CAPA

CODE OF ETHICS AND PROFESSIONAL CONDUCT

Standards for Ethical, Safe, and Patient-Centred Ayurvedic Practice

A professional framework for CAPA members

1. Purpose and Application

The Canadian Ayurvedic Practitioners Association (CAPA) Code of Ethics and Professional Conduct (the "Code") establishes the ethical principles and professional responsibilities expected of CAPA members. Its purpose is to protect the public, promote safe and respectful Ayurvedic care, and uphold the integrity and reputation of Ayurvedic practice in Canada.

This Code applies to CAPA members in all professional activities, including consultations, assessments, treatment planning, education, referrals, recordkeeping, public communications, and interactions with patients, colleagues, students, and the wider community.

Members are expected to comply with applicable laws, regulations, CAPA policies, and the limits of their individual education, training, competence, and authorization. Where a legal requirement imposes a higher standard, the legal requirement prevails.

2. Foundational Principles

2.1 Patient-centred care

Members place the safety, dignity, autonomy, and well-being of each patient at the centre of professional decisions. Care must be compassionate, individualized, culturally respectful, and responsive to the patient's values, circumstances, and preferences.

2.2 Confidentiality and privacy

Members safeguard personal and health information, disclose it only with appropriate authority or where legally required, and comply with applicable privacy legislation, including PIPEDA where applicable and relevant provincial requirements.

2.3 Honesty and integrity

Members communicate truthfully about their qualifications, membership status, services, fees, methods, limitations, and expected outcomes. They must not misrepresent credentials, guarantee results, fabricate records, or make deceptive, exaggerated, or unsupported claims.

2.4 Scope and competence

Members provide only services for which they are appropriately educated, trained, competent, and legally permitted. They recognize limitations, seek consultation when needed, and refer patients to qualified healthcare professionals when needs fall outside their scope or require medical assessment.

2.5 Professional boundaries

Members maintain clear, appropriate boundaries and avoid relationships, conduct, or conflicts of interest that may impair professional judgment, exploit a patient, or compromise patient welfare. Personal, financial, or other interests must never take precedence over the patient's interests.

2.6 Continuing competence

Members maintain and develop their knowledge and skills through continuing professional development, reflection, appropriate consultation, and engagement with relevant traditional knowledge and contemporary evidence. Members comply with applicable CAPA continuing professional development requirements.

3. Ethical Responsibilities to Patients

- Put patient safety and well-being first, and provide care with dignity, compassion, fairness, and cultural sensitivity.
- Explain the proposed assessment and care plan in clear language, including its purpose, rationale, anticipated benefits, material risks, uncertainties, alternatives, fees, and relevant limitations.
- Obtain voluntary, informed consent before commencing a service or treatment, and renew consent when the plan or circumstances materially change.
- Respect a patient's right to ask questions, decline any recommendation, withdraw consent, or discontinue care without coercion or retaliation.
- Maintain accurate, timely, complete, and secure clinical records, including relevant history, assessment findings, consent, recommendations, progress, communications, and referrals.
- Protect patient privacy and confidentiality, including when using electronic systems, photographs, recordings, messaging, or third-party services.
- Use appropriate hygiene, infection-prevention measures, safe equipment practices, and responsible handling, storage, and disclosure of herbal or other therapeutic preparations.
- Consider contraindications, allergies, possible adverse effects, and potential herb–drug or treatment interactions; explain material safety concerns and take appropriate action when an adverse event is suspected.
- Monitor the appropriateness and progress of care, revise or discontinue recommendations when warranted, and avoid delaying necessary medical or emergency care.
- Provide reasonable continuity of care or appropriate transition arrangements when ending or transferring a professional relationship.
- Make clinical records available to patients in accordance with applicable law and legitimate access procedures.

