

# I-Therapy Code of Ethics

(Mental Wellness Practitioner / Therapy-Informed Practice)

## Preamble

This Code of Ethics sets out the core values and ethical commitments of practitioners affiliated with **I-Therapy**. It exists to guide professional conduct, support clear ethical decision-making, foster accountability, and uphold the wellbeing of clients, whānau, and communities.

I-Therapy is committed to practice that is **therapy-informed, culturally responsive, and aligned with Te Tiriti o Waitangi**. We recognise that mental wellness support in Aotearoa New Zealand sits within wider consumer rights and privacy obligations, and we aim to deliver a service that is safe, respectful, and transparent.

### Practitioner identity and scope:

At I-Therapy, the primary service is **mental wellness support**. This may include supportive conversation, skills-building, values/clarity work, nervous-system regulation strategies, behaviour change support, and practical planning. Where a client's needs fall outside our scope or level of competence, we will discuss referral and support options.

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## Section A: Fundamental Ethical Principles

Practitioners commit to:

1. **Mana and dignity:** Uphold the inherent dignity, autonomy, and worth of every person.
2. **Beneficence and non-maleficence:** Act in the client's best interests and take reasonable steps to prevent harm.
3. **Integrity and accountability:** Practise honestly, responsibly, and with personal accountability.
4. **Cultural safety and responsiveness:** Practise with cultural humility, ongoing learning, and respect for the lived realities of diverse communities.
5. **Te Tiriti o Waitangi:** Uphold Te Tiriti principles in practice, including partnership, participation, and protection.

6. **Boundaries and power:** Maintain professional boundaries, acknowledge power dynamics, and avoid exploitation.
  7. **Confidentiality:** Protect client privacy within ethical and legal limits.
  8. **Equity and social justice:** Challenge discrimination and promote inclusion and fairness.
  9. **Practitioner wellbeing:** Maintain fitness to practise, seek support when needed, and step back from practice if impaired.
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## Section B: Responsibilities to Clients

Practitioners will:

1. **Provide a respectful, safe relationship**
  - Treat clients with compassion, respect, and cultural sensitivity.
  - Create an environment where clients can give honest feedback and exercise choice.
2. **Informed consent and transparency**
  - Ensure clients understand the nature of the service (mental wellness support), what it may involve, likely benefits/limits, confidentiality limits, fees, cancellation policy, and their right to stop at any time.
  - Obtain informed consent for any significant change in approach.
3. **Confidentiality and safety**
  - Maintain confidentiality unless:
    - there is an immediate risk of serious harm,
    - there is serious concern for the safety of a child or vulnerable person,
    - disclosure is required by law/court process, or
    - the client provides consent.

- Where possible and safe, we aim to discuss any necessary disclosure with the client beforehand.

#### **4. Competence, scope, and referrals**

- Practise within scope of competence and training.
- Seek supervision/consultation and refer when appropriate (e.g., acute risk, complex trauma requiring specialist service, severe substance dependence, psychiatric instability, or when medical review is indicated).

#### **5. Professional boundaries and dual relationships**

- Avoid dual relationships that could impair professional judgement or increase risk of harm (including romantic or sexual relationships with current clients).
- If dual roles are unavoidable (e.g., small communities), practitioners will use transparency, supervision, careful boundary planning, and documented informed consent.

#### **6. Endings, transitions, and continuity**

- Manage endings with care.
- Avoid abandonment by discussing closure thoughtfully and supporting referral or continuity of care where reasonably possible.

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## **Section C: Responsibilities to Society**

Practitioners commit to:

### **1. Equity, inclusivity, and human rights**

- Actively oppose discrimination and uphold inclusivity in service access and delivery.

### **2. Responsible influence**

- Communicate publicly (including social media) in ways that are respectful, accurate, and do not compromise client confidentiality.

### **3. Community wellbeing**

- Where appropriate, support social and systemic wellbeing through advocacy, education, and ethical leadership—without exploiting clients or blurring professional boundaries.
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## Section D: Responsibilities to Te Tiriti o Waitangi

Practitioners commit to:

### 1. Partnership

- Respect and engage with Māori as tangata whenua, recognising Māori perspectives on health and wellbeing.

