

## Transcript of Video Resource

# Ethical Framework for the Counselling Professions Tim Bond (and audience)

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## Our commitment to clients

**Tim Bond:** Expressing our ethical responsibilities as commitments is a distinctive feature of the new *Ethical Framework*. It emerged from the consultations which we ran on the earlier drafts where originally we presented the section as ‘duties’ but changed it to commitments in response to the feedback from members. The main reason for making this change was that we wanted to emphasise the importance of personal ownership, and professional ownership by practitioners, of the ethics that we deploy in the way we work with our clients. And commitment just seemed a better way of expressing that. It’s something that we invest in the process rather than simply obeying an external authority.

So how do the commitments fit? How do the commitments fit with other sections of the ? They are actually a summary of all that follows. The sections on ethics, and the section on good practice in many ways fills out the spaces between this statement of commitments. And so the commitments are something that could be given to colleagues, or given to clients, in order to help them understand the ethical basis of our work and what it is we ourselves have committed ourselves to, in our work.

One thing we will need to be mindful of, as we implement these commitments, is the gap between our intentions and our actions. It’s very easy in ethics to persuade .. for any of us to persuade ourselves that what we are doing is for the good, because that’s our intention, most of the time. I very rarely encounter practitioners who really intended harm. But the big challenge is how do we convert that intention into action, and how do other people perceive us through those actions. And that, we hope, by providing such a short clear statement of what those commitments are, will provide a basis for reflecting in supervision and in other ways, about how we convert those good intentions into actions.

### **Question 1: Tim, how do you anticipate that practitioners will use the ‘our commitment’ section?**

**Tim Bond:** Well I am hoping it will be a useful summary to be used with clients, particularly clients who you think might be concerned about some aspect of ethical practice, or need some reassurance, before they can start. So it’s a quick overview, a summary of where we are and what we think is important.

It also could be relevant for working with colleagues, because different professions have developed their ethics in different ways and so it's a quick way of communicating some of the critical issues for how we work with our clients.

And then also, in supervision, again it's a quick point of reference. It's a list which could be used when facing ethical challenges in your work, to try to think through, what's really important here and also what might be less significant. And again it's trying to identify the principles before you race to deciding a very particular behaviour is best, and I'll say more about that in ethical problem solving.

**Question 2: Tim, how do you hope that our clients will benefit from this commitment section?**

**Tim Bond:** I'm hoping that practitioners will feel free to offer the commitments to clients, or to make it part of the information that they make available to clients. We all know that clients at the beginning of sessions, and when they see us for the first time, some clients find it very hard to put into words what's concerning them unless we give them permission. And during the initial inquiries about 'how will we work together' clients can feel quite reserved and find it difficult to put into words what it is that they're interested in. So if it appears as something within the commitments they may feel a bit more comfortable in saying – 'about confidentiality.. If I was talking about this, what would be your attitude to that, what would you feel you had to do?' So you can hopefully.. we will be supporting clients in raising issues that concern them earlier in the relationship, which we know is a challenge for many clients, and a challenge for many of us in our practice.

I also hope that it will be, the mere existence of commitments will actually help clients to feel reassured, clients who might not have otherwise looked at all the documents which are the extended document of the *Ethical Framework* and all the supplementary guidance, but will feel reassured that there is a simple statement that exists alongside any agreement we've made with them as part of our contracting process, whether that's formal, or informal process.

## Ethics

**Tim Bond:** We thought long and hard about whether or not to include a section on ethics, because increasingly other professions are no longer addressing ethics explicitly. However, we thought ethics carries a particular role in the context of the counselling professions and they are particularly helpful for us in the ways in which we use supervision and also in trying to direct our attention to how far we are achieving our good intentions in the actions that we undertake. And so within ethics we've adopted three broad approaches, first of all values; and values are about our commitment to a particular direction of travel, if you like, and a particular version of what is good. We also have the language of principles, and principles are a combination of a value with an action. And principles are probably the language that is most widely used in professional ethics. But we've also included personal moral qualities, these used to be known as virtues, but perhaps personal moral qualities is more easily understood. We hope so anyway.

And so why include these three different approaches? Well it's partly because no one approach is capable of answering all of the questions, but also we hope that within those three different languages any practitioner will be able to find something that is helpful to them in seeing the ethical basis of their work and putting them in a more secure position to say, what is the good that they want to deliver, and how will they know that they have delivered it. And if we are to be ethical then we need to be able to think and communicate what that means. So by including a section on ethics in the way that we've done, we hope to be giving everybody a language in which to discuss these really important issues.

### **Question 1: How do ethics fit with working with people with different identities and from different cultures?**

**Tim Bond:** Our ethics are our internalised values. They come from our personal history, they are closely linked to our sense of who we are, our identity. They're also linked to our place in society and will vary according to our social and cultural background.

So actually having an ethical language and the way in which we framed it within the *Ethical Framework* – it's designed to look beyond our familiar ethics and to help us engage with people who come from different backgrounds, with different histories, different senses of identities, different social structures and to be more sensitive to how they experience their

ethics so that we can enter into more meaningful dialogues about what matters to the other person and understand how it relates to the ethics that we hold dear.

**Question 2: Acting courageously, you use that phrase in the statement around ethics, and I'm wondering why it wasn't at the beginning of the section?**

**Tim Bond:** Well, we can both agree that courage matters. Being ethical is not easy and can sometimes require considerable personal courage and professional courage in order to do the right thing. Positioning it at the end in the way that it is in the statement of ethics was a choice, and whether it's right or wrong, I'm not sure. We thought that it fitted the narrative of taking people through the different languages of ethics, and different approaches to ethics and then setting down the challenge; that it requires courage in order to be ethical. We could have started with courage as well! However we approach ethics there is no escape from the need for courage.

