TITLE	**ETHICAL PRINCIPLES AND CODE OF PROFESSIONAL CONDUCT FOR PSYCHOTHERAPISTS**
REFERENCE	**POL/ETH02**
DATE	**October 2017**

1. Introduction

1.1. The Association of Core Process Psychotherapists (ACPP) is a Member Organisation (MO) of the Humanistic and Integrative College (HIPC) of the UK Council for Psychotherapy (UKCP).

1.2. All members of ACPP must comply with this document and with current UKCP Ethical Principles and Codes of Professional Conduct, Complaints and Conduct Process and any other relevant UKCP documentation. It is the responsibility of the individual member to ensure they are aware of and are in compliance with all relevant current UKCP and HIPC requirements.

1.3. The obligations set out in this document must be adhered to by all UKCP registered members. Non-UKCP registered members must comply with the principles and spirit of the provisions of this document.

1.4. The requirements of this document are additional to those set out in UKCP documents, and this document must therefore be read in conjunction with current UKCP Ethical Principles and Codes of Professional Conduct and any other relevant UKCP and HIPC documentation. To facilitate this, headings in this document follow those in UKCP Ethical Principles and Codes of Professional Conduct (aside from Introduction, Intent of this Document and Research).

1.5. This document may be taken into account by the following UKCP personnel and bodies: Professional Conduct Officer; Professional Conduct Committee; Investigating Committee; Fitness to Practise Tribunal; and Appeal Tribunal when considering allegations which may impair a UKCP member's fitness to practise under the UKCP Central Complaints Process and Central Final Appeal Procedure.

1.6. This document cannot cover every potential ethical, conduct or competence related concern. Members must therefore depend on their own thoughtful evaluation of specific principles and the spirit expressed in these statements, and on consultations with colleagues and supervisors. Members must also maintain familiarity with the requirements of the full suite of ACPP Ethical Documentation.

1.7. For clarity and ease of expression, throughout this document the third person plural pronoun is used as non-gendered pronoun for 'psychotherapist' and 'member': so 'they' is used for 'she/he' and 'their' for 'her/his'. 'Member' is used to denote a member of ACPP.

2. Intent of This Document

This document is intended to support the following objectives:

2.1. To establish fundamental principles for professional behaviour and to ensure that each member commits to engage with the challenge of striving for ethical practice and conduct, and aspires to hold the highest standards of integrity, impartiality and respect for others in their work even when doing so involves making difficult decisions or acting courageously.

2.2. To inform the general public of the principles under which psychotherapists provide services.

2.3. To create a framework of understanding within which members and their clients can safely work and develop. The term 'client' is deemed to include any individual who seeks the services of a member, whether as psychotherapy client, supervisee, trainee, or as psychotherapy group member.

2.4. To maintain a continuing contemplative and compassionate context within which members may practise.

3. Fundamental Values – Respect for Relationship

3.1. Members respect the dignity, worth and intrinsic health of all individuals. They are committed to co-enquire with clients into the mutual nature of suffering, and into the cultivation of well-being as it resides in every aspect of experience and life. They seek to be mindful of the interconnected nature of relationship, and to explore an inclusive awareness of social, cultural, ecological and universal relationship.

3.2. Members protect the rights of clients. These include the right to exercise freedom of choice with regard to the direction, form, level of involvement and timeframe within the therapeutic relationship.

3.3. Members respect the integrity and protect the well-being of the people and groups with whom they work. They recognise their own needs and their potentially powerful and influential position, and make every effort to avoid exploiting the trust and dependency of clients.

3.4. The relationship between the psychotherapist and the client is fundamental. Members recognise their power and influence in the relationship. They do not use their professional skills in a way which manipulates their clients to the benefit of themselves, other people or organisations. Members inform clients of the ways in which they work with any difficulties that may arise in relationship.

3.5. Members do not exploit their clients in financial, sexual or emotional ways.

3.6. When requested and as is appropriate, members fully inform clients as to the purpose and nature of their own approach and procedures. They also state clearly at the outset of the psychotherapy any terms, conditions and methods of practice, in a written form. Terms of practice include appointment times, fees, arrangements for holidays, contact between sessions, termination process etc. These are maintained throughout the course of the relationship and clear agreement obtained if any alterations need to be made. Where possible a clear indication should be made as to the probable duration of psychotherapy. Members ensure financial arrangements are made clear to clients before any professional relationship is commenced, and neither give nor receive remuneration or other reward for referring clients for professional services.

