

B.C. Association of Clinical Counsellors

CODE OF ETHICAL CONDUCT

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Introduction

The BC Association of Clinical Counsellors (BCACC) is dedicated to providing the highest standards of professional counselling, consulting, assessment, testing and training services. The Code of Ethical Conduct and Practice Standards (Code) provides guidelines and standards for Registered Clinical Counsellors (RCCs) to pursue excellence in their professional practice in serving the health and well-being of others.

The Code provides a moral framework (ethical principles) and a model for analyzing and making decisions when ethical dilemmas arise. Every ethical dilemma cannot be anticipated or regulated and more than one alternative decision may be considered ethical. Therefore, RCCs need to enhance their professional judgment through adherence to these guidelines, and the use of an ethical decision making process, including consulting with knowledgeable resources, such as the BCACC, trusted colleagues, the literature, or other reliable sources. These guidelines and standards do not take the place of legal advice that must be obtained from a lawyer. It is also important to consider personal values and whether they may in any way unfairly bias one's perceptions and decision making.

In addition, the Code of Ethical Conduct and Practice Standards provides enforceable rules and behavioural or practice standards with which RCCs must comply, and for which sanctions may be applied for non-compliance. These standards address the application of ethical principles to specific areas of practice.

The documents guiding the professional practice of RCCs have different levels of authority. In addition to the Code of Ethical Conduct and Practice Standards as developed by BCACC, counsellors must comply with various provincial and federal statutes and regulations.

Some laws bind all citizens, such as, the Federal Criminal Code, Federal and Provincial taxation laws, provincial motor vehicle legislation and reporting of child neglect and abuse. Provincial governments enact professional legislation to regulate the practice of specific professions when they are convinced that such legislation is required to protect the public from harm. BCACC continues to seek such legislation. Other statutory and case laws that affect the practice of counsellors are listed below.

Depending on the nature of the complaint, there may be three levels at which RCCs may have complaints made against them, namely, (a) charges of violating Federal criminal law, (b) charges of injury suffered at the hands of

the RCC under malpractice or tort (civil) law, or (c) a violation of BCACC ethics and standards subject to disciplinary procedures as defined by the profession and consistent with the law.

The law and professional standards usually complement each other. However, the law is generally considered to take precedence over professionally defined standards should they be in conflict, and it is usually considered a personal choice and risk should one choose to disobey the law on grounds of conscience. BCACC encourages its members to consult as widely as the situation demands, and to consider all of the implications of any such decisions.

The Code of Ethical Conduct and Practice Standards, including ethical principles, as developed by the profession, is the morally highest and most aspirational regulatory document, and may require a higher standard of behaviour than required by the law. In a code of conduct some aspects of ethical principles are translated into behavioural definitions that constitute enforceable rules for professional conduct. Practice standards are incorporated along with the BCACC Code of Ethical Conduct, although in some professions they are incorporated in regulations that are attached to the professional legislation. Practice guidelines, position statements, special guidelines, etc, support counsellors in providing competent and ethical practice in specific areas of practice, and while they may help to define competency they are not binding or enforceable by themselves.

Using the Code of Ethical Conduct and Practice Standards

General Expectations

As members of the BCACC, RCCs commit that they will:

1. Adhere to the Code of Ethical Conduct, Practice Standards and appropriate application of the Guidelines.
2. Assess the ethical aspects of their practices on an on-going basis.
3. Discuss ethical issues with supervisors and colleagues.
4. Bring new ethical issues and questions to the attention of the BCACC.
5. Address perceived unethical behaviour of colleagues in an appropriate manner, which, where appropriate, emphasizes remedial clarification and education. In addressing such behaviour RCCs will consider their own motivations and avoid making malicious or vexatious complaints.
6. Accept and consider feedback with respect to their own actions and perceived unethical behaviour, and take positive steps to resolve the situation.
7. Cooperate with duly constituted committees of the BCACC that are concerned with ethics or ethical conduct.

Use of an Ethical Decision Making Process

In navigating difficult ethical issues, going through a careful process such as the one contained in the *Guideline for Ethical Decision Making* is normally appropriate.

Explanation of Principles

The Code of Ethical Conduct is based upon four fundamental ethical principles.

- *Principle I: Respect for the Dignity of All Persons and Peoples*
- *Principle II: Responsible Caring*
- *Principle III: Integrity in Relationships*
- *Principle IV: Responsibility to Society*

These principles are intended to reflect a general, commonly understood and universal moral framework. They are aspirational in nature, and the behavioural applications of these principles may vary somewhat in the context of different cultural beliefs and expectations. However, one does not accept allegedly cultural practices that cause harm to persons and peoples.