## Putting clients first

**Tim Bond:** Clients come first because they are the heart of everything that we do. Our reason for existing, and the reason for our work, is actually about working with clients and helping them in the ways that they want to be helped. So, in every sense, they are at the heart of what we do. And when we put them at the forefront of our ethics like that, that does help us to see our priorities more clearly.

What does that mean then in practice? Well the *Ethical Framework* spells out some of the key issues that are involved in putting clients first, but behind those issues is a commitment to our own professional vigilance and our willingness to be transparent with our clients about how it is, and why it is, we're working in the ways we are with them. And engaging with them, where possible, with dialogue about how they're experiencing the work and what it is they want out of it.

And really at the heart of all of this is the challenge we face with our clients in being trustworthy. If we put them first then we are.. one of our ethical concerns will be, how can we be trustworthy? Now we can own our side of that we can behave in ways that are trustworthy. What clearly we can't control always, is whether or not the client is able to invest that trust in us. And there will be clients for all sorts of reasons for whom, no matter how trustworthy we are, that trust is hard won. And occasionally may be very difficult or impossible to win. But, however that works out what really matters is, that we've put our clients first.

### **Question 1: Tim, what might get in the way of putting clients first?**

**Tim Bond:** There are a number of things that can get in the way of putting clients first. First of all personal agendas. Do we select issues to follow up with our clients because of our own personal interests in them, or do we try and select an issue because it's what matters most to the client or is most likely to be helpful to them. Also, some of our personal interests may not relate directly to what the client is saying, but in the background of our lives, so for example; one ethical issue has occurred from time to time where there is a suspicion that a practitioner is shaping how they work with a client to extract as much money as possible, rather than thinking through how to be as efficient, and as effective with the client in the shortest possible time.

There may also be professional interests that can get in the way of putting clients first. Very often we are drawn to this work because we have a particular interest, and a certain theory or a particular approach to therapy, and when that fits a client, it's not an issue, but if it doesn't fit well, then again we have an ethical challenge about how we adapt the way we work; which may be moving off our area of interest, or particular motivation, in order to be responsive to a client, and put their interests first.

There may also be competing things in the background of the environment in which we are working, so it's sometimes agency policy can get in the way of doing what we think is best for a client. Now we cannot just simply ignore agency policy, but what we need in the context of putting clients first on all those issues is a commitment to being vigilant to challenging ourselves about what are our priorities and how we can be confident that we're shaping those priorities around what's best for our clients. So that they come first, in our thinking about how we approach our work, with each and every client.

**Question 2: What are the challenges that practitioners may need to think about when putting clients first? For example, if they have divided loyalties between a coachee's employer, who pays, and the client?**

**Tim Bond:** Divided loyalties are an increasingly common experience for practitioners whether as coaches, in pastoral care, or in counselling and psychotherapy, and our best way of resolving them is in the first instance to try and make sure so far as possible that there is a degree of compatibility between the different expectations and to have had some preliminary conversations with people to ensure they understand the constraints and the purpose of the relationship that we're working with.

And then, with the client in particular, if there are limitations or constraints, it is important to be transparent with the client about where they are, and to share with them any limitations that may arise from that so that they don't inadvertently drift into situations which compromise their safety or their wellbeing with other parties, who may be for example, in this question, be their employer.

And really in the end it comes down... because these situations sometimes arise in a way that it's easy to anticipate, but sometimes because of the unexpected twists and turns from the material the client presents, can suddenly arise within a session. And it's just keeping an ear open, for when these situations arise, and trying to help the client become aware of the

issue, before they have already committed themselves to something which might have consequences. So, it's just trying to think through each situation, trying to bring them to a point where the interests are mutually compatible, rather than a matter of divided loyalties.



## Working to professional standards

**Tim Bond:** To be professional, is to be special in how we work in particular ways. In particular, the public expects of a professional, someone who has high levels of knowledge relevant to their work, and also high levels of skill in how they implement that knowledge. And so the professional standards that are set out within the *Ethical Framework* are designed to meet those expectations and to support our claim, that we are actually fulfilling important work that makes a difference in people's lives. The standards that we adopt will apply regardless of whether we are working on a voluntary, or paid basis. Standards by their nature, in any professional role, apply across any of that work and are independent of the basis on which it is funded or organised. And so our standards are our shared standards as members of the counselling profession.

### **Question 1: Can you clarify 'at least fundamental professional standards' and whether there are other types of standards that we need to be aware of?**

**Tim Bond:** Yes, there are a whole range of professional standards, and indeed there are many different classifications, but the classification we've adopted for the purposes of the *Ethical Framework* and the supplementary guidance comes from the Francis report and Mid-Staffordshire hospitals, where things have gone seriously wrong there, and what the Francis report commended is a focus on fundamental standards.

Fundamental standards are those below which a service or not be offered because it is unsafe, either because of the level of staffing, or the quality of service that is possible to provide. And it is conceivable in the world of the counselling professions that an unsafe service could be adding to the distress of clients rather than easing their issues and helping them with the problems for which they sought help. So there's fundamental standards – that's the baseline; and then there are enhanced quality standards, and these are the standards that any service, or any of us might adopt for our own particular work. And they're the standards that are made possible by the level of funding and the organisational.. the way we organise our work to meet those standards.

And then there's a third level of standard. These are sometimes referred to as the developmental standards. These are the standards to which we aspire in the future. Where

we want our service to be, at sometimes.. a defined time: three years' time, five years' time, or whatever it is.

So, there are those three sets of standards: fundamental quality standards, enhanced quality standards, and developmental standards, and of those the fundamental standards are the most important, because they're the ones that determine whether or not a service is safe to operate

**Question 2: Does the commitment to keeping records mean that we all have to keep records in the same way?**

**Tim Bond:** No, it doesn't mean that we all need to keep records in the same way. The guiding principles for how we keep records are that they should be sufficient for the purpose for which the work is being undertaken. Sufficient for the purpose that the client understands the work that is being undertaken. And they shouldn't be excessive. And that does mean that they will vary according to the type of work we're undertaking. For some types of work the records may be minimal. In other types of work it may be highly appropriate that they are really quite detailed. Because that helps and supports and underpins the work. So understanding the purpose for which the records exist, and how those records can help the work really guides how we keep those records.