3.7. Members seek to create and maintain conditions where the trust and dependency of clients, trainees and supervisees, can be held. Accordingly, the following dual relationships are not allowed: therapist/trainer; therapist/supervisor; therapist/final examiner. In any area of doubt, members consult with a supervisor or senior colleague.

3.8. Members avoid dual relationships as these can impair professional judgment, increase the risk of exploitation or otherwise confuse or limit the spaciousness and clarity of the existing relationship. Members do not work with clients or supervisees who are friends, relatives, employees, employers, close friends or intimates of other clients, supervisees or trainees.

3.9. Members do not employ a client's professional services or send a relative or friend to the client for services, and avoid seeing clients in any social circumstances outside the therapy room and where this contact happens accidentally, consider the impact of such meetings as part of the therapeutic work.

3.10. Sexual intimacies with clients or past clients are unethical. Members pay particular attention to any erotic transference arising in their work, ensuring this is brought to awareness and worked with, supported by their supervision. Members recognise that different expressions of sexual energy arising in the therapeutic space between client and therapist and vice versa have to be named and explored in supervision.

3.11. When a sexual relationship arises between professional colleagues they review their practices to ensure that no client is compromised by their new relationship.

3.12. Non-professional relationships with former clients are avoided whenever possible.

3.13. Potential conflicts of interest that might arise are made clear to all parties concerned.

3.14. Where there is any risk of exploitation or other harmful dual relationship either during or after the psychotherapy, members demonstrate their professional commitment to the welfare of their clients and themselves by consulting their supervisor and colleagues for supportive reflection before taking action. If the safety or containment of the therapy is impaired and cannot be worked through satisfactorily, the psychotherapy may need to be terminated.

3.15. Members terminate the psychotherapy when it appears reasonably clear to them that the client is not benefiting from it, or at the client's request, or by previous agreement. Psychotherapists have the right to end a psychotherapeutic relationship with appropriate notice, or even without, if circumstances, including the behaviour of the client, make the work together no longer viable. Care is taken to ensure that the client is well prepared for termination of the psychotherapy.

4. Diversity and Equality

4.1. Members comply with the ACPP Diversity Policy.

4.2. Members promote an active engagement with difference and seek to provide a framework for the practice of Core Process Psychotherapy that allows different and diverse ideas and perspectives on what it means to be human to be considered, respected and valued.

4.3. Members are committed to addressing issues of prejudice and discrimination in relation to the mental well being, political belief, gender and gender identity, sexuality, disability, marital or partnership status, race, nationality, ethnic origin, heritage identity, religious or spiritual identity, age or socio-economic class of individuals and groups.

4.4. Members do not practice, condone, facilitate or collude with any form of discrimination on the basis of race, colour, gender, sexuality, language, age, religion, national or social origin, marital status, political belief, spiritual practice and belief, mental or physical disability or any other preference or personal characteristic, condition or status.

4.5. Members recognise differences between people such as those associated with age, gender, sexual orientation and spirituality, and socio-economic, cultural or ethnic backgrounds. Whenever necessary they obtain training, experience or counsel to ensure competent and appropriate service.

5. Confidentiality

5.1. Members respect the privacy of the individual and preserve the confidentiality of any information acquired through their professional practice. In general, and subject to the requirements of law, they take care to prevent the identity of individuals or organisations being revealed deliberately or inadvertently without permission.

5.2. Confidentiality is a means of providing the client with safety and privacy. Psychotherapists recognise that anything less than an absolute commitment to the principle of confidentiality may diminish the value of the psychotherapy. The practice of confidentiality extends to, for example, not discussing clients with colleagues outside a supervisory setting.

5.3. Information obtained under an agreement of confidentiality is revealed only with the consent of the person from whom that information was obtained, or with the consent of that person's legal representative. This includes information received during any situation where they are in communication with a client, unless the client specifically agrees that this information is generally communicable. Whenever confidentiality does not rest exclusively with the psychotherapist (for example, is shared with a supervisor, line manager or employer), this should be made known to the client.

5.4. Clients are made aware at the onset of the psychotherapy that there may be legal limits on the extent of confidentiality, for example where a lawsuit may be threatened and the therapist required to give details to solicitors or professional insurers.

