

Recertification Handbook

For the Certified Classical Homeopath (CCH) Credential





The CHC IS A MEMBER OF THE institute for Credentialing Excellence (ICE) AND THE CHC Certification Program is accredited by the National Commission for Certifying Agencies (NCCA).



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SECTION 1 ABOUT THE CHC

The Council for Homeopathic Certification (CHC) was formed in 1991 as a non-profit 501(c)(6) organization with the vision of a healthcare system that encompasses certified classical homeopathic practitioners who are accessible by all. Acting as an autonomous governing board, the CHC maintains oversight and responsibility for all certification and recertification policy decisions, including governance, eligibility standards, appeals and disciplinary actions and the development, administration, scoring, and reporting of assessment instruments.

In July 2017, the CHC was accredited by the <u>National Commission for Certifying Agencies</u> (NCCA), designating it as the only accredited homeopathic certification organization in the industry. NCCA standards require that certifying exams meet psychometric validity, reliability and scoring standards and that certification processes adhere to best practices for certification organizations. The CHC is also an organizational member of the <u>Institute for Credentialing Excellence</u> (ICE). ICE is a private and voluntary membership organization that provides educational, networking, and other resources for organizations like the CHC that serve the credentialing industry. The CHC was reaccredited in 2022 for the next five years.

A. CHC MISSION

The Mission of the CHC is to advance the homeopathic profession by certifying individuals who meet and maintain a recognized standard of professional and ethical competence in classical homeopathy and to assist the public in choosing appropriately qualified homeopaths.

B. NON-DISCRIMINATION POLICY

The CHC does not discriminate based on race, color, age, gender, sexual orientation, political or religious beliefs, disability, marital status, national origin, or ancestry.

C. CONFIDENTIALITY POLICY

Confidential information (non-public information including, but not limited to, name, address, social security number, bank, or credit account numbers, financial or medical information, certification numbers, etc.) is protected by federal and state statutes. To protect privacy, CHC's database of personal information is accessible only by designated staff and contractors operating under a nondisclosure agreement. This database may also be used in aggregate (such as pass rates, number of certificants, score trends) for the purpose of research reports and published data.

Certificant information remains confidential, with the exclusion of whether a certificant is current and in good standing. Unless required by law, written authorization by the certificant is needed to release test score information. Test score or pass/fail status will not be provided by phone.

Members of the public may verify that a CHC-certified homeopath is in good standing via digital badge and the directory coming soon.



SECTION 2 BENEFITS OF CHC RECERTIFICATION

CCH practitioners in good standing qualify for the following benefits:

- CHC certification equates homeopathy with other certified healthcare professions
- CCH credential provides greater legal and public recognition of homeopathy
- CCH credential promotes homeopathy as a recognized profession
- Promote your practice on the CHC website "Find a Homeopath"
- Continue to build professional knowledge through recertification
- Support the profession by participating in examination development activities, task forces, or CHC committees
- Be considered for nomination to the CHC Board of Director CCH-eligible benefits offered by homeopathy organizations, homeopathic pharmacies, and professional liability insurance strengthens the community



SECTION 3 ABOUT RECERTIFICATION

Active certificants in good standing may use the CCH credential. Beginning the year AFTER certification is earned, annual recertification is required to maintain a good-standing status.

A. PURPOSE OF RECERTIFICATION

The recertification process requires CHC-certified practitioners to maintain and enhance skills and knowledge beyond the minimum competence achieved through initial certification. Through Continuing Professional Development (CPD), practitioners safeguard quality services for the public and reinforce professional accountability to homeopathic and other healthcare communities. Certificants who complete recertification requirements on or before the December 31st deadline each certification year maintain good standing status.

CPD involves two important steps:

- 1. Participation in <u>ACHENA</u>-approved continuing education events or other approved activities that support professional development and personal growth.
- 2. Submission and evaluation of recertification requirements within a standardized process

B. RECERTIFICATION PROCESS OVERVIEW

Recertification is an annual online process that relies on CHC-certified practitioners accessing their <u>MyCHC</u> accounts through the website and maintaining updated account information.

The recertification process requires three main steps:

- 1. Enter your Continuing Education Units (CEUs) Information.
- 2. Attest to the CHC Code of Ethics, Clients' Healthcare Rights and Fitness to Practice.
- 3. Complete the payment for recertification fees and then submit your application.

Contact information is maintained by the certificant via MyCHC and accessed by secure password. Submission of all certification requirements must be received by December 31st each year.