**Question 3: Is there ever a justifiable case for not keeping records?**

**Tim Bond:** Yes, there could be a case for not keeping records. Clearly the *Ethical Framework* puts emphasis on keeping records, but because of the nature of the records that goes with our work these are personally sensitive data and that means that there are certain legal requirements we need to meet before we can keep records, so first of all the client has to have explicitly consented to having personally sensitive records in existence, and also, we have a legal responsibility to ensure that the records are secure. So if either of those conditions can't be met, then that would be good grounds for not keeping a record.

Now there may be in some services there will be difficult decisions to then be made about whether they feel they can provide a safe service without any records whereas other people may feel much more comfortable in continuing to provide a service. I certainly have visited services working in challenging circumstances, often in the community, where it's not possible to protect the security of records, or clients are reluctant to provide consent, so no

record is made of their circumstances. But I think they would be exceptional. I think our norm now we are expected like any profession to keep some sort of records of the work that we do.

**Question 4: I can see that respecting someone's dignity is important if someone is undergoing a physical examination, or treatment, especially if it is intimate, but what does that mean for us when we work mainly through talking and listening?**

**Tim Bond:** Dignity means 'worthy of the respect' - from the client to themselves for themselves, or for others. In the context of our ways of working through talking and listening very often I think that respecting a client's dignity means protecting them from embarrassment, or protecting in the eyes of others, so a typical example will be one, probably we have all encountered in our practice at some time where somebody becomes very distressed, as part of the therapy, and how we protect them, and help them when they leave our room in terms of .. how they appear to other people, so that would be one very concrete example, but there may be other cultural things as well when working with people from other cultures, how we greet, how we end the sessions, may also be very important to someone's sense of redeeming control, or putting up a public face, and protection from others, so actually the issue of dignity at first sight does look as if it might be on the margins of our practice but on closer examination, I think that dignity is actually very important to us, and has an important role to play in how we approach our work with clients

## Respect

**Tim Bond:** Respect is important in the counselling professions because that creates the conditions in which clients can do their best work. They can feel that what is important to them is held in respect and that they're valued as a person; with all their distinctive characteristics.

A definition for respect that you can find in the section on ethics is, 'showing appropriate esteem for people and their understanding of themselves'. So what this requires of us is that we're respectful and accepting of, the subjectivity of another person rather than imposing our subjectivity upon them. And it opens up a willingness to challenge ourselves about whether we are really understanding the subjectivity and the points of reference to someone else's experience.

This has profound implications for how we work with clients, because clearly respect is part of offering support to somebody else, but it is not to the exclusion of offering challenge. And perhaps one of the bigger ethical challenges in everyday practice is how do we offer challenge, which is also respectful of the person we're working with. If we don't offer challenge, when it is required, then we run the risk of collusion and possibly leaving a client more stuck than they were when they first came to see us.

So respect is a complex ethical demand on how we work, but its also one which once we start to engage with it and start to realise its different requirements of us, can be very absorbing and challenge our understanding of what it means to be a human being.

### **Question 1: Can you help me Tim with GP22d and explain the difference between individual and relational autonomy?**

**Tim Bond:** There is a significant difference between individual and relational autonomy which relates directly to the diversity of human experience and cultures. Individual autonomy is a concept which we are very familiar with in a Western modern cultural context. It's a notion of the bounded self and a notion that we can conceive of ourselves robustly as individuals as a first point of reference. However, this understanding is not unproblematic and there are times in life, it may also relate to gender as well, when people are living with dependence either with children or older relatives, where the sense of family and

relatedness is stronger than the sense of being an individual and so that's one version of relational autonomy.

But there is another version of relational autonomy as well which applies to probably about two thirds of the world's population, where the first point of understanding oneself is not as an individual, but as a member of a family, possibly an extended family, or a clan. Let's give you an example: when talking to a Maori in New Zealand, he said to me, 'you kick my brother, you hurt me'. So the sense of the individual is much weaker than the sense of being part of a bigger group. And the group becomes the first point of reference.

And this is so important for us because so much of our theory, particularly from the 60's, 70's and 80's comes from a culture which is full of individualism and how we then translate our work for people who have a different set of identity systems is really important. That's all part of how we reach out to demonstrate respect to our clients.

**Question 2: Tim, what are the implications for a practitioner who refuses to work with any specific group of people because of their own personal values and beliefs? Can a person refuse to work with a category of people?**

**Tim Bond:** This is a challenging question, but one that we do need to grapple with. If we're refusing to work with somebody because of our own personal values, beliefs or prejudices then that would be unethical under the *Ethical Framework*. It might also be illegal if the discrimination is against one of the protected categories under the Equality Act. The *Ethical Framework* extends that notion of respect beyond simply what is legally protected and in doing so we are expecting practitioners to set aside their personal prejudices in order to engage with other people.

However, there are other aspects to this, which complicate it. If someone really has restricted or antagonistic life experience, this may raise questions about competence as well, and whether someone should be working outside their capability to offer a service to a client. So we are going to have to see how this works in practice and to make the appropriate adjustments as we gain experience as an association.

Other associations have already encountered this, particularly American Counselling Associations, have had quite a painful experience over how they manage respect for people in circumstances where the practitioner has strong values against them. But generally

speaking it would be unacceptable under the *Ethical Framework*, to refuse to offer a service on the grounds of personal values.