5.5. Normal confidentiality may be lifted under exceptional circumstances when there is a clear risk of harm to the client's self or another which might be ameliorated or prevented by such an action. Whenever possible the client's permission should be sought. If this is not possible, the psychotherapist should consult with a senior or experienced colleague and should be prepared to justify the priority of the action over the value of confidentiality being maintained. The client should always be informed as soon as possible about any action that is taken. Possible occasions might be a client's expressed intention to commit suicide, an admission of past criminal activity or the intention to commit a criminal act, where the psychotherapist is informed of abuse of a child or a vulnerable adult or where there is a clear risk to anybody's health and safety.

5.6. Any limitations imposed on confidentiality are communicated to the client or the client's legal guardian where relevant before a professional relationship is started.

5.7. Members only make contact with third parties, such as friends or relatives of the client, with the written agreement of the client. Any unanticipated communication with third parties is reported to the client, together with the content of the communication, as soon as possible after it has taken place. If the psychotherapist is accountable for therapeutic work to agencies or supervisors, the client should be informed of the situation.

5.8. Members are aware of and maintain awareness of their mandatory duties. Depending on their working environment these may include reporting terrorist activity, drug trafficking and money laundering to the appropriate authorities. Members working for government or voluntary agencies are bound by safeguarding guidelines to report suspected cases of child abuse to Social Services (The Children Act, 1989) and to the GP or CMHT if a client is a danger to themselves or others (Mental Health Act 1983). All members undertake to know and understand their legal responsibilities concerning the rights of children and vulnerable adults and to take appropriate action should they consider a child or vulnerable adult is at risk of harm.

6. Conduct

6.1. Each member strives to be consistent, to operate from a coherent and considered position and to continue to explore, through their contemplative practice, the nature of ethical relationship in its individual and collective form. Psychotherapists treat clients and colleagues in an ethical, respectful and responsible manner.

6.2. Psychotherapists acknowledge that their own recommendations and personal actions can alter the lives of others. They are alert to personal and other pressures and influences that might lead them to misuse this professional influence.

6.3. The moral and ethical standards of psychotherapists as individuals are a personal matter except as these may compromise the fulfilment of their professional responsibilities or reduce the public trust in the Association of Core Process Psychotherapists, Core Process Psychotherapy or the psychotherapeutic profession generally. Psychotherapists do not engage in or condone any practices that are inhumane or result in illegal or unjustifiable results or which may diminish the legal or civil rights of clients or others. They adhere to all relevant laws, regulations and guidelines affecting their work.

6.4. Psychotherapists are aware of the extent of their capabilities and understand and respect the areas of competence of related professions. They make full use of this knowledge to serve the best interests of the client. Where they become aware of any medical implication they encourage their client to consult their General Practitioner for advice and may make a written note to that effect.

7. Professional Knowledge, Skills and Experience

7.1. Members recognise the boundaries of their own competence and do not practise outside the limits of their qualifications and experience, working with clients commensurate with their training, skill and supervision arrangements and remaining aware of the limits of their own competence. They take whatever precautions are necessary to protect the welfare of their clients, and refer them on to other professionals whenever appropriate.

7.2. Members recognise that they work in a developing and highly active field in which valuable new ideas are constantly emerging. They make specific arrangements for continually monitoring their own knowledge and capabilities and have an ongoing commitment to continue to develop their personal competence. They undertake re-registration and re-accreditation requirements for continuing professional development.

7.3. In providing services, psychotherapists maintain the highest standards of their professions. They accept responsibility for the consequences of their acts, and make every effort to ensure that their services are used appropriately. Where a particular form of treatment is new or untested, psychotherapists are required to inform themselves of all major lines of argument and to weigh them carefully.

7.4. Members who work with families, couples, children or groups, or who take up supervisory or training roles related to work with families, couples, children or groups ensure that they are adequately trained and supervised to carry out such practice.

8. Communication

8.1. Members are open in giving information on the subjects of their training, qualifications, experience, and supervision arrangements. When it is necessary to expand on these matters in order to explain them, psychotherapists differentiate between perception, fact and personal opinion.

8.2. Members give due consideration to any utilisation of electronic communication and social media and are aware of and maintain confidentiality with respect to all communication, both public and private.

9. Consent

9.1. When client-related information is to be used in written or spoken form in a public forum (this includes trainee case studies, research and dissertations), the psychotherapist obtains written consent for its use and adequately disguises all identifying information. Consent must be informed consent in that the client must know the purpose for which the material will be used. There is also an obligation to consider what effect seeking such permission might have on the ongoing or past work. Where there is doubt, the welfare of the client and respect for the client's interests is paramount. Particular care is taken so that answers to follow-up questions and other spontaneous remarks do not inadvertently reveal the identity of the client or go beyond what has been agreed by the client. Where the client specifically requests that material should not be used, this must be respected.