Certificants are able recertify starting July 1st. The CHC will not begin review of recertification submissions until August 1st and will only review submissions for which all required elements are complete.

All applicants, except those selected for audit, will automatically receive a new certificate and digital badge immediately. The certificate is emailed to you and stored under My Credentials. An updated digital CCH badge valid through the upcoming year is automatically uploaded into the My Credentials section of MyCHC except for certificants that are under audit. Those who are under audit will receive a new certificate and updated digital CCH badge in their MyCHC after they pass the audit. Certificants should contact the CHC at chcsupport@homeopathcertification.org if issues arise with the online process.

C. CEU REQUIREMENTS

The CHC requires a total of fifteen (15) Continuing Education Units (CEUs) during each annual recertification



cycle. A minimum of ten (10) CEUs must be Category I – Homeopathy CEUs and up to five (5) may be from Category II – Optional Professional Enhancement CEUs. All 15 CEUs may be from Category I if the corresponding CEU activities are applicable. Supporting documentation must be uploaded. If there are more CEUs than what is needed for recertification in the current year, those CEUs may be carried over to the next (and only the next) recertification cycle with a maximum carry-over of 15 CEUs.

1. Category I: Homeopathy

- A) Volunteer Activities: In any recertification cycle, an applicant can claim a maximum of 7.5 CEUs by combining all the volunteer activities. Volunteer activities are items 1-7 below.
- B) Educational and Miscellaneous activities (items 8-23 below):

Homeopathy CEUs are earned through attendance at or by completion of educational or other approved professional programs and activities relevant to professional classical homeopathy practice. Homeopathy education-related conferences, seminars and post graduate courses must be <u>ACHENA</u>- or <u>CHO</u>-approved to qualify as Category I CEUs. Homeopathy teaching and presenting activities do not require <u>ACHENA</u> or <u>CHO</u> approval.

2. Category II: Optional Professional Enhancement

Category II Optional Professional Enhancement CEUs are earned through qualifying activities that are either non-ACHENA approved homeopathic courses taught by licensed health professionals or registered homeopaths, or activities not directly related to classical homeopathy but directly relevant to providing professional service to clients as follows:

- Non-ACHENA Homeopathy courses taught by licensed health professionals or CCH or equivalent homeopaths
- Non-homeopathy college or university courses focused on topics not directly related to Classical Homeopathy
- Non-homeopathy education taught by a Certified Practitioner in the topic.



3. CEU Activities

Category I Homeopathy Activities	CEUs Earned	Unit	Annual Max
1. CHC Advocacy or Promotion CEU Documents: Must have a letter from the CHC President / CHC PR Committee Chair.	3 CEU	Per Event or Promo	7.5
CHC Board Meeting CEU Documents: Letter from CHC president.	1 CEU	Per Meeting	4
3. CHC Committee Chairperson CEU Documents: Letter from CHC president.	7.5 CEU	Per Year	7.5
4. CHC Committee Work Volunteer CEU Documents: Letter from CHC president / Committee Chair.	1 CEU	Per 3 Hours	5
5. CHC Exam Item Writing CEU Documents: Letter from CHC chair of exam writing committee.	0.5 CEU	Per 1 Approved Item	-
6. CHC Exam item Editing CEU Documents: Letter from CHC chair of exam writing committee.	1 CEU	Per 2 Hours	-
7. Homeopathy Organization Board or Committee Work CEU Documents: Letter from head of Organization with your name, name of the head of Organization, signature and date.	5 CEU	Per Year	5
8. Homeopathy Clinic Volunteer CEU Documents: A clinical director of the clinic writes a letter. The letter must include your name, number of hours, the head of the clinic name, signature and date.	1 CEU	Per 2 Hours	-
9. Conference, seminar, post-graduate course CEU Documents: Certificate of completion, must be on ACHENA approved list. Must include your name, hours attended, presenter name, signature and date. ACHENA seal or statement 'Course is ACHENA approved' needs to show up on the document.	1 CEU	Per Hour	-
10. Homeopathy Article (Published in Professional Journal) CEU Documents: A copy of table of contents, that has name of the Professional Journal, your name and the publishing date.	6 CEU	Per Article	-
11. Homeopathy Book or Manual (Published)	15 CEU	Per Publication	-