**Question 3: Thinking of colleagues working with children and young people. What are the differences in working with children and young people between this *Ethical Framework* and the previous version?**

**Tim Bond:** There's a lot in common between the two *Ethical Frameworks* particularly in relation to how consent is managed with younger people, and as they mature and have the capacity to take on consent for themselves. However, there are also some significant differences and these are reflected in the *Ethical Framework*, but even more so, in the supplementary guidance and these relate to issues around safeguarding. Since 2000 when the original *Ethical Framework* was first developed, safeguarding has developed considerably. The ideas behind it, the ideas about taking the initiative in order to provide safety and protect children and young people from abuse or neglect have all developed and there is also a slightly more controversial development in relation to prevention of terrorism, the Prevent programme. The *Ethical Framework* provides the opening to engage with these issues, but it will be in the supplementary guidance that we deal with the detail and future developments in issues of safeguarding.

**Question 4: How are you defining 'vulnerable adult' in colloquial or legal sense?**

**Tim Bond:** There is no fixed definition of 'vulnerable adult' and that's not just between the four nations of the UK but between different services. But there are certain common elements that appear in many different uses of the term so first of all, someone who is an adult and over 18, secondly someone who is unable to take care of themselves without assistance, or who may be vulnerable to abuse or neglect unless assistance is provided; and they're the common elements to what people mean by vulnerable adults, but when you are working in a particular context you very often will need to look at agency policy, relevant legislation, in order to be able to be confident in a definition, of whether or not someone actively fulfils the requirement of 'vulnerable adult'. For further information, the glossary or good practice resources, particularly good practice in action.

## Building an appropriate relationship

**Tim Bond:** Relationship is so important in the work of the counselling professions.

Research tells us that its worth at least 30% of the effect and value of the work to the client, and in some instances it may be worth considerably more, so getting the relationship right is such an important platform from which the work proceeds; no matter whatever role we're taking on whether that's counsellor, psychotherapist, coach, or providing pastoral care. So the *Ethical Framework* sets out some of the key issues round building that relationship and where the boundaries lie within that relationship.

So the aim of the relationship is to empower the client, to ensure the relationship is bounded and the client is secure within those boundaries, or as secure as we can possibly make them, and also, to some extent, putting on yourself an imposed limit on your engagement in their lives by boundaries as well. And that also means to that we have to be very attentive to.. that we don't use the relationship as a basis for exploiting clients in any way, or, undermining the relationship by inflicting abuse or bullying on clients; a rare event, but not totally unknown. And again in terms of building the quality of the relationship, we need to be attentive to the client's experience of working with us as practitioners. How do they experience the relationship and in certain approaches to therapy; that is where the therapy works. But it will always, no matter what we are doing with clients, be part of the background for our work with them.

And so, how do we manage the challenges of what can be complex and sometimes ambiguous issues within our relationships with our clients? And this is where the centrality of supervision is so important. It's the place where we can talk honestly and openly about our experience of the work and the relationship with the client, and how that works for the client, but also, the impact it has on us, and how we engage with that in order to be able to guide our work with the client; a plan for the future.

Underpinning the relationship will very often be a contract with the client. That's partly to help to establish their expectations and help them feel confident about the sort of work that they're engaging in and also to know its limits, and also if there are any risks to a client so they can take control of those risks, and decide what to present to us within our work.

Perhaps one of the most contentious issues that has recurred throughout the life of talking therapies is the issue of sexualised behaviour between practitioners and clients or between supervisors and supervisees, or trainers and trainees. Sadly, there have always been a few

cases every year where someone has crossed that boundary. And one of the key things that we need to assert as a profession is that, that is unacceptable, and that it does constitute unethical behaviour. Because it compromises the purpose of the relationship and whilst, if we are going to create conditions in which people can be psychologically intimate with us, they need to be confident, and we need to know, that that will not convert into a sexual relationship.

**Question 1: Tim, we talk about the importance of contracting with clients. Can you tell me what you think are the key challenges of getting the contract right for the client?**

**Tim Bond:** Getting the contract right means several things, first of all, any contract needs to be fit for purpose; it needs to be clear and readily understood by clients, in a language which is natural to the client, it's so much better, whether producing a formal, or informal, contract to actually express it in words which say what you mean and you both understand it. It's equally important to avoid unnecessary legal terms because they can introduce confusion and meaning, which neither party is necessarily thinking about.

Another aspect of a good contract is that it needs to be compatible with any other contractual commitments that the practitioner has, so if we start to think through the range of contractual agreements that may be all applying at the point of working with the client. At its simplest in private practice, or in a voluntary organisation where practitioner is working on their own, and free to form their own contracts, then it's just simply an agreement between the client and the practitioner. But if there are other parties involved, and clearly as we're members of BACP, it needs to fit our commitment to the *Ethical Framework*, we take that as a given, but there may also be an employer, there may be agency policy, there may be a particular area of government; legal requirements that apply, so good contract takes all these into account and tries to avoid the situation where there are conflicting contractual terms applying to the same work with the client.

Some of the most difficult ethical issues I've encountered in practice, in terms of helping people to resolve them, where there had been several legal commitments which are not compatible with one with another, through having contracts – possibly with a funder, possibly an employer, and then offering something different to their clients. And their caught in a catch 22 – whatever they do, they're going to be in breach with somebody and so they're put in a very uncomfortable position of trying to decide should that breach should be with the client or with some other parties. Never an easy solution to resolve. So really I would say,



keep the contract clear, keep it understandable for clients, however that contract is constructed, and ensure compatibility between the different types of contracts that might apply.

**Question 2: Is a written contract now required or are there circumstances in which a verbal contract would be sufficient?**

**Tim Bond:** The important thing ethically is that we do engage with contracting with our clients. How that contract takes place can be quite variable, it could be through a conversation, it could be through someone saying simply 'I've read the information about the service you provide and I accept those terms' or it could be a specific contract which is set up and you ask people to sign before you start to work with them, and have a discussion about anything that might be of concern to a client. So ethically we can be quite flexible. In terms of the law though one of the difficulties is if we have a spoken contract, and if there were some later disagreement about that contract, there is no evidence.

