasonable cause.
- 2.6 Do not exploit or abuse relationships with clients.
- 2.7 Do not place financial gain ahead over the wellbeing or welfare of the client.
- 2.8 Conduct their business and professional activities with honesty, integrity, and respect the views and beliefs of their clients/patients/users in regard to gender, ethnic origins, cultural background, sexuality, lifestyle, age and social status.
- 2.9 Do not allow personal views of clients to affect the treatment. Refrain from unjust discrimination or criticism of clients or other healthcare professionals. They must seek to maintain good relationships and co-operate with other health care professionals
- 2.10 Carry out appropriate risk assessments on the premises, clinic and working environment to reduce the risk of harm to yourself, clients, employees, fellow workers and members of the public.
- 2.11 Justify your actions and decisions if required to. You must be able to clinically reason your treatment choice and make informed decisions in the best interest of the client/patient.
- 2.12 Aim to provide up to date, evidence based practices for all clients/patients.
- 2.13 Physical examinations and/or treatments of children under the age of 16 must always be in the presence of a parent or guardian.
- 2.14 Take appropriate action to safeguard children and vulnerable individuals in your care.
- 2.15 Act appropriately to ensure the safety and well-being of children and vulnerable adults in your care.
- 2.16 Be aware of cautions and contraindications for massage and bodywork and refrain from treatment where appropriate.



3.0 Professionalism

- 3.1 You, the member are responsible for your own conduct in all professional settings.
- 3.2 Act responsibly and appropriately when using all forms of communication including, verbal, written and recorded or on social media, internet or electronic.
- 3.3 Do not intentionally mislead individuals including but not limited to clients, members of the public, members of the STA with all forms of communication and advertising.
- 3.4 You have a responsibility to maintain and develop your knowledge and skills within your scope of practice.
- 3.5 Act appropriately in all professional settings to promote the integrity and perceptions of the profession and STA.
- 3.6 Practitioners should be sensitive to a client's/patient's/users modesty at all times and provide appropriate draping and treatment in a way that ensures their comfort and privacy. Also to be sensitive to any special needs e.g. language difficulties, disability or if they wish a companion to be present.
- 3.7 Where a client is already receiving medical treatment for their presenting condition, treatment should not be commenced without prior consent from the respective practitioner.
- 3.8 Should not carry out any treatment or intervention on a client/patient who has already received similar treatment for the same condition from another practitioner unless the client has, of his/her own volition, decided to abandon the original practitioner's treatment
- 3.9 A practitioner should at all times maintain the appropriate appearance, behaviour and conduct expected of the professional person; any abuse of alcohol, drugs, or good order is deemed to be a serious offence against this code.
- 3.10 Ensure your own fitness and wellbeing in order to provide effective care. A practitioner should not practice if any illness, physical or mental, affects their practice.



4.0 Data and UK GDPR

The General Data Protection Regulation 2016 and the Data Protection Act 2018 set out the requirements for handling and processing personal data and 'special category' data. (Special category data used to be known as 'sensitive personal data'.)

4.1 GDPR (2016). The GDPR, the applied GDPR and this Act protect individuals with regard to the processing of personal data, in particular by;

4.1.1 requiring personal data to be processed lawfully and fairly, on the basis of the data subject's consent or another specified basis,

4.1.2 conferring rights on the data subject to obtain information about the processing of personal data and to require inaccurate personal data to be rectified, and

4.1.3 conferring functions on the Commissioner, giving the holder of that office responsibility for monitoring and enforcing their provisions.

4.2 When carrying out functions under the GDPR, the applied GDPR and this Act, the Commissioner, in this case you the member, must have regard to the importance of securing an appropriate level of protection for personal data, taking account of the interests of data subjects, controllers and others and matters of general public interest.

4.3 Personal data is any data that relates to an individual who can be directly or indirectly identified, in particular by referring to an 'identifier' (for example, a name or identification number). Special category data includes information about racial or ethnic origin, political opinions, religious or philosophical beliefs, membership of a trade union, physical or mental health or condition, sexual life or sexual orientation, and genetic and biometric data processed for the purpose of identifying a person. Personal data that relates to criminal convictions and offences is no longer included within the definition of sensitive personal data, but similar additional safeguards apply to its processing.

4.4 Processing personal data includes, but is not limited to: holding, obtaining, recording, using and disclosing information.

