Preamble

Mental health counselors believe in the dignity and worth of the individual. They are committed to increasing knowledge of human behavior and understanding of themselves and others. While pursuing these endeavors, they make every reasonable effort to protect the welfare of those who seek their services, or of any subject that may be the object of study. They use their skills only for purposes consistent with these values and do not knowingly permit their misuse by others. While demanding for themselves freedom of inquiry and community, mental health counselors accept the responsibility this freedom confers: competence, objectivity in the application of skills, and concern for the best interest of clients, colleagues, and society in general. In the pursuit of these ideals, mental health counselors subscribe to the following principles:

Clinical Issues

Principle 1    Welfare of the Consumer

A) Primary Responsibility

1) The primary responsibility of the mental health counselor is to respect the dignity and integrity of the client. Client growth and development are encouraged in ways that foster the client's interest and promote welfare.

2) Mental health counselors are aware of their influential position with respect to their clients, and avoid exploiting the trust and fostering dependency of their clients.

3) Mental health counselors fully inform consumers as to the purpose and nature of any evaluation, treatment, education or training procedure and they fully acknowledge that the consumer has the freedom of choice with regard to participation.
B) Counseling Plans
Mental health counselors and their clients work jointly in devising integrated, individual counseling plans that offer reasonable promise of success and are consistent with the abilities and circumstances of the client. Counselors and clients regularly review counseling plans to ensure their continued viability and effectiveness, respecting the client’s freedom of choice.

C) Freedom of Choice
Mental health counselors offer clients the freedom to choose whether to enter into a counseling relationship and determine which professionals will provide the counseling. Restrictions that limit clients' choices are fully explained.

D) Clients Served by Others
1) If a client is receiving services from another mental health professional or counselor, the mental health counselor secures consent from the client, informs that professional of the arrangement, and develops a clear agreement to avoid confusion and conflicts for the client.

2) Mental health counselors are aware of the intimacy and responsibilities inherent in the counseling relationship. They maintain respect for the client and avoid actions that seek to meet their personal needs at the expense of the client. Mental health counselors are aware of their own values, attitudes, beliefs and behaviors, and how these apply in a diverse society. They avoid imposing their values on the consumer.

E) Diversity
1) Mental health counselors do not condone or engage in any discrimination based on age, color, culture, disability, ethnic group, gender, race, religion, sexual orientation, marital status or socioeconomic status.

2) Mental health counselors will actively attempt to understand the diverse cultural backgrounds of the clients with whom they work. This includes learning how the counselor's own cultural/ethical/racial/religious identity impacts his or her own values and beliefs about the counseling process. When there is a conflict between the client's goals, identity and/or values and those of the mental health counselor, a referral to an appropriate colleague must be arranged.

F) Dual Relationships
Mental health counselors are aware of their influential position with respect to their clients and avoid exploiting the trust and fostering dependency of the client.

1) Mental health counselors make every effort to avoid dual relationships with clients that could impair professional judgement or increase the risk of harm. Examples of such relationships may include, but are not limited to: familial, social, financial, business, or close personal relationships with the clients.
2) Mental health counselors do not accept as clients individuals with whom they are involved in an administrative, supervisory, and evaluative nature. When acting as supervisors, trainers, or employers, mental health counselors accord recipients informed choice, confidentiality and protection from physical and mental harm.

3) When a dual relationship cannot be avoided, counselors take appropriate professional precautions such as informed consent, consultation, supervision and documentation to ensure that judgement is not impaired and no exploitation has occurred.

G) Sexual Relationships
Sexual relationships with clients are strictly prohibited. Mental health counselors do not counsel persons with whom they have had a previous sexual relationship.

H) Former Clients
Counselors do not engage in sexual intimacies with former clients within a minimum of two years after terminating the counseling relationship. The mental health counselor has the responsibility to examine and document thoroughly that such relations did not have an exploitative nature based on factors such as duration of counseling, amount of time since counseling, termination circumstances, the client's personal history and mental status, adverse impact on the client, and actions by the counselor suggesting a plan to initiate a sexual relationship with the client after termination.

I) Multiple Clients
When mental health counselors agree to provide counseling services to two or more persons who have a relationship (such as husband and wife, or parents and children), counselors clarify at the outset which person or persons are clients, and the nature of the relationship they will have with each involved person. If it becomes apparent that counselors may be called upon to perform potentially conflicting roles, they clarify, adjust, or withdraw from roles appropriately.