It is sometimes said that 'an unwritten contract is worth the value of the paper it wasn't written on' in other words, not much. So, there is a good case for saying that if possible we should be recording the nature of the contract that we've entered into. If it's an aural/spoken contract, we put down the key terms in a note or something. If it's a more formal contract, then it's a written contract that can be signed and dated because that provides the best evidence in the event of future difficulties. And sometimes that evidence can protect the client from further distress because misunderstandings do arise from time to time, and people's memories, client and practitioner, may not be perfect and so anything that produces a degree of certainty and a degree of confidence in what's been agreed can be really helpful with the trust building that's so important for our work.

**Question 3: The *Ethical Framework* point 34 states that we will not have sexual relationships with, or behave sexually towards, our clients, supervisees or trainees. Can you tell me what is the distinction between sexual relationships and behaving sexually?**

**Tim Bond:** There is a distinction between sexualised behaviour, or sexual behaviour and sexual relationships. Sexual behaviour is defined by the Professional Standards Authority as acts, words or behaviours designed or intended to arouse or gratify sexual impulses or

desires. And that behaviour may, or may not involve another person. It's behaviour which the speaker, or actor, is trying to meet their own sexual needs. A sexual relationship does involve another person. In our case, our cause of concern would be a client and they are somehow brought into a relationship involving sexual behaviour. So to put it into a nutshell sexual behaviour could just be solely the activity of one person which the other person is resisting. A sexual relationship involves another person.

## Integrity

**Tim Bond:** Integrity is a personal and professional moral quality that we bring to our work with our clients. If we turn to the section on ethics we will find integrity is defined as ‘a commitment to being moral in dealings with others including personal straightforwardness, honesty and coherence’. And so the *Ethical Framework* sets out a number of features of integrity, these include, honesty and openness, accurate communications about your qualifications, being conscientious in your consideration of the law, a new responsibility to inform BACP about civil claims against you, or serious financial difficulties, particularly bankruptcy, insolvency or similar financial arrangements and a long standing commitment to avoiding bringing the profession into disrepute.

**Question 1: So Tim, a tricky question for you here! Why don't we simply obey the law like many other professions rather than give conscientious consideration to the law as in point 42?**

**Tim Bond:** It's a good question, we did give careful thought to simply saying as most professional bodies do, we will obey the law, but the moment you start to think through the consequences of that sort of response, you become clear of some of the dilemmas that are involved, and particularly in the context where we want practitioners to have ownership of their ethics. Whilst it's not a common occurrence, there are situations where practitioners find themselves caught on the horns of a dilemma because what is lawful may not be ethical, what is ethical may not be lawful.

And to give you a current example of that, at the moment women's rights movements in Northern Ireland are troubled by the lack of provision for termination of pregnancies and abortion, and giving women control of their own fertility. So there are campaigners there, some of whom may be members of BACP who are challenging the law, in particular there's one very courageous young woman who is openly declaring that she is providing medicines to help women terminate pregnancies acquired through medical consultation elsewhere, but outside the legal framework of Northern Ireland. Now she may, or may not, be a member of BACP, but it's that sort of situation that made us think about, should we simply be saying 'obey the law' and you can think of other rights campaigns in the past which have similarly run ahead of where the existing law is.

So, in a nutshell, we are all bound to obey the law as citizens. We cannot expect to break the law without consequences with impunity, without punishment. But the question we start to ask ourselves is: If someone is doing that in a way which is open and is a clear challenge within a democratic process, should BACP have a responsibility to deal with them under the professional conduct procedures. If the wording was simply 'we will obey the law' then every campaign, every infringement of the law could fall within the professional conduct procedures. Under this wording, it would be for the practitioner to demonstrate not only that they are aware of the law, but also that they're accountable for the ways in which they are challenging the law and are willing to accept the consequences.

It's a more challenging demand on us as practitioners, than simply obeying the law, but it's much closer to the ethos that this *Ethical Framework* is designed to support and the professional ethics that support our profession and how we sit alongside our clients. We developed this stance in a previous *Ethical Framework*, and retested it again in front of a panel of lawyers, as part of the expert ethical reference group, and we still think that this is the right way forward for us as a profession.

**Question 2: Tim, I am aware that previous framework talked about declaring criminal charges Why has the new framework included civil claims and serious financial difficulties?**

**Tim Bond:** We gave a lot of thought to this and it seemed that the right approach was to ask members to declare situations such as significant civil claims against them as members, or significant financial problems, not that that means that they would be necessarily prevented from practicing, but the process of declaring it will help members to engage with the consequences of those difficulties for their practice, and to think through what safeguards could be put in place to protect clients.

But also, there's another reason. In the last resort, it is BACP's responsibility to protect the integrity of our profession; the counselling professions. So by providing this information it enables BACP to exercise its responsibilities, and as it were, to be a credible quality assurance process . So BACP is best placed to able to provide a quality assurance process for the work of all of its members. That's the reasons why we've extended the requirement to disclose beyond where it was

## Accountability and candour

**Tim Bond:** Accountability and candour is a new section in the *Ethical Framework*, and one which has been a source of some concern, to some practitioners and therefore we have listened to those concerns and revised the way we've presented these issues. So accountability is about taking responsibility for your work with your clients and being willing to communicate with people who hold responsibility for that work about what you've done, why you've done it, and what's worked, and what hasn't worked.

Now the issue which caused concern there is that of course.. there are aspects of the work for which, no matter how we work, it's the client's response that determines the outcome. So accountability needs to be approached in a way which asks 'what is the responsibility as a practitioner?' And 'what is the responsibility to the client?' For their input to the outcome of their work with us.