When Principles Conflict

The four fundamental principles should each be taken into account in good ethical decision making. However, occasions will arise where the principles conflict. A mandated order of importance is impossible given the complex nature of many ethical issues. However, as a general guide:

Principle I: Respect for the Dignity of All Persons and Peoples should be given the highest weight, unless there is a clear and imminent danger to the physical safety of any person.

Principle II: Responsible Caring generally has the second highest weight, and should be carried out in ways that respect the dignity of persons and peoples.

Principle III: Integrity in Relationships will be of third priority if it clearly conflicts with the first two principles.

Principle IV: Responsibility to Society should, if it conflicts with the other principles, generally be given the lowest priority. Placing Responsibility to Society as less important in priority than the respect for the individual and individual rights reflects a Euro-North American entrenched value that is not universally held by all societies. Normally communities and societies in British Columbia will hold similar values to Principles I to III, and consequently, ways may be respectfully negotiated that do not place the collective good of the society in conflict with respect and caring for individuals. In respecting a diversity of cultural beliefs, it is important not to endorse practices that clearly harm individuals in those cultures, or that violate Canadian laws.

Principles

Principle 1

Respect for the Dignity of all Persons and Peoples

Respect for the dignity of persons provides a foundation for many other ethical principles. It is intended to recognize the inherent worth of all human beings. This includes respect for peoples, since all human beings belong to unique societies, which create human interdependence, contribute to identity, and establish the connection of all human beings to all other human beings, including past and future generations. It is recognized that a relationship of respect and caring for the natural environment is also essential for the well being and survival of humans individually and collectively.

To practice the principle of *Respect for All Persons and Peoples*, RCCs will:

Generally

- 1) Demonstrate respect for the unique worth and inherent dignity of all human beings.
- 2) Use language in all communications that conveys respect for persons and peoples.
- 3) Avoid derogatory comments about individuals or groups, including demeaning jokes based on characteristics such as ethnic and cultural background, gender, class, age, sex, sexual orientation, nationality, colour, race, religion, marital status, physical or mental abilities, socioeconomic status, or any other preference or personal characteristic, condition or status.
- 4) Abstain from all forms of harassment.
- 5) Refuse to participate in practices disrespectful of the rights of other persons and peoples.
- 6) Refuse to advise, train or supply information to anyone who, in the RCC's judgment, will use the knowledge or skills to infringe on human rights.
- 7) Make every reasonable effort to ensure that therapeutic and psychological knowledge is not used, intentionally or unintentionally, to infringe on human rights.

Respect for Clients

- 8) Assume primary responsibility to the client, as the direct recipient of the RCC's professional activities.
- 9) When rendering a formal professional opinion about a person that has implications for that person's legal or civil rights, do so only on the basis of direct and substantial professional contact or a formal assessment of that person.
- 10) Base formal professional opinions on a professional knowledge base, and document any limitations regarding the confidence they have in their results and opinion.

Informed Consent

- 11) Obtain free and informed consent for all services.
- 12) Inform clients of their rights as consumers of the RCC's services, including procedures for resolving differences and filing complaints.
- 13) If urgency requires action without obtaining informed consent, obtain that consent at the earliest reasonable time thereafter.
- 14) Respect a client's clearly expressed wishes to involve others in the client's

decision making regarding informed consent.

- 15) Where the client is not capable of informed consent to treatment, interact with the legally designated substitute decision maker in such a way as to promote the greatest degree of self realization for the client.
- 16) Engage in mutual and ongoing negotiation with respect to therapeutic processes.

Privacy

- 17) Ensure the privacy and confidentiality of client information in accordance with legal principles and professional standards.
- 18) Engage in appropriate consultation and supervision.
- 19) Respect the client's cultural customs and beliefs.
- 20) If the values of the RCC conflict with those of the client to the extent that the RCC doubts his or her ability to be unbiased, communicate about the values differences and offer the option of referral to another counsellor.

Respect for Other Individuals

- 21) Treat family members or others connected with the client with respect, honesty, and fairness.
- 22) Ensure the privacy of personal information in accordance with legal principles and professional standards.
- 23) Respect the right of clients, employees, research participants, students, trainees and others to safeguard their own dignity.
- 24) Obtain informed consent for all research activities that involve more than minimal risk of harm, or any attempt to change the behaviour of the research participant.

Respect for Peoples

- 25) Demonstrate respect for the diversity of persons and peoples.
- 26) Demonstrate respect for the customs and beliefs of diverse cultures, unless such customs and beliefs seriously contravene the principle of respect for dignity of persons or peoples, or causes serious harm to their well-being.
- 27) Be aware of the meaning and impact of one's own ethnic and cultural background, gender, class, age, sex, sexual orientation, nationality, colour, race, religion, marital status, physical or mental abilities, socioeconomic status, or any other preference or personal characteristic, condition or status.
- 28) Actively engage in broadening one's own knowledge of ethnic and cultural experiences.
- 29) Appropriately explore cultural differences in therapeutic situations.
- 30) Where the therapist's beliefs may adversely affect the therapeutic outcome, offer the alternative of an appropriate referral.