4.5 The General Data Protection Regulation 2016 and the Data Protection Act 2018 apply to all forms of media, including paper and images. They apply to confidential client information but are far wider in their scope. For example, they also cover personnel records and opinions about an individual.

4.6 The General Data Protection Regulation 2016 introduces more detailed transparency and information-giving requirements, as well as data subject rights. The data subject rights include, for example, the right to be forgotten, the right to access



personal data, and the right to have data corrected and erased. You should have privacy policies in place to communicate these effectively to clients.

4.7 Under the Data Protection (Charges and Information) Regulations 2018, every organisation or sole trader that processes personal information must pay a data protection fee to the Information Commissioner's Office (ICO). They do not have to do this if all the processing of personal data they do is exempt under the Regulations.

4.8 The Privacy and Electronic Communications (EC Directive) Regulations 2003 set rules about sending marketing and advertising electronically (for example, by fax, email, instant message or text). You will need to make sure you comply with these rules when you contact clients by electronic means for marketing purposes (for example, when sending a newsletter). Any electronic marketing communications should only be sent to a client if the client: a) has consented to this (and this consent needs to meet the General Data Protection Regulation 2016 consent requirements), or b) was given the opportunity to opt out each time a communication is sent.

4.9 All members must:

4.9 i. Effectively protect any personal information collected against improper disclosure.

4.9 ii. Do not disclose information about a client – including the identity of the client – either during or after the lifetime of the client, without the consent of the client or the client's legal representative.

4.9 iii. Understand that anyone to whom personal information is disclosed is given to them in confidence and that they must respect this.

4.9 iv. Personal information MUST BE DISCLOSED in the public interest only when:

- a) you are satisfied that identifiable data is needed for the purpose, or
- b) it is not practicable to anonymise the data.

4.9 v. If you do make the decision to disclose personal information you must, in each case:

- a) tell the client beforehand, if it is reasonably practical
- b) make clear to the client what information you will disclose, the reason for the disclosure and the likely consequences of the disclosure
- c) disclose only what is relevant
- d) make sure that the person or organisation you give the information to holds it on the same terms as those that you are subject to.

4.9 vi. When you disclose confidential information you must:

- a) record in writing the reasons for the disclosure, to whom it was made, the date of disclosure and the way in which it was made (for example, written, oral)
- b) record in writing the information disclosed and the justification for the disclosure
- c) if the client/patient is not told before the disclosure takes place, record in writing the reasons why it was not reasonably practical to do so



4.10 It is important that the consent is freely given, which means you cannot rely on pre-ticked opt-in boxes. You will also need to make sure this is covered in your privacy policy and that you have systems and processes in place which allow you to record the consent and any opt-out requests.

4.11 Members should maintain up-to-date records of all clients in regard to medical history, presenting complaints, assessment and procedures performed. This should follow the data protection guidance listed above.

4.12 The record keeping process should be as transparent as possible, and clients should be made aware that records are being kept.

4.13 All records should be kept according to the 8 principles of the Data Protection Act (1998, GDPR 2018). (Full explanations regarding each principle identified below can be found at: www.ico.org.uk)

These state that data must be: i) fairly and lawfully processed ii) processed for limited purposes iii) adequate, relevant and not excessive iv) accurate v) not kept for longer than is necessary vi) processed in line with your rights vii) secure viii) not transferred to countries without adequate protection.

4.14 Where a practitioner works as a part of a group practice or clinic, members should ensure that the practice or clinic is registered under the Data Protection Act (1998) where appropriate.

4.15 Records must be kept in a secure place, adequately safeguarded and not accessible to third parties. Computerised records must be kept secure from unauthorised access. Members of PAs are advised to seek advice relating to the requirement to register under the Data Protection Act where client records are computerised. (registration information is available at: www.ico.org.uk)

4.16 Practitioners should safeguard the confidentiality of all client/patients/users information. Disclosure to third parties, including other healthcare professionals should be only with the client's written permission. (Where information is disclosed to other parties, advice should be sought relating to the requirement to register under the Data Protection Act. Where card payments are taken by individuals not covered by a group Data Protection Registration, it is recommended that advice is sought relating to the requirement to register.)

4.17 Client/patients/users records need to be kept for seven years, in the case of children for 5 years after their 21st birthday, for terminally or seriously ill clients/patients/users records should be retained indefinitely.