Candour has also caused some people some concern, but is now becoming increasingly part of the expectation of any professional regardless of work, but particularly any professional working in the context of health, social care, mental and emotional wellbeing. And what the duty of candour does is it changes how we approach issues when we become aware of something having gone wrong.

In the past we might well have waited to see how the events developed and managed them in a slightly more passive way, and more responsive way than the duty of candour requires of us. Duty of candour requires that the moment we become aware that something has gone wrong. For instance information has been leaked, confidential information has been leaked or intruded upon, or something is going wrong in the therapy in a way which puts the client at risk. The duty of candour requires that we take active steps to communicate with the client, what it is that has gone wrong, and support them, not only do we take responsibility for trying to put that right, but we also er.. encourage them to do what they can to protect themselves from the consequences of whatever has gone wrong.

So that.. is a new area we are going to have to see how it develops in practice, but the framework has been written in a way that has taken account of the real concerns of experienced practitioners.

**Question 1: What if I have a client who is so concerned to get on with resolving her problems that she is not interested in discussing how we will work together as suggested in point 46?**

**Tim Bond:** This is a familiar problem and many of us will experience this with clients from time to time. Putting a client first does mean that we ought to be taking into account their wishes and needs in how we work with them, and respecting their autonomy as a means of empowering clients. However, although we can offer the opportunity, we can't impose it upon them. So where we have a client who is reluctant to engage with that opportunity, for whatever reason, then the obvious consequences that we also in addition to the other aspects of the work we are undertaking, may temporarily or for some considerable period of time, have to be watching out for their best interests as well and looking for opportunities to re-engage them in the discussions about how we work together.

**Question 2: What are the reasons for including an obligation of candour in the *Ethical Framework*?**

**Tim Bond:** An obligation of candour is the logical consequence of putting clients first, which creates a higher expectation that we work proactively to protect their safety and to protect them from harm, particularly when we know something has gone wrong. So, the *Ethical Framework* sets out in a clear way what our responsibilities are in terms both of putting that right as best we can in the circumstances, but also engaging the client at the earliest opportunity. Letting them know promptly that something has gone wrong so that they are in the best possible position to protect themselves.

**Question 3: How does the duty of candour work with children and young people who may not have the capacity to consent themselves?**

**Tim Bond:** Well of course, where children and young people have the capacity to give consent then it works in much the same way as with adults, but if they don't have a capacity to give consent, or adequate capacity to understand the consequences of what has gone wrong, then we're looking at engaging with someone with parental responsibilities. Or where that's not appropriate then looking to engage with somebody who is able to act in the best interests of that young person. So duty of candour still applies, but it may need to be worked through with someone else.

**Question 4: How should monitoring be undertaken? Must it always be in writing perhaps using questionnaires or can it be discussed less formally with clients?**

**Tim Bond:** Monitoring can take place in many different ways. What really matters ethically is that we are attentive to how the client experiences our work and its finding the best way of achieving this in the type of service that we're providing. In some services, the formal questionnaire will be highly appropriate and a good way of building up a knowledge of client's experiences individually and collectively, but in other situations actually monitoring may be no more than an open question put to somebody giving them the opportunity to express their views in a way in which they feel safe to do so. What's not acceptable is blundering on, ignorant of how a client is experiencing a service, or overriding the wishes of a client about how they would like to receive their service, without some clear justification for doing so.

## Supervision

**Tim Bond:** Supervision is a specialised form of professional mentoring which is provided for practitioners responsible for undertaking challenging work with their clients. It's a distinctive aspect of our field of work and something which we have developed and believe could have wider applications to anybody who's working within a relationary complex situation, or working with emotionally challenging issues.

And why do we provide supervision, and why do we think it is so significant? It's partly about ensuring standards and ensuring that individually and collectively we meet those standards. But supervision is so much more than that. It's also about enhancing the quality and creativity of how we work with our clients. And, the third aspect of supervision is how we ensure that as practitioners, we are capable of providing sustainable and resilient services in the context where much of the work that we do with clients is, can be, quite personally challenging.

So supervision addresses those three areas. Sometimes they've been referred to as 'normative, formative and supportive' aspects of supervision, and there are many other ways of viewing supervision. It is a well-developed role.. with lots of theories that underpin it now.

So what does the *Ethical Framework* say about supervision, and what's new. Well one of the new elements in the *Ethical Framework* is that we have introduced the notion of.. that within supervision, moments will be taken to review the allocation of responsibility for work with clients, and also the application of the *Ethical Framework*. These are new aspects of supervision, and we'll have to see how they work in practice, but early attempts at doing this do suggest that this could be a very constructive development.

And we've also taken the opportunity in the *Ethical Framework* to recommend our practice of supervision to other professions who are working in relationary complex contexts, or undertaking emotionally challenging work. And obvious examples would be people working for example in palliative care, or working in conflict resolution, when working in mediation, there are a whole range of fields where perhaps supervision could have a more significant role to play.



**Question 1: Could you clarify what the term ‘substantial part of’ means in the requirement that a substantial part or preferably all of the supervision needs to be independent of line management?**

**Tim Bond:** A substantial part is that which is sufficient to respect the privacy, safety and containment of the practitioner independently of line management. In practice in some agencies, in some contexts, supervision is nearly always wholly independent of line management. But that isn’t universally possible or sometimes in services universally desirable, but what we are trying to protect is some space for practitioners, a significant amount of space, where they can talk freely, in private, in a defined and bounded relationship in order to gain the sort of support they need to provide a sustainable and resilient service to their clients.

**Question 2: Tim, it would be really useful if you could clarify what is ‘adequate levels of expertise’ for supervisors?**

**Tim Bond:** Being a supervisor clearly is an expert role which requires skills over and above those of being a practitioner. However, what are those competencies is beyond the scope of the *Ethical Framework* and this is where members need to look at other documents, and indeed a lot of work has been put into defining, ‘what are the competencies’ of supervision, which can be found on the BACP website. And clearly training, and having the appropriate knowledge base for undertaking this role is a major component of providing effective supervision.