CEU Documents: A copy of the title page with the Book or Manual name, your name, and the publishing date.			
12. Homeopathy Book Review (Published) CEU Documents: A copy of table of contents with the review, that has name of the Book, your name and the publishing date of the review.	3 CEU	Per Review	-
13. Homeopathy Conference or Seminar Presentation CEU Documents: One of the following: 1. A schedule of the conference with your name and date of the conference. 2. A letter from the organizer of the conference stating presentation name, your name and date of conference. 3. A copy of the flyer with presentation name, your name, and date of conference.	3 CEU	Per hour	-
14. Homeopathy Course or Curriculum Development CEU Documents :a letter from a head of the school or administrator of the school on the school letterhead verifying your curriculum development.	7 CEU	Per Curriculum	-
15. Homeopathy Journal Article Review (Published) CEU Documents: A copy of table of contents with the review, that has name of the Journal, your name and the publishing date.	1 CEU	Per Review	-
 Homeopathy Presentation, Teaching, or Advocacy to a Non- Homeopath Audience CEU Documents: One of the following: A letter from the organizer of the event stating presentation name, your name and date. A copy of the flyer with presentation name, your name, and date. 	3 CEU	Per Presentation	-
17. Homeopathy Proving Supervision CEU Documents: A letter from initiator of proving that you supervised the proving. The letter must include your name, initiator of proving name, signature and date.	15 CEU	Per Proving	-
18. Editing/Research of the Proving CEU Documents: A letter from initiator of proving that you edited the proving. The letter must include your name, initiator of proving name, signature and date.	15 CEU	Per Proving	-
19. Homeopathy Proving Participation CEU Documents: A letter from supervisor of the proving that	10 CEU	Per Proving	-



you participated in the proving. The letter must include your name, supervisor's name, signature and date			
20. Homeopathy Research CEU Documents: A letter from initiator of research that you spent so many hours on a specific research. The letter must include your name, number of hours, initiator of research name, signature and date.	1 CEU	Per 5 hours	-
21. Homeopathy Study Group instructor CEU Documents: A letter from one of the members of Study group with your name, number of hours, dates of instructor signed by the study group member. The letter must include your name, number of hours of teaching instruction, the study group member name, signature and date.	2 CEU	Per Hour	-
22. Homeopathy Study Group Participation CEU Documents: A letter from the study group instructor stating your name, number of hours of participation in the study group, signature of leader and date. The letter must include your name, number of hours of participation in the study group, instructor's name, signature and date.	1 CEU	Per Hour	-
23. Homeopathy Supervision or Mentoring (Homeopaths or Students of Homeopathy) CEU Documents: A student writes a letter that you supervised him/her/they for so many hours. Must include your name, number of hours, student's name, student's signature and date.	2 CEU	Per Hour	-



practitioner signature and date.

Category II Option Professional Enhancement Activities	CEUs Earned	Unit	Annual Max
24. Non-ACHENA Homeopathy courses taught by licensed health professionals or CCH or equivalent homeopaths	1 CEU	Per Hour	5
CEU Documents: A transcript of the course and a certificate signed by the presenter of the course. Must include your name, number of hours, name of the practitioner, the practitioner signature and date.			
25. Non-Homeopathy College Courses CEU Documents: A transcript that lists the school and the course and a certificate of completion. Must include your name, number of hours, name of the presenter, the presenter's signature and date.	1 CEU	Per Hour	5
26. Non-Homeopathy Education taught by a Certified Practitioner in the topic	1 CEU	Per Hour	5
CEU Documents: A transcript of the course and a certificate signed by the presenter of the course. Must include your name, number of hours, name of the practitioner, the			



4. CEU Documentation

All CEU activities that are entered into MyCHC are subject to review and acceptance by the CHC. In all cases, credit is granted only after the CEU activity has been completed.

5. CEU Time-Limits

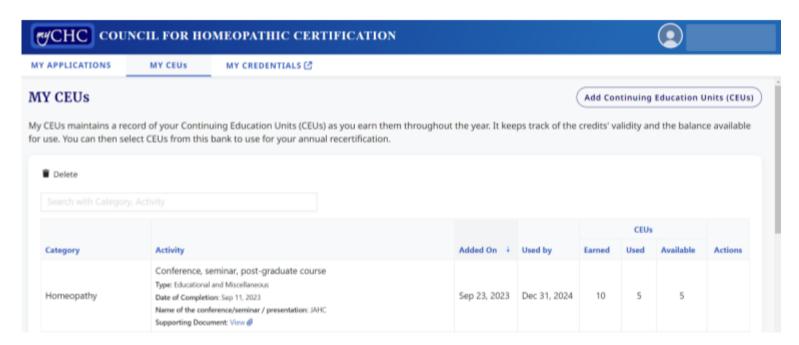
To count toward recertification, participation in a CEU activity must have taken place within the 24 months preceding the recertification deadline (i.e., January 1st of the previous year to December 31st of the current year.). However, up to 15 CEUs earned more than the required 15 for a current recertification cycle may be carried forward (rolled over) and applied to the next year's recertification CEU requirements.