4. Ethical Responsibilities to the Profession

- Uphold the dignity, integrity, and reputation of Ayurvedic practice through ethical, respectful, and accountable conduct.
- Represent education, credentials, professional designations, CAPA membership, experience, and scope of practice accurately in all settings and communications.
- Cooperate honestly with CAPA processes and comply with applicable professional standards, policies, and decisions.
- Raise concerns about suspected unethical, unsafe, fraudulent, or incompetent practice through appropriate channels, acting in good faith and respecting confidentiality and due process.
- Treat colleagues, students, educators, and other practitioners with respect; do not engage in harassment, intimidation, malicious criticism, or misrepresentation.
- Support the learning and professional development of students and peers within one's competence, and provide supervision only when qualified and authorized to do so.
- Disclose and appropriately manage conflicts of interest, including financial interests in products, referrals, or services recommended to patients.
- Contribute constructively to CAPA's mission and to the continued development of ethical, safe, and accountable professional practice.

5. Ethical Responsibilities to Society

- Promote public health and wellness through responsible, evidence-informed practice that distinguishes traditional Ayurvedic concepts from established scientific findings.
- Avoid false, misleading, exaggerated, fear-based, or unsubstantiated claims, including claims to diagnose, cure, treat, or prevent specific diseases where not legally authorized or adequately supported.
- Respect cultural diversity, individual beliefs, and the dignity and rights of all people; do not discriminate on any prohibited or arbitrary basis.
- Respect traditional knowledge and its cultural context while communicating transparently about evidence, uncertainty, safety, and limitations.
- Collaborate respectfully with physicians, nurses, pharmacists, and other healthcare professionals when collaboration supports patient safety and is consistent with consent and privacy obligations.
- Act promptly and responsibly when a public safety concern, serious risk, or suspected abuse or neglect triggers a legal or professional duty to report.

6. Scope of Ayurvedic Practice

CAPA members must understand and communicate the boundaries of their individual scope of practice. The modalities and activities below are a general description of Ayurvedic services and do not expand any member's legal authority or competence. Training, supervision, setting, applicable law, and individual qualifications determine whether a service may be offered.

6.1 Activities that may fall within Ayurvedic practice

- Ayurvedic wellness assessment, including Prakriti and Vikriti-oriented inquiry, within the practitioner's competence and legal authority.
- Traditional Ayurvedic assessment methods, such as Nadi Pariksha, when appropriately trained and presented without implying a medical diagnosis.
- Dietary, nutrition-related, lifestyle, and daily-routine education informed by Ayurvedic principles.
- Herbal and botanical education or protocols using appropriate preparations, with attention to safety, contraindications, interactions, and product quality.
- Yoga, pranayama, meditation, and mind-body wellness guidance within the practitioner's training.
- Ayurvedic bodywork or wellness modalities, such as Abhyanga, Shirodhara, or Marma-based approaches, only where appropriately trained, safe, and legally permitted.
- Panchakarma-related services only where the practitioner has specific training, the setting is appropriate, and the procedure is legally permitted; higher-risk procedures require particular caution and may be outside a member's authority.
- Health education, wellness coaching, and supportive counselling that do not cross into regulated mental-health or other restricted services.

6.2 Activities outside the general scope unless separately authorized

- Diagnosing, treating, or holding oneself out as treating diseases where such activity is restricted by law or beyond the practitioner's authorization.
- Prescribing pharmaceutical drugs or changing a patient's prescribed medication.
- Performing surgery or any procedure for which the practitioner is not qualified and legally authorized.
- Claiming to cure, treat, or prevent a specific disease without lawful authority and adequate substantiation.
- Ordering or interpreting medical laboratory or diagnostic tests unless separately licensed or otherwise legally authorized.

- Providing services reserved to physicians, nurses, or other regulated professionals without the required licence or authorization.
- Advising a patient to delay, avoid, or discontinue necessary medical assessment or treatment.

7. Evidence-Informed and Safe Practice

Members should integrate relevant traditional Ayurvedic knowledge with contemporary evidence, professional judgment, and patient preferences. They must communicate the strength and limitations of available evidence honestly and must not present traditional explanations as established biomedical facts.