## Training and education

**Tim Bond:** Training and education is the bedrock of any profession. It is the source of the high level of knowledge and expertise that is expected of a professional, and so this has a consequence for trainers. They not only need to be competent in the professional role that they are offering training in, but they need additional expertise in the processes and subject matter of offering training and education to practitioners. There is another set of knowledge and expertise that's required. And within the *Ethical Framework* you will see there is a focus on trainers as models of good practice. And this is partly research based, as a requirement, because we know that what people do as trainers has far more impact sometimes, than what they say. So how you model the management of boundaries in relationships, how you model the engagement of trainees in the course, will also become the template by which the trainee's work with their clients in many circumstances.

**Question 1:** Hi Tim, I've got a query about the relationship between point 62 and 67, which says, in a nutshell, that trainers and educators need also to be competent therapists in order to be good role models, and I guess I'm just wondering if it's necessary to be both and if that's asking a little too much of us?

**Tim Bond:** The *Ethical Framework* is clear on this, we are expecting a lot of trainers, because both in terms of the quality of practice that they're able to demonstrate, regardless of role, whether that's counselling, psychotherapy, coaching or pastoral care, and also being able to demonstrate they are good in the practice of training and education. And the reason for setting this standard, and setting it as high as that, is because what happens in training is so important to the quality and credibility of what a profession offers to the public. The expectation is high levels of knowledge, and high standards of practice and high levels of competence and that can only come from high levels of training experience supported by high quality of supervision.

**Question 2:** Tim, I understand why it's important that clients should usually know that clients should know when they are receiving services from a student in training, but my question is, does this requirement equally apply to qualified and registered who are practitioners attending continuing professional development?

**Tim Bond:** The ethical basis for clients knowing that they are receiving services from a trainee is very much about the integrity of us as a profession of putting clients in the situation when they can make informed choices about the sort of services they receive. And that's fairly clear cut and straightforward with people who are receiving basic training, in whatever role that falls within the counselling professions.

When it comes to continuing professional development, it's a more complex set of issues. This is an experienced practitioner, whose already satisfied the requirements for independent practice, and so there it will depend ... it will be for the practitioner, probably be in consultation with the trainer, or with their supervisor to determine whether or not what they're developing is so new, that in order to provide an adequate level of service, and to protect the integrity of the relationship, a client ought to know, that this trainee is experimenting, or working with, a new set of skills, or whether there are sufficient safeguards in place that it does not have a significant impact on the client. For example, what is being learnt in CPD may just be simply an extension of an existing set of knowledge, or an existing set of skills, so there isn't a simple answer to this question, it's going to need to be judged on a case by case basis.

**Question 3: How does the *Ethical Framework* help us to know who has clinical responsibility in an agency setting?**

**Tim Bond:** Practitioners of all levels, all types, carry the major responsibility for the clinical work they undertake. However, the *Ethical Framework* does make a distinction between trainees and experienced or qualified practitioners.

The expectation with trainees is that the service they provide to members of the public will meet the requirements of fundamental professional standards. In other words, it's a service above the level below which a service ought not to be provided.... In order to achieve this, they will need to be working in collaboration with their trainers and in particular their supervisors, so there is more of a shared clinical responsibility. But as they mature, and as they move into qualified status, and are therefore capable of independent practice, they take the lead responsibility in that.

Now some agencies, and some specialised agencies, will also have clinical leads, or equivalents, however named who also help to support the practitioner in fulfilling those roles but exactly what support is available will vary according to the context. But what's important

for each of us as practitioners, that we are satisfied, working in the ways that we do, that we meet the standards required to offer services to the public and that we're engaging with the support mechanism's that are made possible, particularly through supervision, but also in the context of training with trainers, in order to meet those standards.

## Research

**Tim Bond:** Research matters to us in the counselling professions, because it is the way we develop our knowledge and our expertise in order to demonstrate how we help our clients and also to be able to explain to the world what it is we do, and what the basis is for how we do it. The research that we undertake can be enormously varied. Some of it can be quantitative, some of it can be about effectiveness, but there is a lot of important research which essentially qualitative, and about the meaning and the experience that clients have of working with us and also our reflections on how we can develop, how best we can help our clients. At the time of recording this tape, we're working hard on developing a new set of research ethics guidelines which will be available towards the end of 2016, possibly early 2017, depending how the writing goes. There are a number of issues though which we know already that will feature as important points within those guidelines.

First of all, the importance of informed consent. Informed consent has become a hallmark of sound research ethics internationally, it's partly grown out of the history of the abuses committed against research participants in the concentration camps of Nazi Germany, and that were exposed in the Nuremburg trials and the best safeguard against those sorts of exploitation, or any other exploitation, is to ensure that the persons participating in the research knows what is expected of them, knows what they will be expected to do, and is able to consent in a fully informed way about their participation.

We were also looking at the issues of independent review. This is the idea that research, before it starts, should be reviewed by some people who are independent of the researchers and anyone invested in the project, so that they can ask the challenging questions about the safety and the wellbeing of research participants. That involves a number of significant challenges for us as a profession, particularly where people are working away from educational institutions, or in environments where there aren't established research ethics committees.

And our final key thing that we're reflecting on as we were preparing these guidelines is how can we ensure that the research does not disrupt good practice of the counselling professions. How can we ensure that the research is compatible with what we think is good practice and what are the limits, in terms of testing out theories. Well all those issues will be reflected upon in the new guidelines and when they become available that will be publicised in the usual way.