### 2. Participation

- Support equitable access and culturally safe engagement for Māori.

### 3. Protection

- Protect Māori rights, taonga, and wellbeing, and commit to ongoing cultural learning.

### 4. Cultural supervision and mātauranga Māori

- Engage with cultural supervision/consultation where appropriate and remain open to mātauranga Māori approaches when invited and clinically relevant.
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## Section E: Responsibilities to Colleagues and the Profession

Practitioners will:

1. **Treat colleagues with respect** and contribute to a collegial, inclusive professional environment.
2. **Use appropriate channels for concerns**
  - If concerned about unethical or unsafe practice by another professional, practitioners will respond respectfully, maintain confidentiality, and use appropriate professional pathways.

### 3. **Commit to professional development**

- Maintain ongoing learning in ethics, cultural safety, supervision, and relevant practice skills.

### 4. **Cooperate with complaints processes**

- Engage fairly and transparently with any formal complaint or investigation process.
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## **Section F: Use of Technology and Online Services**

Practitioners will:

1. **Maintain equivalent ethical standards** for online and in-person work.
  2. **Use privacy-respecting systems** where practical (secure platforms, strong passwords, appropriate device security).
  3. **Explain digital risks clearly**
    - Inform clients of limits/risks (e.g., email is not always secure, platform limits, device privacy).
  4. **Maintain professionalism online**
    - Avoid online interactions that blur boundaries (e.g., social media “friend” relationships with clients).
  5. **Stay current** with evolving tech, privacy expectations, and ethical practice.
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## **Section G: Record Keeping and Documentation**

Practitioners will:

1. **Keep records that are accurate and respectful**
  - Notes should support continuity of care and ethical practice, and avoid unnecessary or judgemental detail.

## 2. **Store information securely**

- Protect health information in line with NZ privacy requirements (including access control and secure disposal).

## 3. **Support client access and correction**

- Clients have the right to request access to their information and request corrections, subject to lawful limitations.

## 4. **Follow legal retention expectations**

- Records will be retained and disposed of in line with relevant legal and professional guidelines.

## 5. **Know relevant NZ frameworks**

- Practitioners will remain familiar with key obligations that intersect with safety, privacy, and responding to serious risk.

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# Section H: Financial and Professional Responsibilities

Practitioners will:

## 1. **Be transparent about fees and policies**

- Fees, cancellation terms, and payment expectations must be clear and agreed in advance.

## 2. **Avoid financial exploitation**

- Do not exploit clients for financial, material, or personal gain.

## 3. **Manage gifts ethically**

- Consider the meaning and impact of gifts; avoid situations that create obligation, dependency, or boundary confusion.

## 4. **Hold appropriate cover**

- Where practicable, maintain professional indemnity/public liability insurance appropriate to the service.
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## Section I: Ethical Decision-Making

Practitioners will:

1. Use reflection, supervision/consultation, and this Code to navigate ethical dilemmas.
  2. Consider: client safety, autonomy, cultural context, power dynamics, confidentiality, and foreseeable consequences.
  3. Document key decisions where clinically or ethically significant.
  4. Practise with humility—being willing to repair, learn, and adjust.
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## Section J: Feedback, Concerns, Review, and Accountability

### 1. Feedback and concerns

- Clients are encouraged to share feedback if something isn't working. Practitioners will take concerns seriously and work to resolve issues **quickly and respectfully**.
- If a client prefers **independent support**, a free independent advocacy service is available to help them understand their options and speak up about their care. Clients may also contact the **Health and Disability Commissioner (HDC)** at any time. Relevant contact details can be provided on request.

### 2. Review cycle

- This Code is reviewed **biennially** (or sooner if needed) to reflect evolving legal, cultural, and professional contexts.

**Effective Date:** 16.06.2025

**Next Review:** 16.06.2026

**Approved by:** Gareth Hines, Director of I-Therapy