J) Informed Consent
Mental health counselors are responsible for making their services readily accessible to clients in a manner that facilitates the clients' abilities to make an informed choice when selecting a provider. This responsibility includes a clear description of what the client can expect in the way of tests, reports, billing, therapeutic regime and schedules, and the use of the mental health counselor's statement of professional disclosure. In the event that a client is a minor or possesses disabilities that would prohibit informed consent, the mental health counselor acts in the client's best interest.
K) Conflict of Interest
Mental health counselors are aware of possible conflicts of interests that may involve the organization in which they are employed and their client. When conflicts occur, mental health counselors clarify the nature of the conflict and inform all parties of the nature and direction of their loyalties and responsibilities, and keep all parties informed of their commitments.

L) Fees and Bartering
1) Mental health counselors clearly explain to clients, prior to entering the counseling relationship, all financial arrangements related to professional services, including the use of collection agencies or legal measures for nonpayment.

2) In establishing fees for professional counseling services, mental health counselors consider the financial status of their clients and locality. In the event that the payment of the mental health counselor's usual fees would create undue hardship for the client, assistance is provided in attempting to find comparable services at an acceptable cost.

3) Mental health counselors ordinarily refrain from accepting goods or services from clients in return for counseling service because such arrangements create inherent potential for conflicts, exploitation and distortion of the professional relationship. Participation in bartering is only used when there is no exploitation, if the client requests it, if a clear written contract is established, and if such an arrangement is an accepted practice among professionals in the community.

M) Pro Bono Service
Mental health counselors contribute to society by devoting a portion of their professional activity to services for which there is little or no financial return.

N) Consulting
Mental health counselors may choose to consult with any other professionally competent person about a client. In choosing a consultant, the mental health counselor should avoid placing the consultant in a conflict of interest situation that would preclude the consultant from being a proper party to the mental health counselor's effort to help the client.

O) Group Work
1) Mental health counselors screen prospective group counseling/therapy participants. Every effort is made to select members whose needs and goals are compatible with goals of the group, who will not impede the group process, and whose well being will not be jeopardized by the group experience.

2) In the group setting, mental health counselors take reasonable precautions to protect clients from physical and psychological harm or trauma.
3) When the client is engaged in short term group treatment/training programs, i.e. marathons and other encounter type or growth groups, the members ensure that there is professional assistance available during and following the group experience.

P) Termination and Referral
Mental health counselors do not abandon or neglect their clients in counseling. Assistance is given in making appropriate arrangements for the continuation of treatment, when necessary, during interruptions such as vacation and following termination.

Q) Inability to assist clients
If the mental health counselor determines that their services are not beneficial to the client, they avoid entering or terminate immediately a counseling relationship. Mental health counselors are knowledgeable about referral sources and appropriate referrals are made. If clients decline the suggested referral, mental health counselors discontinue the relationship.

R) Appropriate Termination
Mental health counselors terminate a counseling relationship, securing a client's agreement when possible, when it is reasonably clear that the client is no longer benefiting, when services are no longer required, when counseling no longer serves the needs and interests of the client, when clients do not pay fees charged, or when agency or institution limits do not allow provision of further counseling services.

Principle 2    Clients' Rights

The following apply to all consumers of mental health services, including both in- and out-patients and all state, county, local, and private care mental health facilities, as well as clients of mental health practitioners in private practice.

The client has the right:

A) To be treated with dignity, consideration and respect at all times,

B) To expect quality service provided by concerned, trained, professional and competent staff,

C) To expect complete confidentiality within the limits of the law, and to be informed about the legal exceptions to confidentiality; and to expect that no information will be released without the client's knowledge and written consent;
D) To a clear working contract in which business items, such as time of sessions, payment plans/fees, absences, access, emergency procedures, and third-party reimbursement procedures are discussed,

E) To a clear statement of the purposes, goals, techniques, rules of procedure and limitations, as well as the potential dangers of the services to be performed, and all other information related to or likely to affect the ongoing mental health counseling relationship,

F) To appropriate information regarding the mental health counselor's education, training, skills, license and practice limitations and to request and receive referrals to other clinicians when appropriate,

G) To full, knowledgeable, and responsible participation in the ongoing treatment plan to the maximum extent feasible,

H) To obtain information about their case record and to have this information explained clearly and directly,

I) To request information and/or consultation regarding the conduct and progress of their therapy,

J) To refuse any recommended services and to be advised of the consequences of this action,

K) To a safe environment free of emotional, physical and sexual abuse,

L) To a client grievance procedure, including requests for consultation and/or mediation; and to file a complaint with the mental health counselor's supervisor, and/or the appropriate credentialing body; and

M) To a clearly defined ending process, and to discontinue therapy at any time.

