

# **Code of Ethics and Principles of Good Practice for Supervisors of Sexual and Relationship Therapy**

## **1st June 2003**

---

### **INTRODUCTION**

The purpose of this code is to establish and maintain ethical standards and principles of good practice for supervisors of sexual and relationship therapists, who are members of BASRT (“the Association”), and to inform and protect the public, especially people who seek or use the services of BASRT members for supervision.

The Code of Ethics and Principles of Good Practice are mandatory for supervisors who have BASRT Recognition, and recommended to other members in their supervision practice. All members of the Association are required to abide by the current code appropriate to them.

Supervisors have a responsibility to maintain and enhance good practice by therapists, to protect clients from poor practice, and to acquire the attitudes, skills and knowledge required by their role.

The BASRT Code of Ethics and Principles of Good Practice for Supervisors are based on three core concepts, which apply to all members of BASRT:

1. The maintenance of professional competence and appropriate standards at all times.
2. The respect for the individual and avoidance of exploitation or abuse of the position of power held by the supervisor.
3. The avoidance of bringing the Association or the profession into disrepute.

The items set out below are specific examples of required conduct or forbidden behaviour by the supervisor and are not exhaustive.

Minor infringements of the core concepts of these codes may, after investigation, lead to a letter of admonition that will be kept on the member's file. Serious contraventions, such as clear cases of professional negligence or abuse of power, or a number of minor infringements within a set period of time, may, after formal procedures, lead to loss of membership and/or withdrawal of accreditation. The Complaints Procedure is available on request.

Members of BASRT who provide supervision of sexual and relationship therapy are encouraged to work towards BASRT Recognition of Supervisors.

## **Part One - Code of Ethics for Supervisors**

### **Terms used**

The term "supervisor" will be used to describe the member who is providing supervision.

The term "supervisee" will be used to describe the therapist who is receiving supervision.

The term "client" will be used to describe the individual, couple or group who are receiving therapy from the supervisee.

### **Sections**

1. The supervisor is responsible for maintaining appropriate professional care of the supervisee during supervision and in all interactions with the supervisee.
2. The supervisor is responsible with the supervisee, for making and maintaining appropriate boundaries to the supervisory relationship.
3. The supervisor will always seek to respect the autonomy and ultimate right to self-determination of a supervisee and of others with whom he or she may be involved.
4. The personal dignity of the supervisee is to be recognised at all times and any form of discrimination or exploitation is unacceptable.
5. The supervisor has a duty to clarify the personal, legal and practical limits of confidentiality with the supervisee.
6. Any research in which the supervisee is involved, which involves clients, should conform to the World Medical Association Declaration of Helsinki 1964, as modified by the Assembly in 1989, which provides guidelines and basic principles for combining research involving human subjects with professional care. An institutional review board or an association for evaluation of ethical propriety must have approved protocols for researching human subjects.

7. The supervisor has a responsibility to uphold the good name of the Association and not to act in any way that could bring the Association into disrepute.

## **Part Two - Principles of Good Practice for Supervisors**

The task of the supervisor is to apply his or her professional skills to assist the supervisee to advance his or her knowledge, attitudes and skills in the clinical practice of sexual and relationship therapy, within the Code of Ethics and Principles of Good Practice of BASRT. Assessment and monitoring of standards, peer consultations, and acting as mentor also fall within the remit of a supervisor.

### **A THE EXPECTATION OF PROFESSIONAL COMPETENCE**

1. The supervisor is responsible for maintaining appropriate professional care of the supervisee in all interactions during supervision.

#### **Maintaining and updating skills and knowledge, for example;**

2. Maintaining his or her professional competence based on the standards recognised by the Association, which include ensuring his or her fitness to supervise, maintaining self awareness, and being acquainted with new developments in supervision, sexual and relationship therapy, and any statutory legislation that may impact on their supervision practice.
3. Engaging in on-going professional development, especially the continuous professional development required by BASRT, and having access to support in his or her clinical work from experienced colleagues or supervisors in accordance with the BASRT Guidelines for Supervision.