6. CEU Carry-Forwards (Roll-Overs)

The MyCHC system will show how many CEUs have been added and when these CEUs will expire.

7. CEU Document Storage

Each certificant has a My CEUs section within their MyCHC account.





8. CEU Random Audit

The CHC recertification system randomly selects up to 15% of CHC recertification submissions to audit during the recertification cycle. Late recertification submissions are audited during the month in which they are submitted.

Certificants under audit will be notified by email and their CEU documentation in their MY CEUs section will be verified by the CPD committee.

Audit Process:

- Applicants chosen for the audit pool will receive new certificates after the CPD committee completes the audit.
- The CPD committee has 4-6 weeks to either approve the application or request corrections.
- If approved, the certificate is issued, emailed, and stored in the MY CREDENTIALS.

Audit Clarification:

- Applicants in the audit pool with incorrect or insufficient documents will receive an email from the CPD committee requesting clarification or additional documentation.
- They have 60 days from receiving the email to provide clarification or upload CEU supporting documents.
- They will receive notifications at three specific intervals: 7, 3, and 1 day before the 60-day deadline. These notifications will remind them that their credential will lapse on December 31st if the necessary corrections are not submitted before the deadline.

Audit During Lapse Period:

- Applicants picked for an audit close to the deadline will be informed that their status will appear as lapsed after December 31st until the audit concludes.
- If the audit is successful, a new certificate and active badge will be generated.
- If the audit fails, the status remains lapsed. For more information about lapsed credentials, see <u>Lapsed and Expired Credentials</u>.

Reconsideration:

- During the recertification process, applicants can request reconsideration from the CPD committee.
- If an application is rejected, the applicant will receive an email with instructions on how to make such a request.

Grace Period:

- Certificants in lapse status have a two-month grace period from January 1st to February 28thto recertify with a late fee.
- Certificants audited during the grace period have 30 days to address corrections requested by the CPD committee.

The CHC reserves the right to evaluate, at its discretion, all CEU activities on an individual basis, and to accept or deny credits claimed (in whole or in part) according to this policy and other CHC requirements. As part of this review, the CHC may change the number of credits proposed for an activity or program. In addition, the CHC reserves the right to contact any appropriate information source, including individuals or organizations referred to in the documentation submission during



the annual randomly selected CEU audit. The CHC reserves the right to request additional information or clarification about a specific activity prior to final acceptance. The CHC will notify the certificant in writing about any denied CEUs and the reasons for denial.

D. ATTESTATION STATEMENT

Compliance with professional ethics, client/patient rights, and Fitness to Practice reporting is paramount to obtaining and retaining the CCH credential. Truthful answers to compliance questions are required during each recertification process. All records maintained by the CHC are confidential and will only be released by written request or as required by law.

Certificants must truthfully and fully respond to all health and legal questions and provide additional information if necessary. Certificants must also notify the CHC in writing within thirty days about any changes related to Fitness to Practice information. Failure to report changes could result in disciplinary action. All information is reviewed per CHC policies.

If you answer "yes" to any Health Status question, you must upload a personal statement addressing the history and status of any physical, psychological, or substance abuse-related impairments, written documentation from a healthcare professional who has treated you addressing the impairment and your fitness to practice, and attestations that:

- You are no longer impaired (or are currently under treatment for the impairment).
- The impairment and/or treatment for such does not interfere with your ability to practice.

If you answer "yes" to any of the Legal Status questions, you must submit official copies of legal documents related to the charges or claims that supports a personal written statement(s) that include:

- An explanation of the charges or claims
- A statement that the case is still pending in any legal jurisdiction and/or with any state/provincial agency, healthcare professional board, association, or with the CHC OR an explanation of how the charges or claims were resolved

E. Recertification Deadline and Fees

To maintain the CCH credential in good standing, CCH holders must submit all recertification requirements by December 31st each year. All fees are non-refundable as follows:

If submitted by	Recertification Fee*	Late Fee*	Total*
Recertification Deadline	\$170		\$170
(December 31 st)			
January 1 st – February 28 th	\$170	\$75	\$245

Table 1 Non-refundable recertification fees



F. LAPSED AND EXPIRED CREDENTIALS

If recertification requirements are not met by December 31st, the CCH credential lapses, and the certificant may no longer use the CCH credential. Reactivation of a lapsed credential is possible if the credential has been lapsed for two (2) years or less.