5.0 Commitments to education and Continual Professional Development (CPD).

5.1 Ensure by means of continuous update of information and training, a level of competence consistent with the highest standards of the profession.

5.2 Consistently maintain and improve their professional knowledge, developing a portfolio of education and CPD which meets the requirements set out in the STA guidance.

5.3 Portfolios and evidence must be uploaded to your individual file and made available for audit by representatives of the STA.

6.0 Working environment. Your responsibilities and duties.

6.1 Members must follow UK Government legislation and Sports Therapy Association (STA) best practice guidelines, with regards to protection and action against Covid-19.

6.2 Report all notifiable disease states according to applicable laws.

6.3 Comply with the Health and Safety at Work etc Act (HSWA) 1974 and be aware of your responsibilities and duties as;

6.3.1 An employer, towards employees and members of the public

6.3.2 An employee towards themselves and others.

6.3.3 A self-employed individual towards themselves and others.

Further information may be found at <https://www.hse.gov.uk/legislation/hswa.htm>

6.4 Carry out and document appropriate risk assessments to minimise the risk of spread of infectious diseases within the working environment and surrounding areas

6.4.1 These must be continually reviewed and updated if any changes to circumstances, regulation, personnel or to the physical structure of the business are made.

6.4.2 All employees and those who work or are carrying out work, including contractors and maintenance within a premises, building or business you are responsible for must receive appropriate training for all risk assessments and notified of any documented changes at the earliest possible time.

6.5 Control of substances hazardous to health (COSHH). All members must complete COSHH risk assessments for those substances that are used within the working environment that clients, employees or other individuals may come into contact with. These must be continually monitored, updated and documented by the appropriate person in line with the Health and Safety Executive guidelines <https://www.hse.gov.uk/pubns/guidance/coshh-technical-basis.pdf>



7.0 Use of STA logo, name, intellectual property

7.1 Members must only display the Sports Therapy Association logo that relates to your agreed membership category.

7.2 Members agree to not use the STA name and/or logo in a setting that may result in degradation of the STA reputation or have a negative impact on the STA as a whole.

7.3 Your actions and behaviour should not damage the reputation of the STA, the profession or industry standing..

7.4 Information, guidance and advice provided is for use by the members of the STA and should not be shared or distributed without prior permission of the STA.

7.5 You must inform the STA if you are subject to any professional disciplinary process or have concerns raised against your conduct and competence.

7.6 You must inform the STA if you are charged or convicted of any criminal offences.

7.7 Members shall cooperate with all investigations and audits: This includes compliance with audits of registration records, insurance records and Continuing Professional Development or any other audit assessing your Fitness to Practise

8.0 Online, digital and written content aligned to the STA and its use by members

8.1 Information within members only areas of STA website, thesta.co.uk, social media and other online media avenues is produced and is intended for the use and consumption of existing STA members only.

8.2 Sharing of STA members only information including but not limited to, professional guidance, member discussions, CPD content, discount codes and member information including names of STA members is not permitted.

8.3 Members are not permitted to distribute or share within any given STA digital platform, copyright protected information and/or content that they do not own, do not have the rights to or do not have prior consent from the copyright owner to distribute.

9.0 Concerns and Whistleblowing

9.1 All members have a responsibility to safeguard and protect members of the general public. This includes raising concerns and/or reporting of any incidences of malpractice, unethical procedures, wrongdoing and illegal activity.



9.1.1 Concerns and whistleblowing within your own workplace. If you are an employee, agency worker or self employed worker.

9.1.2 Concerns or whistleblowing regarding a healthcare, clinical or medical professional that is outside of your immediate place of work.

9.1.3 Within a work placement environment where you are a trainee or student where the work or placement is taken for the purposes of education, training, clinical experience requirements.

In any instances detailed in section 8.0, you should not be treated unfairly or adversely affected if you report or raise concerns or act as “Whistle Blower”. In this instance you are protected by law.

Cases that may not fall into the category of Whistleblowing may be; personal grievances (for example bullying, harassment, discrimination) are not covered by whistleblowing law, unless your particular case is in the public interest.

You can raise your concern at any time about an incident that happened in the past, is happening now, or you believe will happen in the near future.

Concerns, queries, complaints and disputes may be made in writing to gary@thesta.co.uk

Or Advisory, Conciliation and Arbitration Service (ACAS) <https://www.gov.uk/acas>