9.2. It may be desirable that the client's general practitioner is informed that the client is receiving psychotherapy. For example, when the client is already receiving medical treatment for emotional or psychological conditions, psychotherapists should seek to

inform any appropriate healthcare practitioner such as GP. However, this must be done with the consent of the client.

10. Records

10.1. Members maintain a Therapeutic Will and Therapeutic Executor.

11. Physical and Mental Health

11.1. Members ensure that they are fit to practise. They keep their own well-being under review, and ensure that they replenish their personal, professional, physical and spiritual resources.

11.2. Members have regular supervision appropriate to their experience, client load and field of work.

12. Professional Integrity

12.1. When members have any concerns regarding a colleague's professional behaviour or capacity to work psychotherapeutically they address the concerns firstly with the colleague directly, and if the concerns persist, with the ACPP Chair of Ethics.

12.2. Members are aware that information shared with them by their clients is coloured by the client's own viewpoint. Members hold others outside the therapeutic relationship in due regard and respect.

12.3. Members work with an awareness of the powerful dynamics that can be evoked within the psychotherapeutic relationship. They are aware that transference and counter-transference issues arise in relationship, and are aware of the influence this has on their own and the client's psyche. Provision for ongoing supervision and feedback from colleagues and other professionals are part of the psychotherapist's professional life.

12.4. Members ensure their physical work environment is appropriate to the services offered and conducive to the safety and privacy of the clients and therapist. If they work at their own home, they must have a suitable work setting. Members recognise that working from home is different from working in a non-domestic setting and needs careful

consideration and planning, and where appropriate they consult with colleagues with experience of working from home.

12.5. Psychotherapists ensure that their qualifications conform to the requirements of ACPP and any other organisation of which they are members.

12.6. When psychotherapists employ, train or supervise others, they accept the obligation to further the professional development of these people.

13. Advertising

13.1. When describing their services, members limit information to a factual statement of the nature of the services they offer, practical details and their relevant qualifications. They do not make evaluative statements as to the quality of their service, nor do they make comparisons with other similar services. They do not misrepresent themselves in terms of their professional qualifications, experience and membership of any professional association. The same restrictions apply to statements made on a personal or group website as apply to advertising generally. Any detailed descriptions offered do not infringe these general limits.

13.2. Public statements, published work, advertising and promotional activities of psychotherapists are guided by the primary obligation to aid the public in developing informed judgments, opinions and choices. Members represent themselves and any associated organisations accurately.

14. Indemnity Insurance

14.1. Members ensure that their professional work is adequately covered by appropriate indemnity insurance.

15. Complaints

15.1. Members communicate clearly the name and address of the organisation to which they are accountable and produce, if asked, details of how to make a complaint.

15.2. Members inform the ACPP Chair of Ethics if any complaint is in progress or has been upheld against them in another professional organisation, or in connection with their professional work or in respect of any professional organisation with which they are directly involved, or they are convicted of any criminal offence, in which case information will be held in confidence unless it has a direct bearing on a psychotherapist's professional viability, or successful civil proceedings are brought against them in connection with their work as psychotherapists.

15.3. Complaints are dealt with in accordance with the relevant UKCP, HIPC and ACPP procedures.

16. Research

16.1. Research is ultimately for the benefit of clients but as in all areas, the welfare of existing clients must be paramount. Every formal research programme must be adequately supervised. The supervisor needs to be skilled in research methods and have knowledge of psychotherapeutic practice. Ethical considerations regarding methods, risks to clients and possible outcomes need to be addressed, and informed written consent obtained from anyone involved or whose material is used.

16.2. Care must be taken to ensure that personally identifiable information is not transmitted through overlapping networks of confidential relationships. For this reason, it is good practice to avoid identifying specific clients during supervision and other consultations, unless there are sound reasons for doing so.

16.3. In any exceptional situation where disclosure is regarded as necessary, the client should normally be informed.

16.4. Members clarify the nature, purpose and conditions of any research with participants, and obtain informed and verifiable consent in writing before embarking on a research programme.

16.5. Members recognise that their responsibility to maintain professional competence involves being aware of current research that impinge on their model of approach, and being sufficiently aware of research methods to evaluate validity and reliability of research done. They accept responsibility for the selection of their research topics and methods. In publishing their work they acknowledge the existence of alternative

hypotheses and non-supporting data. They take credit only for work they have actually done.