Reactivation of a lapsed credential requires four actions:

- 1. Complete and submit the CCH Credential Reactivation Form. To receive the form, please submit an <u>online request</u>.
- 2. Upload documentation of 15 CEUs per lapsed year (see CEU Requirements)
- 3. Pay recertification fee per each lapsed year(s)
- 4. Pay \$100 reactivation fee

If the credential has lapsed for more than two years, the credential is expired. Expired certificants may reactivate the credential by taking the CHC Exam at the Retake Fee.



SECTION 4 ANNUAL RECERTIFICATION INSTRUCTIONS

A. OVERVIEW

The CHC uses an online program called MyCHC to manage data, accept exam applications and process recertifications.

Recertification submissions and payments must be completed prior to midnight Eastern Time on December 31st each year. Late submissions will be assessed late fees as detailed earlier.

Please click on the follow links for specific steps to recertify.

Steps to Set Up Profile
Steps to Recertify



SECTION 5 RECONSIDERATION AND APPEALS

A. RECONSIDERATION REQUEST

A written request regarding denied recertification, reactivation or retired status must include the certificant's name, address, certificate number, and a description of the specific issue or concern(s).

Cerificants may submit requests regarding denied recertification, reactivation or retired status by writing to the CHC at the address below or email (chcsupport@homeopathcertification.org) within 5 business days of receipt of the decision.

Certificants concerns will be forward to the Continuing Professional Development Committee (CPD) for a determination. The certificant will be notified in writing within 30 business days of any action resulting from the inquiry.

Write to:

The Council for Homeopathic Certification PO Box 75 Chartley, MA 02712

B. APPEALS REQUEST

Certificants may submit requests regarding denied recertification, reactivation or retired status by writing to the CHC at the address below or email (chcsupport@homeopathcertification.org) within 5 business days of receipt of the decision.

A written appeal request for reconsideration regarding denied recertification, reactivation or retired status must include the certificant's name, address, certificate number, and a description of the specific issue or concern(s).

Upon denial of reconsideration by the CPD Committee, an appeal may be submitted within 5 business days of notification of the CHC's original decision.

The appeal must be made in writing and include all identifying information and supporting documentation relevant to the appeal. The Appeals Committee reviews the case for any potential inaccuracies and/or miscalculations in determining recertification status, reactivation, or retired status. Decisions of the Appeals Committee are final. The applicant will be notified, in writing, within 30 business days of the Appeals Committee's decision.

Write to:

The Council for Homeopathic Certification PO Box 75 Chartley, MA 02712



SECTION 6 CCH RETIRED STATUS

In recognition of the contributions certified homeopaths have made to homeopathic practice, education, and research throughout their careers, the CHC offers, at the time of retirement, the title of Retired Certified Homeopath. At the time of retirement, the certified homeopath may want to continue to use the designation of certified while indicating he/she has retired from practice. The designation is given to certificants who are no longer practicing, supervising, or teaching homeopathy and have no plans to practice, supervise or teach homeopathy.

A. CCH RETIRED DESIGNATION

The designations CCH(Retired) or CCH(Ret) may be used on documents such as business cards, curriculum vitae, or resumes. With the designation CCH(Retired), retirees are not required to complete the annual recertification process. The one-time fee to obtain retired status is \$75.00.

B. RETIREMENT STATUS REQUIREMENTS

Retirement eligibility requires the CCH to:

- Be certified in good standing with the CHC
- Be retired from homeopathic practice with no plans to return to active homeopathic practice or teaching
- Apply within one year after the expiration of your latest CHC recertification date
- Sign an attestation affirming that the individual is longer practicing, supervising, or teaching homeopathy and has no plans to practice, supervise or teach homeopathy
- Sign the Retirement Status attestation:
 - □ I hereby apply for Retired Status as a CCH Homeopath. I understand that Retired Status depends upon meeting all eligibility criteria. I acknowledge that I have retired from active practice and am no longer practicing, supervising, or teaching homeopathy and have no plans to practice, supervise or teach homeopathy.
 - □ While holding the Retired Status, it will be my responsibility to remain in compliance with all CHC's ethical standards. The CHC has the right to revoke this status if I violate the applicable rules and regulations of the organization. Violation of CHC policy may also include sanctions, suspension and/or revocation of the original CCH credential.
 - □ I agree that, should I resume homeopathic practice, supervision or teaching within two years, I will request the retired designation be removed. In order to recertify after obtaining retired status, I am required to submit a letter requesting Reinstatement to Active Status, submit the required number of CEUs required for recertification during the time the retired status was in



effect and pay a reactivation fee of \$150. If reactivation is requested two years or more after Retirement Status is awarded, I must apply for certification under the current certification requirements which includes passing the exam.

- □ I understand that the information acquired in the application process may be used for statistical purposes and for the evaluation of the certification program.
- □ To the best of my knowledge, the information supplied in this Application for Retired Status is true, complete, correct, and is made in good faith.

C. RETIREMENT STATUS APPLICATION

Submit a <u>Retirement Status Application request form</u> to request a **CCH Retire** assignment to be added to your <u>myCHC</u> account. The application will be added to your <u>myCHC</u> account within 2-3 business days of receipt of the request form.

Retirement status will be final upon completion of the following:

- Completed CCH Retire assignment in myCHC (includes Contact Information, Attestations, \$75
 Application Fee, CHC Review and Verification)
- Notification of completion email to CCH

SECTION 7 CHC CODE OF PROFESSIONAL ETHICS

The Council for Homeopathic Certification (CHC) considers the following principles to be guides to the ethical practice of homeopathy and to be morally binding on all homeopaths. Homeopathic practitioners are hereinafter referred to as practitioners.

All practitioners who are certified by the CHC are expected to observe the highest standards of ethics and integrity and be morally bound by this code of professional ethics.

A. IDEALS

The homeopath's high and only calling is to restore the sick to health—to heal, as it is termed—as defined by Samuel Hahnemann in the Organon.

The practitioner shall be educated and trained to provide competent homeopathic care in partnership with the client. The practitioner shall limit his or her practice to those areas in which the practitioner has acquired competence within the scope of practice of the practitioner's certification.

B. INTERACTIONS WITH CLIENTS

Conduct the homeopathic practice with vigilance, integrity, and freedom from prejudice, and treat all clients with respect and dignity.

Make every appropriate effort to be available and accessible to ill clients requiring assistance. Never guarantee a cure, by spoken word or in writing.

Assist clients in weighing the possible benefits and risks of other (non-homeopathic) therapeutic options, helping them to consider conventional diagnostic procedures, routine screening tests and therapies—acknowledging the usefulness of such procedures at appropriate times, even for those who may wish to avoid conventional treatment.

A non-licensed homeopathic practitioner shall not make a recommendation to discontinue current medications or treatments prescribed by a licensed health care practitioner. While the practitioner may freely educate his/her client concerning how homeopathic and pharmaceutical and other approaches diverge and even conflict, he/she must also leave no doubt that all responsibility for modification of the client's medication regime rests entirely with the client in consultation with the prescribing health care practitioner.

The homeopath should ensure that any substantive discussions regarding prescribed medications and treatments are appropriately documented in the client's chart notes.

Render assistance to clients in emergency situations, to the greatest extent permitted by training and circumstances.

Practice within areas of competence. Consult with colleagues, or refer clients to other practitioners, in any situation involving conflict, inadequate training, or personal limitation—such as, but not limited to, any of the following:

- When any aspect of the client's case requires greater experience, training, or skill than the practitioner can offer.
- When there is a need for diagnostic tests or procedures beyond the capacity of the practitioner.
- When the practitioner's care is not providing reasonable and timely resolution of the client's health problems.
- When circumstances arise that create a conflict between the practitioner's personal and professional relationship with the client.
- If a practitioner's competence or judgment is impaired by physical or mental incapacity or chemical dependency.
- Practitioners seeking second opinions or another Practitioner's advice remain responsible for services and recommendations provided to the client.

Keep full and accurate records of all contacts with clients, including individual data such as name, address, phone number, date of birth and case data, such as medical history, dates and details of consultations, and summary of recommendations made.

Exercise appropriate discretion in the wording of any advertisements; practitioners who are not medically licensed with authority to diagnose and treat in the state/province where they practice should carefully avoid any reference to medical diagnoses or diagnostic tests and focus on establishment of health rather than resolution of disease.

