

NORTH WEST INSTITUTE OF DYNAMIC PSYCHOTHERAPY

Code of Ethics and Conduct

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1. General Issues

1.1 This Code of Ethics governs all members of the NWIDP. It should be observed in their professional dealings with patients, colleagues, supervisors, trainees, and members of the public in all areas of their professional work, including psychotherapy practice, training, research and administration. All members are required to observe the constitution of the NWIDP and the principles contained within it. Members are also subjected to UKCP requirements.

1.2 The purpose of the Code is to ensure a high ethical standard of psychotherapy practice by members of the NWIDP.

1.3 All psychotherapists are expected to approach their work with the aim of promoting the well-being of their clients. Psychotherapists should endeavour to use their abilities and skills to their clients' best advantage without prejudice, and with due recognition of the value and dignity of every human being.

1.4 The code is also intended to clarify areas of ethical difficulty to enable therapists to avoid having to practice defensively.

2. Establishing the Therapeutic Contract

2.1 The NWIDP and members of the NWIDP are required to restrict promotion of their work to a description of the type of psychotherapy, which they provide. Information about an individual member's training, experience and expertise should be given to prospective patients. The negotiation of a contract should involve clarification of the process and practice of therapy and the potential risks and benefits that it may entail.

2.2 The interests of the patient/client are paramount. Practice should be to the best of the member's ability. Individuals must recognise their limitations, and, if necessary, refer patients to an appropriate competent therapist

2.3 Where members are charging fees for psychotherapy these should be agreed with the patient in advance, and the mechanism for negotiating possible changes in the fees should also be agreed in advance.

2.4 Members will maintain a clear distinction between work in statutory or non-statutory agencies, and private practice. They will not seek personal financial advantage by encouraging patients referred through non-fee paying agencies to attend as private patients.

3. Confidentiality

3.1 Information acquired by the therapist in the course of treatment must be confidential within the therapist's understanding of the best interest of the patient. Where appropriate, the limits of confidentiality and circumstances under which it might be broken should be explained to the patient. Wherever possible, therapists should obtain the patient's permission to disclose any information (to the G.P., relevant psychiatric services, or other relevant professionals).

3.2 In the course of therapy, contact with third parties (e.g. relatives, friends, colleagues or professional advisors of the patient) should only take place with the consent of the patient. Exceptions must be considered carefully and in consultation with colleagues. The therapist must be able to justify any such exception.

3.3 When confidential material is used for publication or presentation, therapists are required to obtain the patient's consent, and to protect their welfare and anonymity.

3.4 **Research:** Psychotherapists are required to clarify with clients the nature, purpose and conditions of any research in which the clients are to be involved and to ensure that informed and verifiable consent is given before commencement.

3.5 All material, whether written or held on a computer, must be kept secure. The requirements specified in the Data Protection Act of 1986 and its revisions must be adhered to.

3.6 In certain circumstances, therapists may be under a legal obligation to disclose confidential information and this may conflict with their ethical obligations towards patients as described in section 3 of the code. Members are required to be familiar with the relevant provisions of the following Acts: the *Drug Trafficking Act 1994, the *Terrorism Act 2000 and the Data Protection Act 1986 and subsequent revisions.

* Some information about these Acts is given in the attached Appendix A 'Legal Requirements'.

4. Maintaining the Boundaries of the Therapeutic Contract

4.1 Both during and after termination of treatment social contact with the patient or their family must be avoided.

4.2 During treatment, the patient/client must always be treated with respect. A therapist must not use deceit, threats, verbal or physical violence for any reason.

4.3 A therapist must not propose or enter into any sexual relationship with the patient or with any member of the patient's family, or with others close to him/her.

4.4 Transference and counter transference feelings persist for a considerable period of time after treatment is concluded: the obligations of the therapist may extend long after therapy is termination.

4.5 A therapist must refrain from giving or accepting substantial gifts or favours from the patient.

5. Professional Relationships with Colleagues

5.1 Professional colleagues should be accorded due courtesy and respect. When speaking of the profession, or professional colleagues, therapists should do so with due consideration. A breach of the Code of Conduct will be considered to have occurred if damage to a professional reputation is demonstrated, or there has been malicious intent.

5.2 Members are required to inform the Chair of the NWIDP or a member of the Professional committee if they are concerned that any member of the Institute is in breach of the Code of Ethics and Conducts.

5.3 Members should respect the existence of medical conditions in their patients, and should discuss medical treatment if this is in the patient's best interests. Medical members are not required to take over duties in respect of their patient/s medical condition when these properly belong to the patient's general practitioner or other medical practitioner.

6. Therapist's Health and Welfare

6.1 A therapist must not work professionally when under the influence of intoxicating substances.

6.2 A therapist must not undertake work if, through physical or emotional impairment or illness, s/he is no longer capable of exercising necessary skill and judgement.

6.3 Therapists are required to maintain their ability to perform competently and take the necessary steps to do so. Members are required to inform the Chair of the Institute immediately if they are threatened with criminal prosecution or with litigation in a civil court concerning professional practice, or if a complaint about professional practice is received in another organisation or body with whom they are involved. Members are also required to report if they are convicted of a criminal offence. A failure to do so is grounds for

investigation and may result in recommendation for expulsion from the Institute.

6.4 Members of the NWIDP concerned that a colleague's conduct may be unprofessional, should either initiate the Complaints Procedure or seek the advice of the Chair of the NWIDP or the Chair, or other members of the Professional Committee who may initiate the Complaints Procedure or consider ways of providing professional support (see document on provision of support).

7. Professional Indemnity

7.1 All members of NWIDP are required to ensure that they are covered, either personally or through their employing organisation, by a professional indemnity or insurance suitable to the work of psychotherapy.

8. Complaints Procedure

8.1 The Complaints Procedure will be made available to any individual or organisation on request to the Secretary of the Professional Committee.

8.2 Members working within the NHS or other organisations must be familiar with, and abide by, the complaints procedure of their employing organisation.

8.3 No member shall make a false declaration to the Professional Committee, or any other body of the NWIDP, on professional issues.

Appendix A

Legal Requirements

There are mandatory reporting requirements to which all psychotherapists are subject.

The Drug Trafficking Act 1994 creates an obligation to inform the authorities about information gained during one's trade or profession about the proceeds of drug trafficking.

It is a separate offence to inform the person concerned that you have informed the authorities.

The Terrorism Act 2000 requires the disclosure of information to the appropriate authorities where a person believes or suspects that another person has committed a terrorist offence; and this belief or suspicion is based on information that comes to his or her attention in the course of a trade, profession, business or employment.

Failure to do so may constitute a criminal offence.

The Act also provides legal protection for the disclosure of information concerning money or property associated with terrorism.

If in doubt about their obligations under these Acts which apply throughout the UK it is best to seek legal advice as the potential penalties include substantial fines and imprisonment.

Legal advice may be available through organisations such as the NHS, UKCP or through insurance providers for those in private practice.

Reference:

Jenkins P (2002) *Legal Issues in Counselling and Psychotherapy*
London: Sage

(Sue Kaberry – May 2005)