

Code of Practice for BCPC Counselling & Psychotherapy Practitioners

This Code of Practice should be read in conjunction with the BCPC Statement of Ethical Principles. The Ethical Principles form the basis from which this Code of Practice has evolved to provide guidelines for good practice.

All students and graduates are expected to adhere to the following professional standards. The term 'practitioner' is used to cover both counsellors and psychotherapists and it applies to their therapeutic work with clients and to any related supervision or training work they may undertake with other practitioners. The term 'client' can refer to personal therapy clients, supervisees or trainees. Any breach of this Code should first be brought to the attention of the practitioner and their professional supervisor (or course tutor in the case of a student). If this is not sufficient it may be referred to the Standard and Ethics Committee for advice and help to resolve the issue. Serious breaches may result in a formal complaint being lodged with the appropriate professional body (usually UKCP or BACP)

This is not an exclusive list of professional expectations and other issues may be raised if it felt that they constitute clear evidence of unprofessional practice.

1. Relations With Clients

1.1. Professional Competence: BCPC only trains students to practice as individual counsellors or psychotherapists. Practitioners who also work with families, couples, children or groups, or who take up supervisory or training roles, must ensure that they are adequately trained and supervised to carry out such practice. The practitioner accepts clients commensurate with their training, skill and supervision arrangements and remains aware of the limits of their own competence. When faced with a client outside their range of competence the therapist will either refer the client to a therapist with the required skills or obtain appropriate supervision.

1.2. Professional Relationship: The client-practitioner relationship is professional. Sexual behaviour and other exploitation of the client-practitioner relationship (e.g. financial and emotional) is considered unethical. It is recognised that the ethical responsibility and limitations stemming from the professional relationship will not lapse with the end of the relationship and that any subsequent contact between practitioner and former client would always need to fall within those ethical responsibilities and limitations. With this in mind a practitioner should take into account the specific nature and significance of the relationship and time elapsed since it ended. Similarly, practitioners recognise the importance of a good working relationship for effective therapy, supervision and training, and are aware of the power and influence this relationship gives the practitioner. When committing to work with a client practitioners need to carefully consider any relationship boundary issues or dual roles they may have which could compromise the integrity of the work. Practitioners take steps to ensure that their sexual and emotional needs are met outside the professional relationship.

1.3. Contracts: Contracts with clients are explicit regarding fees, frequency of sessions, payment schedule, holidays, and cancellation of sessions by client or practitioner. Practitioners make it clear whether it is psychotherapy, counselling, training or supervision that is being offered. The length of the work, the methods to be utilised, transfer of clients and terminations, availability of other practitioners are

discussed with clients and mutual agreements sought. Qualified practitioners are expected to charge fees in accordance with their level of training and experience, and students to remain within the current guidelines provided by BCPC staff. All changes in contract should be fully agreed by both parties, however should the practitioner decide unilaterally to change fee level or terminate the work a reasonable period of notice must be given as well as reasons.

1.4. Description of Status: Practitioners are open about their training, qualifications, years of experience, and other related information regarding their professional competence. Until officially qualified, students should not describe themselves as a “psychotherapist” or “counsellor”. (They could describe themselves as a “trainee psychotherapist/counsellor” or a “psychotherapist/counsellor in training with BCPC”). All practitioners inform all clients, prospective clients and official representatives of their professional body, its address, and its Ethics, Code of Practice, Complaints and Appeals procedures when requested. Availability of the information should be made known.

1.5. Facilities: Practitioners maintain suitable facilities and conditions for the type of service provided.

1.6. Diversity and Discrimination: Practitioners will not express or show discrimination to clients on bases such as class, colour, disability/ability, gender, race, or sexual orientation. The practitioner undertakes to actively consider issues of diversity and equalities and will take steps to ensure that their theory and practice is culturally sensitive. Practitioners accept responsibility for examining their own prejudices and acknowledge the need for a continuing process of self-enquiry and professional development.

1.7. Physical or Mental Health: Practitioners commit to a careful consideration of how, in the event of their sudden unavailability, they can most appropriately communicate this to their clients. This will include how a client might be informed of a practitioner’s illness or death and, where appropriate, arrangements to support the client deal with such a eventuality.

2. Professional Issues

2.1. Professional Development: Practitioners maintain professional relationships with colleagues (skill-sharing, support and concern for ethical issues, promotion of theory, research and practice of therapy). All practitioners continue to maintain appropriate therapy and personal development for themselves, and appropriate supervision for their work. All practitioners are required to show a commitment to continue their professional development. Regular supervision with an experienced therapist is necessary until the trainee has been awarded the diploma and practised for at least three years. Thereafter all practitioners are required to have regular and ongoing formal supervision/consultative support for their work in accordance with professional requirements. Practitioners must ensure that there is sufficient distance and appropriate boundaries in their supervision arrangements.