Unless you possess a healthcare license, use a disclosure/informed consent form which clearly and accurately identifies your training, credentials, skills, and nature of your work; ensure that each client signs this form which becomes a part of the client documentation.

The practitioner's staff shall be trained and educated in their duties regarding client confidentiality.

The practitioner may have in attendance in the consultation room a person who is not on the practitioner's staff, e.g., an intern, a visiting consultant, or a student observer only with the consent of the client after the client has been fully informed of who the person is.

The practitioner shall also ensure that the visitor is fully informed of the duty of confidentiality concerning the identity of the client and any recommendations made during the consultation.

Before entering a relationship with a new client, the practitioner shall fully explain to the client, in writing, the fees expected for service and any payment policies, including when payment is expected, interest, if any, that

will be charged for delayed payment and credit card possibilities. If the practitioner's fees change during consultation, the practitioner or his or her office staff shall advise the client of that fact before rendering service under the new fee schedule.

During consultation, the practitioner should make every effort within reason to respond to a client's attempts to contact the practitioner whether by calls or emails. If the practitioner decides to end the relationship with the client, he/she should notify the client as soon as possible.

The practitioner shall not discriminate in hiring staff or in accepting clients based on race, religion, national origin, gender, or sexual orientation and should always strive to provide the highest quality of care for each client. This rule does not prevent the practitioner from refusing to accept a client with whom the practitioner cannot communicate because of language differences. Also, practitioners may restrict their practice to specific age, gender groups or to specific conditions as long as this is consistent and not arbitrarily applied.

The practitioner shall not enter romantic or sexual relations, of any type, with a client or a client's family member or "significant other" while the practitioner-client relationship continues. This rule applies for six months after the client-practitioner relationship has ended.

The practitioner shall engage a lifestyle of self-care that optimizes his or her ability to care for his or her clients. The practitioner will not practice under the influence of prescription medication, over-the-counter medication, alcohol, drugs, or any other substances that can have the potential to impair his or her functioning.

Should the practitioner become impaired, physically, or mentally, so as to threaten the safety of his or her clients, he or she shall terminate practice and notify the CHC within 30 days.

C. INTERACTIONS IN TELEHEALTH

Telehealth occurs when practitioners provide homeopathy services remotely by means of telecommunications technology.

Practitioners should obtain agreement or consent from their clients before providing telehealth services. Informed Consent requires that practitioners should fully explain to clients the distinctive features of telehealth consultations including, but not limited to, the following:

- How telehealth works
- How to schedule appointments
- How the practitioner and client will identify each other
- Privacy concerns
- Possible technological failures and potential confidentiality breaches



Protocols during virtual visits

Practitioners should ensure necessary measures to accomplish the following:

- Processing sensitive data in a secure manner
- Maintaining data security and confidentiality
- Maintaining privacy
- Responding to security threats or breaches

Practitioners should follow all applicable federal and state laws, rules, and regulations regarding telehealth practice.

Practitioners should exercise professional autonomy in determining whether telehealth, instead of face-to-face consultation, is appropriate.

D. INTERACTIONS WITHIN THE PROFESSION

Honor the homeopathic profession, its history, and traditions. Each practitioner's words and actions reflect upon the profession as a whole. Speak respectfully, whether in public or with clients, about fellow practitioners, both homeopathic and in other fields, acknowledging differences in styles of practice and training in a constructive way.

Continue personal and professional development by undertaking further study, conferring with colleagues seeking greater understanding of homeopathic theory and practice and supporting other practitioners in that goal. Promote the art and science of homeopathy through appropriate research.

The practitioner, within the limitations of his or her ability and interest, should strive to aid in the compilation of clinical data in a meaningful manner and in the dissemination of that data.

If conducting homeopathic research, give substances used in provings only to those individuals who have an understanding of the nature of the proving process and who have volunteered, with written consent, to participate. Consider any person involved in experimental provings or other studies to be the researcher's client; be guided by the welfare of each person and the moral imperative that the homeopath's only calling is to help make sick people well. Report research findings and clinical experience methodically, honestly and without distortion. Identify any speculative theories clearly as such.

Carefully honor the confidentiality of all clients whose cases are used in published articles, case conference presentations or training lectures.

When requested by a relevant disciplinary authority concerning another practitioner or by another practitioner under investigation or charge, the practitioner shall cooperate honestly and to the best of his or her ability.