Respect for Self

- 31) Engage in self-care activities, in recognition of the unique professional stresses involved in counselling practice, and in order to maintain optimal levels of professional practice.
- 32) Evaluate professional activities for evidence of the RCC's personal biases or discriminatory attitudes and practices.
- 33) Obtain personal therapy or take other appropriate steps where the RCC's personal issues or stresses interfere, or are likely to interfere, with the RCC's ability to be of professional assistance.
- 34) Limit self disclosure in counselling clients only to that which serves the client's best interests.

- 35) Protect and safeguard themselves from serious harm and violations of their own rights in carrying out their professional activities.

Principle 2

Responsible Caring

Responsible caring means that all interactions involving clients are made for the client's benefit. This includes thorough assessment, as well as competency in skills appropriate to the situation, the client, and the social and cultural context.

To practice the Principle of *Responsible Caring*, RCCs will:

Generally

- 1) In all activities connected with professional practice, demonstrate active concern for the well being of individuals, families, groups and communities.
- 2) Terminate an activity when it is clear that the activity carries more than minimal risk of harm and is found to be more harmful than beneficial, or when the activity is no longer needed.
- 3) Respect the abilities of individuals, families, groups and communities to make decisions on their own behalf and to care for themselves and each other.
- 4) Remain aware of the RCC's own self-care needs and vulnerabilities.
- 5) Engage in continuous learning and professional development based on ongoing assessment of needs.
- 6) Model effective and respectful professional boundaries.

Competent Caring

- 7) Limit practice and supervision to the areas of competence in which proficiency has been gained through education, training or experience.
- 8) Maintain competency in all practice areas through continuing education, supervision or peer consultation, as per current professional standards.
- 9) When developing competency in a professional service that is new, obtain appropriate training and engage in ongoing consultation with a professional having expertise in the provision of that service.
- 10) Refer to other professionals, technical or administrative resources when referrals are in the best interests of the client(s).
- 11) Ensure that emergency needs of clients are addressed by appropriate professionals during the RCC's absences from practice.

Carefully Managing Risk

- 12) In all activities connected with professional practice, take care to maximize benefits and minimize potential harm to individuals, families, groups and communities.
- 13) Maintain appropriate records of all interactions concerning each client, using client-centered language.
- 14) Engage in ongoing supervision or consultation.
- 15) Do everything reasonably possible to stop or offset the consequences of actions by others when those actions are likely to cause serious physical harm or death. This may include reporting to appropriate authorities, to an intended victim, or a family member or other support person who can intervene, and would be done even where a confidential relationship is

involved.

- 16) Act to stop or offset the consequences of seriously harmful activities being carried out by another RCC or any other professional caregiver, when there is objective information about the activities and the harm, and where these activities have come to their attention outside of a confidential client relationship. Action may include reporting to the appropriate regulatory body, authority, or committee for action, depending upon the RCC's judgment as to what is appropriate to offset the harm, and upon regulatory requirements for the body in question.
- 17) Collaborate and consult with other professionals as needed.
- 18) Act to minimize any negative impact of their research activities on research participants.
- 19) As far as possible, correct or offset harmful effects that occur in connection with research, professional practice or extra-professional activities.

Principle 3

Integrity in Relationships

Ethics and values are largely expressed in the relationships that RCCs have with self and with others. To have ethical integrity they remain aware of their values and the values of their communities. They are honest and straightforward in their communications, honestly assess and seek feedback on their performance, and avoid conflicts of interest that may compromise their professional activities.

To practice the principle of *Integrity in Relationships*, RCCs will:

Generally

- 1) Aspire to the highest integrity possible in every situation.
- 2) Accept responsibility for the consequences of their actions.
- 3) Avoid the exploitation of others for personal, professional or financial gain.
- 4) Avoid conflicts of interest when possible, declare the conflict of interest when it is inappropriate to avoid, and take measures to avoid adverse effects of conflict of interest.
- 5) Strive for impartiality in all professional endeavours.

Communicating in Integrity

- 6) Commit to truthfulness and accuracy in communications.
- 7) Avoid incomplete disclosure of information unless complete disclosure is culturally inappropriate or violates the confidentiality of others, or carries the potential to do serious harm to individuals, families, groups or communities.
- 8) Use best judgment in accepting gifts or other benefits, considering the situation, diagnosis, motivation, and vulnerability of the client. Gifts or benefits from clients should be infrequent and of minimal value and not compromise the professional relationship.