## Care of Self

**Tim Bond:** The care of ourselves as practitioners matters to our clients. They need to know that we're sufficiently resilient to be able to work with them and to withstand the challenges of that work. This can be quite a challenge in any of the counselling professions, because when we start work with a client it truly is a journey into the unknown. We don't control the agenda. And so knowing that we have that basic resilience, and are managing ourselves in ways that makes the work sustainable for the time that the client needs us to be working with them is particularly important, and so we need to ask ourselves how ensure that we are sufficiently resilient and taking adequate care of ourselves in order to fulfil this work. And that is the function of this section in the *Ethical Framework*. It provides some potential sources of questions and points of reflection, which can also be discussed in supervision.

**Question 1: Tim, could you clarify, what is the proper role of supervision in care of self and when ought a practitioner to look outside supervision for adequate care?**

**Tim Bond:** Supervision is clearly a major part of ensuring that we provide a sustainable and resilient service to our clients and self-care is part of that strategy. And I think that the distinction that's important to us here is where a supervisor can engage with an issue that relates to the practitioner directly, and it may involve providing some support for that practitioner, but ultimately it focuses on helping the practitioner to deliver their service to the client.

The point at which the supervision is starting to be directed towards meeting the needs of the supervisee without necessarily having a direct beneficial effect to clients is probably the point at which, some other form of service is appropriate. It would be stretching the role of supervision too far, if it turned for example into therapy primarily for the supervisee, or some other form of support or training so that the balance of the different roles within supervision became distorted. So that's where I think the boundary is.

**Question 2: What do you think a practitioner should be considering if they need to stop work, either for their self-care or to protect their wellbeing?**

**Tim Bond:** This is a very challenging situation, providing the sorts of services that we do as counselling professionals can be very challenging to us as people. Sometimes clients can

touch on issues which we have not resolved in our own lives, or are currently raw and painful because of events that are going on in parallel in our own lives. But we shouldn't be giving up work with clients lightly.

Putting clients first does require us to think very carefully before we put our own wellbeing before the interests of a client. None-the-less there may be occasions when we need to do that in order to provide the quality of service that a client requires. But there are probably two issues that need careful consideration before simply terminating work with a client. One is deciding whether or not the level of challenge we're experiencing to our own wellbeing is sufficient to make continuing the work unsafe to the client. And if we do come to that conclusion, then there is a second level which sometimes gets missed out and that is how to implement the decision that we ought to be terminating the relationship.

So it may sometimes be that actually we need to continue working with the client longer than is possibly comfortable for us as a practitioner, but in order to manage the most productive transition for that client. There may be some situations, where for instance, a sudden illness, or dramatic change of circumstances, requires a quick response and possibly terminating work with a client but in those situations it is particularly important that care is taken over who, and how, this is communicated to clients and the arrangements that are put in place to ensure that the client has the opportunity of continuing the work with somebody else.

## Ethical Dilemmas

**Tim Bond:** It's ok not to know what to do for the best with a client. What is not ok is blundering on as though you did know. So, this is where when we sense that we're unsure what is the best thing to do consultation with a colleague, taking the issue to supervision, are ways in which we can test out, what is the best way forward. Sometimes we will need to seek specialist advice if it's a legal issue, or sometimes a technical issue in how a service is delivered, or if it requires some particular knowledge of responsibilities; for example about protection of confidentiality in agencies, or safeguarding issues where we may need to consult somebody who has the appropriate expertise. In the end what we need to be able to do, is to satisfy ourselves that we can meet a number of tests, about what is the best way to proceed. And there are three tests which I've found particularly helpful and I see many other people using them, and they find them helpful too.

The first one is around universality: would you as a practitioner be comfortable recommending the same solution to others? How would you regard the same solution when it is performed by others?

Another test is about publicity: would you be happy to explain your chosen course of action to other practitioners or other members of the public if confidentiality permitted that? Would you be willing to have your actions exposed or discussed, publicly?

And then the final test is justice: would you do the same for other clients? Would you do the same for famous, or influential clients?

And asking those questions of ourselves to test out how confident we are feeling about our proposed course of action is really helpful in trying to get hold of sometimes what the concern is, and sometimes it really helps us to feel, 'yes, this is the right way forward'.

### **Question 1: What is the difference between an ethical dilemma and a problem?**

**Tim Bond:** A dilemma is when you have two or more options, and it is not clear what is the best, or the least worst, way forward. There isn't an obvious answer – that makes it a dilemma. A problem on the other hand may be a single issue, which you know is going to be challenging, but it may well have a single answer, or it may turn into a dilemma.



**Question 2: Can you talk me through a simple ethical problem solving model that might be used in supervision?**

**Tim Bond:** Yes, there is a fairly standard model, that many people use, which is based on problem solving more generally. So first of all, you describe the problem that you're experiencing as ..briefly as you can, because that in itself helps to clarify what the issues are. Then you can ask 'whose dilemma is it?' Is this actually the client's dilemma, should they leave their partner for example, or is it a dilemma for you in how you manage your work with your client, or how do you manage other responsibilities that you may have in relation to this client.

Then looking at all the available resources, of which the *Ethical Framework* is an important resource, there may be other sources of information to do with the law or therapeutic theory, or coaching theory, or other things that relate to your role, which are particularly important.

And when you've taken all that information into account, which can be discussed at supervision, you can then start to think about, well what is the goal I want to achieve? What is the ethical goal I want to achieve? And it's important to go through this stage rather than racing to action, as in any problem solving model, culturally we tend to race to action rather than thinking of the direction of travel so asking ourselves what is the best ethical goal allows us to identify the general direction of travel from which we can then start to see possible actions and work out which action is most likely to achieve that ethical goal. And then, the task then becomes much easier because it's actually about implementing what you've decided as your chosen course of action, and then evaluating it and that might well happen in a later supervision session.

I've seen this simple approach to ethical problem solving used many times in supervision, and it's a model that I quite often use. But if it doesn't quite work then if you go into the literature on ethical problem solving, there are many other approaches.