#### **Preparedness to use other professionals, for example;**

4. Recognising his or her own limitations in supervision and encouraging the supervisee to seek other resources to which consultation could be made.
5. Encouraging supervisees to inform clients of the need to obtain medical or legal opinions where appropriate.
6. Being prepared to refer on if the supervision relationship becomes untenable for whatever reason.
7. Encouraging a supervisee to take account of his or her responsibility to others, as well as to the client if the client's activities are potentially detrimental or damaging to the client or others.

8. Paying due attention to all BASRT Guidelines.
9. Ensuring that insurance cover is sufficient to meet any legal claim made by a supervisee or third party, either through the supervisor's own professional insurance or public insurance where an employer provides cover.

**The Contract: Clarification of roles and setting and maintaining boundaries, for example;**

10. Before beginning any supervisory relationship it is considered vital to achieve an understanding of and agreement to the contract between supervisor and supervisee. Setting and maintaining the boundaries is the foundation of the relationship. It is crucial this is carried out properly and the supervisee must be informed of the existence of the codes under which the supervisor is working, i.e the BASRT Code of Ethics and Principles of Good Practice and the Complaints Procedure. Supervisees should be told how they may obtain these documents.
11. Ensuring that supervisees understand in advance about the supervisor's qualifications, supervision arrangements, methods of supervision, fees, reporting and responsibilities to employers or training agencies, methods of payment, details about arrangements for ending of therapy, and liabilities for cancellation of appointments under various circumstances. The financial contract must be clear and the giving of favours or substantial gifts on either side should be avoided.
12. The supervisor should ensure there is no duality of interest or confusion of roles between him or her and the supervisee. For example the supervisor should not also be the supervisee's therapist, or enter into some other relationship that might confuse the supervisory relationship.

**Confidentiality, for example;**

13. The personal, legal and practical limits of confidentiality need to be discussed and clarified with the supervisee. In making a contract the supervisee should be informed of circumstances in which there could be potential breaches of confidentiality, for example where the supervisor's contract of employment places on him or her a duty to disclose information. The obligation to maintain confidentiality continues after the supervisory relationship has ended. Contracting for confidentiality needs to cover information relating to supervisors' reports, accreditation, re-accreditation reports, and trainee supervision and assessment reports.
14. Further examples of circumstances when confidentiality may be breached include situations such as supervision and:

- a. Where there may be possible danger to self or others there are particular legal and social dimensions that the therapist must bear in mind, for example within the provision of the Children Act, 1998, and the Prevention of Terrorism Act, 1987.
  - b. When supervision of sexual and relationship therapy is offered in a group format, the supervisor must recognise the increased difficulty in maintaining confidentiality and discuss this with potential participants.
  - c. If a supervisor or supervisee is formally accused of wrongful conduct, then the possible need for the supervisor to divulge information about a client or supervisee is recognised. The breaking of confidentiality will be kept to a minimum in consultation with advisors. The supervisor will continue to have regard for the well being of the supervisee and the client.
  - d. Within the context of couple therapy, disclosure of information that one client has requested be kept confidential from his or her partner should not be made without consent of the partner who has provided the confidential information.
  - e. When only one partner of a client couple consents to the release of information, the supervisor may need to inform the supervisee that they may only release information relating to the consenting client, and they should protect the identity and the confidentiality of all information deriving from the non-consenting client.
15. The supervisor must explain and obtain written consent to any use of information from the supervision for training or research work.
  16. The supervisor must ensure that any records made in whatever form are kept secure, so that access to them can only be gained by authorised persons in the furtherance of the supervision work or the client's therapy. The supervisor is expected to comply with requests for access to case records which fall within the terms of the Access to Health Records Act 1990, the Data Protection Act 1998 and other relevant legislation.

## **B INTEGRITY AND THE AVOIDANCE OF ABUSE OR EXPLOITATION**

17. The supervisor is in a position of power in relationship to the supervisee, and this situation requires the utmost integrity in recognising and enabling the personal dignity of the supervisee at all times, and the avoidance of any kind of exploitation of the supervisee.
18. The supervisor should ensure there is no duality of interest or confusion of roles. For example the supervisor should not also be the supervisee's therapist, or enter into some other relationship that might confuse the work of supervision.