2.2. Medical Support: When a medical aspect of the client’s condition may be involved, a non-medical therapist will seek medical consultation (either physical or psychiatric) where appropriate and encourage the client to do so. Practitioners will inform clients of their intentions to do so.

2.3. Legal Support: Practitioners 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.

2.4. Advertising: Advertising shall be limited to accurate information regarding qualifications and services. Demeaning and comparative statements about other therapies or therapists are considered unethical and should not be made. Neither should quotes from satisfied customers be used. All advertising, including websites, social media, letterheads and appointment cards, must be explicit about being in training with BCPC. If you are advertising on the basis of previous trainings, these should be explicit about where you trained and the qualification received, whilst also stating (in the case of students) that you are in training with BCPC.

2.5. Indemnity Insurance: Practitioners are required to ensure that their professional work is adequately covered by appropriate professional indemnity insurance.

2.6. Public Conduct: Practitioners recognise that their behaviour outside their professional life may impact on the relationship with their clients and will take responsibility for working with this impact in the interests of the client.

2.7. Research: Practitioners 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.

2.8. Offences and Criminal Convictions: All BCPC members have an obligation to report according to the laws of the land to the Chairperson of the Standards and Ethics Committee any criminal convictions that they have been found guilty of, as well as any other offences or actions that may bring the profession into disrepute. This information will be held in confidence except for purposes affecting registration or reaccreditation, but the UKCP Registration Board requires that information regarding criminal offences is reported to them, and they will decide upon action following recommendation from the Standards and Ethics Committee. Failure to inform the Standards and Ethics Chair may result in the members being struck off the Student and Professional Register.

3. Confidentiality

3.1. Duty of Confidentiality: The practitioner commits to respect, protect and preserve the confidentiality of clients. The practitioner undertakes to notify clients when appropriate or on request that there are legal and ethical limits of that confidentiality, and circumstances under which the practitioner might disclose confidential information to a third party.

3.2. Exemptions to Confidentiality:

a) When working in a multi-disciplinary team in which relevant information is shared.

b) In transfer and referrals mutually agreed between client and practitioner, pertinent information may be shared with the new practitioner, with the client's permission.

c) For supervisory or teaching purposes (with the client's identity protected where possible). Where the client may be known to the supervisor or member of the supervision group in a non-professional capacity alternative supervision should be sought.

d) If there is clear indication of probable serious physical danger to the client, to others, or to their property.

e) When required by law.

3.3. Report to Professionals: When any report to other professionals e.g. doctor, probation officer etc is requested or exchanged involving disclosure of the client's identity, mutual agreement is sought with the client. Any reports are written in ways that treat the client professionally and with respect.

3.4. Audio and Videotapes: When a video or audio tape is made consent is obtained from the client specifying whether it can be shown to: a) public, b) trainees, c) other professionals, or d) just the practitioner's supervisor. Similar permission must be sought for any research involving the client.

3.5. Use of Confidential Material: The client is informed of the practitioner's stance concerning confidentiality, and in what ways confidential material may be taken out of the session.

3.6. Publication: Therapists are required to safeguard the welfare and anonymity of clients when any form of publication of clinical material is being considered and to obtain their consent.

4. Additional points for Supervisors

4.1. BCPC graduates will not carry out supervision until they have been qualified for a minimum of 2 years as psychotherapists and 3 years as counsellors.

4.2. The primary purpose of supervision is to support the supervisee in understanding their clinical work and to maintain high standards of practice.

4.3. The confidentiality guidelines above do not preclude disclosure of information relating to supervisees when this regards a breach of ethical standards and/or concerns an assessment of the supervisee's practice.

4.4. Confidentiality regarding supervisee's client material must be kept except in the following circumstances.

- a) information is given to the supervisor's supervisor
- b) disclosure is agreed by all parties
- c) when the supervisor considers the breach of confidentiality is necessary to prevent serious emotional or physical damage to the client or to a third party

BCPC Standards & Ethics Committee 1988
(revised 1989,1993 and April/September 1996)
Adopted AGM BCPCA November 1996
Amended July 1998. Standards and Ethics Committee in consultation with UKCP.
Amended July 1999. Amended & Adopted at AGM Nov 1999
Amended and Approved AGM Nov 2001 (2nd edition)
Amended November 2003
Amended November Nov 2010
Amended July 2011

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