**Principle 3  Confidentiality**

Mental health counselors have a primary obligation to safeguard information about individuals obtained in the course of practice, teaching, or research. Personal information is communicated to others only with the person's written consent or in those circumstances where there is clear and imminent danger to the client, to others or to society. Disclosure of counseling information is restricted to what is necessary, relevant and verifiable.

A) At the outset of any counseling relationship, mental health counselors make their clients aware of their rights in regard to the confidential nature of the counseling relationship. They fully disclose the limits of, or exceptions to, confidentiality, and/or the existence of privileged communication, if any.
B) All materials in the official record shall be shared with the client, who shall have the right to decide what information may be shared with anyone beyond the immediate provider of service and be informed of the implications of the materials to be shared.

C) Confidentiality belongs to the clients. They may direct the mental health counselor, in writing, to release information to others. The release of information without the consent of the client may only take place under the most extreme circumstances. The protection of life, as in the case of suicidal or homicidal clients, exceeds the requirements of confidentiality. The protection of a child, an elderly person, or a person not competent to care for themselves from physical or sexual abuse or neglect requires that a report be made to a legally constituted authority. The mental health counselor complies with all state and federal statutes concerning mandated reporting of suicidality, homicidality, child abuse, incompetent person abuse and elder abuse. The protection of the public or another individual from a contagious condition known to be fatal also requires action that may include reporting the willful infection of another with the condition.

The mental health counselor (or staff member) does not release information by request unless accompanied by a specific release of information or a valid court order. Mental health counselors will comply with the order of a court to release information but they will inform the client of the receipt of such an order. A subpoena is insufficient to release information. In such a case, the counselor must inform his client of the situation and, if the client refuses release, coordinate between the client's attorney and the requesting attorney so as to protect client confidentiality and one's own legal welfare.

In the case of all of the above exceptions to confidentiality, the mental health counselor will release only such information as is necessary to accomplish the action required by the exception.

D) The anonymity of clients served in public and other agencies is preserved, if at all possible, by withholding names and personal identifying data. If external conditions require reporting such information, the client shall be so informed.

E) Information received in confidence by one agency or person shall not be forwarded to another person or agency without the client's written permission.

F) Service providers have the responsibility to ensure the accuracy and to indicate the validity of data shared with their parties.
G) Case reports presented in classes, professional meetings, or publications shall be so disguised that no identification is possible unless the client or responsible authority has read the report and agreed in writing to its presentation or publication.

H) Counseling reports and records are maintained under conditions of security, and provisions are made for their destruction when they have outlived their usefulness. Mental health counselors ensure that all persons in his or her employ, volunteers, and community aides maintain privacy and confidentiality.

I) Mental health counselors who ask that an individual reveal personal information in the course of interviewing, testing or evaluation, or who allow such information to be divulged, do so only after making certain that the person or authorized representative is fully aware of the purposes of the interview, testing or evaluation, and of the ways in which the information will be used.

J) Sessions with clients may be taped or otherwise recorded only with their written permission or the written permission of a responsible guardian. Even with a guardian's written consent, one should not record a session against the expressed wishes of a client. Such tapes shall be destroyed when they have outlived their usefulness.

K) Where a child or adolescent is the primary client, or the client is not competent to give consent, the interests of the minor or the incompetent client shall be paramount. Where appropriate, a parent(s) or guardian(s) may be included in the counseling process. The mental health counselor must still take measures to safeguard the client's confidentiality.

L) In work with families, the rights of each family member should be safeguarded. The provider of service also has the responsibility to discuss the contents of the record with the parent and/or child, as appropriate, and to keep separate those parts, which should remain the property of each family member.

M) In work with groups, the rights of each group member should be safeguarded. The provider of service also has the responsibility to discuss the need for each member to respect the confidentiality of each other member of the group. He must also remind the group of the limits on and risk to confidentiality inherent in the group process.

N) When using a computer to store confidential information, mental health counselors take measures to control access to such information. When such information has outlived its usefulness, it should be deleted from the system.