E. INTERACTIONS DURING EMERGENCY SITUATIONS

An emergency includes any of the following experiences in the location of the practitioner's practice that disrupts normal manner of practice: epidemics, pandemics, natural disasters, martial law or other force majeure circumstances.

F. RESPONSIBLE AWARENESS SPECIFIC TO EMERGENCY SITUATIONS

Each practitioner will make every reasonable effort to seek out and be fully informed of all public health directives issued by federal, state/province, county, and municipal authorities during an emergency situation. Practitioners will make every reasonable effort to educate his/her clients about all applicable public health directives.

G. APPROPRIATE COMMUNICATION

Each practitioner will carefully ensure that he/she communicates accurately and responsibly to clients, the public and the homeopathic community. All applicable federal, state/province, county, and municipal guidelines regarding statements about prevention or treatment of any condition using homeopathy will be carefully followed in all written, electronic, or verbal communication to clients, public and colleagues.

H. MEDICOLEGAL PRUDENCE

Each practitioner acknowledges that under emergency situations, clients may present unfamiliar or unknown pathology. Each practitioner will cooperate with and educate clients about mandatory disease reporting requirements during any epidemic or pandemic including how to report to the designated authorities.

I. NEEDFUL SELFCARE

The specific nature of the emergency will require appropriate selfcare. Each practitioner will make every reasonable effort to seek out, be fully informed and implement the following:

- Recommended public health guidelines for cleaning, disinfection, and disposal protocols
 appropriate for his/her specific office environment (if providing onsite homeopathic care for clients
 who might have been exposed to or contracted a communicable disease).
- Use of appropriate personal protective precautions commensurate with the assessed level of risk for his/her specific office environment to minimize personal risk of exposure to infection and further transmission of a disease.



SECTION 8 CHC CLIENT HEALTHCARE RIGHTS

The CHC considers the following to be rights of the client in a healthcare setting, to be respected at all times in homeopathic practice:

A. ACCESS

Each individual has a right to impartial access to homeopathic care, regardless of any personal belief, circumstance, or condition unless there is a valid legal reason that would prevent such access.

B. CONFIDENTIALITY

The client has a right to confidentiality. The homeopath must not communicate in any form the contents of case records or personal information obtained within the practitioner/client relationship, as outlined in any governmental regulations for Canadian and US health care providers, except with the written permission of the client, in the case of emergency, or in response to a valid demand by government authorities. Appropriate safeguards should be taken with client records to prevent any unauthorized access to them. Case records or summaries should be provided promptly when properly requested in writing by a client.

C. BOUNDARIES

The client has a right to expect the homeopath to keep appropriate professional boundaries in the client/practitioner relationship. The inherent nature of this type of relationship tends to place the practitioner in a position of influence, and the client in a position which may be, to some extent, dependent. The homeopath must therefore scrupulously avoid any exploitation of this relationship through inappropriate personal, sexual, or financial interaction always keeping in mind that the purpose of the relationship is to help improve the client's health.

D. PRIVACY

The client has a right to be interviewed and examined in surroundings that afford reasonable visual and auditory privacy. Individuals who are not directly involved with the client's care shall not be present without the client's permission and shall not observe through remote audio/video access, or through video recordings without the client's express consent.

E. ADVOCACY

The client has a right to have another person present during any interviews or examinations. Physical examinations should only be performed by appropriate practitioners, and the client should remain disrobed only as long as is required for the examination. If the client is a minor, a parent or guardian has a right to be present during the examination and interview.

F. SELF-RESPONSIBILITY



The client has a right to actively participate in all decisions regarding his or her health care. This includes the right to refuse any recommendations (of homeopathic care or other kinds of health care) or referrals to other practitioners, to the extent permissible by law even after being informed of possible adverse consequences. If a client or a client's legally authorized representative declines to follow recommendations in such a way that this prevents the homeopath from providing care in accord with professional standards, the homeopath may terminate the professional relationship with the patient/client upon reasonable notice, and in a professional manner.

G. ADJUNCT THERAPIES

The homeopath may offer, in addition to homeopathic care, any health-care skills that he or she is trained and competent to use, as long as such techniques or approaches are appropriate to the client's condition, and legal for the individual practitioner to practice. The homeopath must carefully explain such adjunct therapies and make it possible for the clients to decline them if they wish. The homeopath shall make available documentation of his or her credentials and training for the practice of any type of therapy offered to the client and must always allow the patient/client the freedom to accept or decline any type of therapy.