Before recommending a product or intervention, members should consider its identity, quality, intended use, dose or method of use, contraindications, interactions, potential adverse effects, and the patient's circumstances. Members must take reasonable steps to ensure the practice environment is clean, safe, accessible where practicable, and appropriate to the services offered.

Members must recognize warning signs and circumstances requiring urgent or specialized care. Emergency symptoms should be directed to emergency services, and non-emergency concerns outside the member's scope should be referred promptly to an appropriate healthcare professional.

8. Consent, Communication, and Fees

Consent must be informed, voluntary, specific to the proposed service, and documented appropriately. Members should use language the patient can understand and take reasonable steps to accommodate communication needs.

Before care begins, members should explain fees, payment terms, cancellation policies, product costs, and any relevant financial relationships. Marketing, testimonials, social media content, and educational materials must be truthful, respectful of privacy, and compliant with applicable law and CAPA standards.

Members must not use a patient's vulnerability, fear, dependency, or trust to pressure the patient into purchasing products, continuing services, or accepting recommendations.

9. Professional Boundaries and Conflicts of Interest

Members must not exploit patients sexually, emotionally, financially, or otherwise. They should avoid dual relationships that could impair objectivity or place the patient at risk. Where a potential conflict cannot reasonably be avoided, it must be disclosed and managed transparently, with the patient's welfare taking priority.

A member's recommendations must be based on the patient's needs and professional judgment, not undisclosed commissions, personal benefit, or commercial pressure.

10. Records, Privacy, and Information Security

Members must maintain records in a manner that supports continuity, accountability, and patient safety. Records should be accurate, dated, securely stored, access-controlled, and retained or disposed of in accordance with applicable legal and professional requirements.

Members must obtain appropriate consent before collecting or using patient images, audio, video, or information for purposes beyond direct care, such as education, marketing, research, or publication. De-identification should be used where appropriate, but must not be treated as a substitute for required consent or legal safeguards.

11. Referrals, Collaboration, and Continuity

Members must recognize when a patient's needs exceed their competence or legal scope and make timely referrals to an appropriate healthcare professional. Referrals should be explained respectfully, and relevant information may be shared only with appropriate consent or other lawful authority.

Members should not disparage other healthcare professionals or discourage patients from seeking medically indicated care. Collaboration should be professional, transparent, and focused on patient safety.

12. Accountability, Concerns, and Complaints

Members are accountable for their conduct and are expected to respond honestly and respectfully to questions or concerns about their practice. Suspected breaches of this Code should be raised through CAPA's applicable reporting or complaint procedures.

CAPA's complaint and review processes should be conducted fairly, impartially, and with appropriate confidentiality, subject to the requirements of law and procedural fairness. Members are expected to cooperate with authorized reviews and must not retaliate against anyone who raises a concern in good faith.

Patients and members may consult CAPA's public protection and contact resources for information about submitting a concern:

Complaint Resolution: https://ayurvedicpractitioners.ca/public-protection/complaint-resolution

CAPA Contact: https://ayurvedicpractitioners.ca/contact

13. Patient Rights

Patients receiving care from a CAPA member should be able to:

- Be treated with dignity, respect, and cultural sensitivity.
- Receive a clear explanation of the proposed care plan and its rationale, benefits, risks, limitations, and costs.
- Provide, decline, or withdraw informed consent at any stage.
- Ask about the practitioner's qualifications, training, scope, and CAPA membership status.
- Request access to their clinical records in accordance with applicable law.
- Have personal and health information handled confidentially and securely.
- Receive a referral when their needs are outside the practitioner's competence or scope.
- Raise a concern or file a complaint without intimidation or retaliation.

14. Commitment to Compliance

By maintaining CAPA membership, each member is expected to understand, uphold, and apply this Code in good faith. Ethical practice requires ongoing reflection, accountability, respect for patient choice, and a continuing commitment to public protection.

This document is a professionally organized draft based on the guidelines provided. It should be reviewed by CAPA and qualified legal or regulatory counsel before being represented as an official, adopted, or legally authoritative CAPA policy.