**Awareness of ones own prejudices, for example**

19. The supervisor must be aware of his or her own issues of prejudice and stereotyping, and consider ways in which these may affect the supervisory relationship.

**Avoiding discrimination and the inappropriate use of your position, for example;**

20. The supervisor must avoid discrimination, for example on grounds of religion, race, gender, age, beliefs, sexual orientation, disability. Any form of discrimination or exploitation is unacceptable. Anti-discriminatory practice should underpin all professional activities whether therapy, supervision or training.
21. The supervisor must not abuse the supervisory relationship financially, sexually, emotionally or in any other way. Attitudes, assumptions and prejudices can be identified by the language used and interventions offered. Therefore the supervisor must take care to monitor his or her use of language.
22. Supervisees should be seen in appropriate premises for supervision where privacy can be ensured.

**Appropriate handling of sexually explicit material or physical contact, for example;**

23. Where the use of sexually explicit material is considered to be appropriate within the overall context of therapy, then the supervisor should ensure that the matter would be discussed with the client and the nature of the material and the reasons for its use explained so that the client can give informed consent to its use.
24. Where physical contact is necessary in the course of therapy, the supervisor must seek to ensure that the supervisee clarifies with the client the purposes and nature of such contact so that the client can give informed consent before such assessment or treatment begins.
25. The supervisor should ensure that the supervisee is aware that:
  - a. therapeutic procedures involving physical contact must only be performed by someone specifically trained for such procedures
  - b. physical examination to exclude organic disease must only be performed by a medical practitioner currently registered by the General Medical Council, unless the examination involves the pelvic region only and is carried out by someone specifically trained and qualified for this procedure, working under medical supervision.
  - c. consideration should be given to adequate chaperone cover when procedures involving physical contact are to be embarked upon.
26. It is not acceptable for a supervisor to have a sexual relationship with anyone who is his or her own supervisee.

## **C AVOIDANCE OF BRINGING THE ASSOCIATION OR THE PROFESSION INTO DISREPUTE**

27. The requirement for responsible professional conduct on behalf the supervisor extends not only to supervisees, but to BASRT and the profession as a whole.
28. Supervisors may advertise so long as statements are descriptive and not evaluative. The information should be limited to name, relevant qualifications and registration, address and telephone number, times of availability and listing of services and conditions of referral. Only members whose Supervisor Recognition has been ratified by the Executive may identify themselves as recognised supervisors. Similarly, only members who have had their Accreditation ratified by the Executive may use BASRT Accredited Psychosexual Therapist or BASRT Accredited Sexual and Relationship Psychotherapist (BASRT AccPST, BASRT AccPsyT, BASRT AccSRPsyT). **General membership does NOT constitute a professional qualification and it should not be represented as such.**
29. The Association must be informed by the member concerned if he or she is convicted of a criminal offence in a Court of Law, or has a civil judgement entered against him or her relating to his or her professional work, or has a complaint upheld against him or her in another organisation.
30. After due process in accordance with the Governing Documents, the Executive may withhold or withdraw Supervisor Recognition, Accreditation or Membership of the Association from an individual who behaves in a manner deemed not to be in accordance with the Code of Ethics and Principles of Good Practice of the Association.
31. BASRT is a member of UKCP and has a duty to inform UKCP of any allegations or proven infringements of the Code of Ethics and Principles of Good Practice and sanctions imposed. Names are only supplied when complaints are upheld and sanctions imposed.
32. Members of the Association have a responsibility to uphold the good name of the Association and not to act in any way that could bring the Association into disrepute. Membership of the Association will be deemed to indicate agreement to adhere to the Code of Ethics and Principles of Good Practice.

**These codes are effective from 1st June 2003.** Any queries should be made to the Chief Executive of BASRT who will forward them to the Professional Standards Board.