Connecting with clients

- 9) Accurately state the nature of their training to clients.
- 10) Where the needs of the client exceed the ability to be of professional service, offer an appropriate referral.
- 11) Where the RCC is aware, or ought to be aware that the RCC's own personal issues, attitudes or stresses are interfering, or are likely to interfere with the RCC's ability to be of professional assistance refrain from beginning or continuing a professional relationship with a client.

- 12) If the RCC develops such personal issues after the professional relationship has commenced, obtain professional assistance to determine whether to limit, suspend or terminate the professional relationship.
- 13) If it becomes necessary to limit, suspend or terminate treatment, assist the client to obtain the services of another qualified professional.

Relationship as a conscious undertaking

- 14) Not exploit or allow their professional relationships to be exploited in order to further personal, political or business interests at the expense of the best interests of the RCC, their clients, research participants, students, employers, or others.
- 15) Avoid beginning or continuing a professional relationship where they are aware, or should be aware, that harm may occur as a result of a current or previous psychological, familial, social, sexual, emotional, financial, supervisory, political, administrative or legal relationship with the client or a relevant person associated with or related to the client.
- 16) Avoid dual relationships or the perception of a dual relationship in circumstances where the existence of a dual relationship may adversely affect the professional relationship.
- 17) Where a dual relationship exists or is perceived to exist, take immediate and reasonable steps to address any resulting harm or the potential for such harm.
- 18) Recognize power differential that exists in the counselling relationship, and the potential for misuse or abuse, and therefore refrain from engaging in a sexual or other intimate personal relationship with any client, both during and within at least 24 months after the conclusion of treatment. The 24 month figure represents a **minimum**. The deeper the counselling relationship, the longer this period should be. The 24 month minimum period should be extended indefinitely if the situation, diagnosis or vulnerability of the client suggests the possibility of exploitation on the basis of trust and dependency established during the previous counselling relationship.
- 19) In particular, during and up to at least 24 months following the conclusion of the counselling relationship, refrain from:
 - Verbally or physically seductive behaviour towards the client or former client, directly or indirectly;
 - Sexual intercourse or other sexual behaviour with the client or former client;
 - Entering into a financial or other potentially exploitive relationship.
- 20) In recognition of the inevitable power differential that exists in an instructing or supervisory relationship, refrain from engaging in a sexual or any other intimate personal relationship with students, trainees or supervisees.
- 21) In particular, refrain from:
 - Any verbally or physically seductive behaviour towards the student, trainee or supervisee;
 - Sexual intercourse or other sexual behaviour with the student, trainee or supervisee;
 - Entering into any sort of relationship with a student, trainee or supervisee that a reasonable person would view as exploitive given the standard currently prevailing in the professional or academic community.

Principle 4

Responsibility to Society

RCCs have a responsibility to the society in which they live and work and have dedicated themselves to the well being of human beings in that society. To practice the principle of *Responsibility to Society*, RCCs will:

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| Ethical knowledge and awareness | <ol style="list-style-type: none">1) Develop and maintain awareness of their ethical responsibilities and competencies.2) Adequately train students and supervisees in ethical responsibilities and competencies.3) Challenge all RCCs, including oneself, to be personally accountable to the values and ethical principles of the profession.4) Commit to continuous improvement, which includes sensitivity to the impact of their own actions, openness to feedback and ideas, and correcting of their own behaviour.5) Understand the statutory, regulatory and common law framework that governs the profession. |
| A holistic approach | <ol style="list-style-type: none">6) Recognize the need to work collaboratively with other agencies, professional disciplines, and individuals in order to reasonably serve the best interests of individuals, groups and society. |
| A scientific and professional body of knowledge | <ol style="list-style-type: none">7) Take responsibility to increase scientific or practical knowledge within the profession as a means of promoting the well being of society and all its members.8) Accept responsibility to do what they can to ensure that oppressive laws and structures are changed.9) Promote and advance ethical principles in research, professional and educational activities. |
| Establishing fees | <ol style="list-style-type: none">10) Establish fees that are deemed fair and consistent with prevailing fee structures in the community. |
| Contribution of professional skills | <ol style="list-style-type: none">11) When considering the possibility of pro bono work, determine the most appropriate and beneficial use of their time and talents to help meet the discipline's collective responsibility to society. In doing so RCCs should take into account the need for reasonable boundaries, and the appropriate balance for their own circumstances between pro bono and paid work. |
| Social Responsibility | <ol style="list-style-type: none">12) Avoid engaging in dishonourable or questionable conduct that casts doubt on the RCC's professional integrity or competence, or reflects adversely on the integrity of the counselling profession. |

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