



Code of Conduct

Preamble

The purpose of this code is to establish minimum standards of ethical practice for Mental Health Social Workers, for the information and protection of those using their services. It is expected that professional associations to which these practitioners belong will establish their own codes which should cover the standards below. Regardless of the wide range of approaches preferred by individual Practitioners across disciplines, there are common ethical issues. For Mental Health Social Workers in particular -

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing. AASW.

These ethical guidelines are adapted from AASW and PACFA guidelines

For the purpose of this statement, the term Clinician is used to include Mental Health Social Workers. The term supervisor refers to professional counselling supervision, rather than line management. The term client refers to individuals, couples, families, children, young people, groups, communities or supervisees, as applicable.

Ethical Principles

1. Clinicians respect the essential humanity, worth and dignity of all people and promote this value in their work.
2. Clinicians recognise and respect diversity among people and oppose discrimination and oppressive behaviour. Clinicians acknowledge the learnings, strengths, capacities, abilities and contributions that Aboriginal and Torres Strait Islander peoples make to wider society as an integral part of social work knowledge and practice. We commit to working alongside First Nations Peoples recognising and supporting their rights and aspirations for self-determination. This commitment includes valuing the knowledge and lived experiences of Aboriginal and Torres Strait Islander social workers as they



share and strengthen their practice and to be guided by them. In particular we acknowledge and understand the impact of colonisation and the ongoing oppression and intergenerational trauma suffered by First Nations people. We commit to acting in partnership as agents of change and healing with education and training to develop appropriate skills and understandings. We acknowledge the diversity of experience of Aboriginal and Torres Strait Islander cultures throughout Australia and value local knowledge of Indigenous nations. We emphasise that all parts of the AASW *Code of Ethics* are relevant to working with Aboriginal and Torres Strait Islander peoples.

3. Clinicians recognise that children and young people are particularly vulnerable client groups and take extra care and precautions to ensure their safety, wellbeing and that they have a voice in any therapeutic intervention and engagement with this service.
4. Clinicians respect the privacy of their clients and preserve the confidentiality of information acquired in the course of their work.
5. Clinicians protect the rights of their clients including the right to informed consent.
6. Clinicians take steps to maintain and develop their competence throughout their professional lives.
7. Counsellors abide by the laws of the society in which they practice.

Ethical Responsibilities

1. Responsibilities to the client

- Clinicians take all reasonable steps to avoid harm to their clients as a result of the counselling process.
- Clinicians faced with situations which extend the boundary of their competence seek supervision and consider referral to other professionals.
- In the event of harm resulting from Counselling, Clinicians take responsibility for restitution. Professional indemnity should be considered in this context.
- Clinicians promote client autonomy and encourage clients to make responsible decisions on their own behalf.
- Clinicians consider the social context of their clients and their connections to others.



- Clinicians are responsible for setting and maintaining professional boundaries within the Counselling relationship.

2. Ethical Responsibilities specific to Children and Young People

- Caring for children and young people brings additional responsibilities for Clinicians of our organisation. All clinicians are responsible for promoting and protecting the safety and wellbeing of children and young people by:
- Sticking to the organisation's child safe policy at all times and taking all reasonable steps to ensure the safety and protection of children and young people
- Treating everyone (this includes staff, volunteers, students, children, young people and parents) including those of different race, ethnicity, gender, gender identity, sexual orientation, age, social class, ability or attributes and religious beliefs with respect and honesty and ensure equity is upheld
- Being a positive role model to children and young people in all your conduct with them
- Setting clear boundaries about appropriate behaviour between yourself and the children and young people in your organisation – boundaries help everyone to understand their roles
- Listening and responding appropriately to the views and concerns of children and young people
- Being alert to children and young people who are, or may be at risk of harm, and reporting this quickly to the Child Abuse Report Line (13 14 78)
- Responding quickly, fairly and transparently to any serious complaints made by a child, young person or their parent/guardian
- Encouraging children and young people to 'have a say' on issues that are important to them.

Clinicians must not:

- engage in rough physical games
- develop any 'special' relationships with children and young people that could be seen as favouritism such as the offering of gifts or special treatment
- do things of a personal nature that a child or young person can do for themselves, such as toileting or changing clothes
- discriminate against any child or young person because of age, gender, cultural background, religion, vulnerability or sexuality.



Exploitation

- Clinicians must not exploit clients, past or present, in financial, sexual, emotional or any other way.
- Clinicians will not accept or offer payments for referrals, or engage in any financial transactions, apart from negotiating the ordinary fee charged for Counselling.
- Sexual relations between the client and the Clinicians can never be acceptable and constitute unethical behaviour. This is not restricted to sexual intercourse and includes any form of physical contact, whether initiated by the client or the Clinicians, which has as its purpose some form of sexual gratification, or which may be reasonably construed as having that purpose.
- Clinicians should consider that the deeper the involvement with the client's emotional life during Counselling, the less likely is the possibility of a subsequent equal relationship following termination of therapy. Clinicians must seek professional supervision should any attempt to build a relationship with a former client be considered.

3. Confidentiality

- Clinicians treat with confidence any personal information about clients, whether obtained directly or by inference. This applies to all verbal, written, recorded or computer stored material pertaining to the therapeutic context. All records, whether in written or any other form, need to be protected with the strictest of confidence.
- Clients must not be observed by anyone other than their Clinicians without having given informed consent. This applies both to direct observation and to any form of audio or visual transmission or recording.
- Clinicians and Supervisors are responsible for protecting the client's rights of confidentiality in the supervisory context by ensuring that shared information is disguised appropriately.



- Exceptional circumstances may arise which give the Clinician good grounds for believing that the client will cause serious physical harm to others or themselves. In such circumstances, the breaking of confidentiality may be required, preferably with the client's permission, or after consultation with a Counselling Supervisor.
- Any breaking of confidentiality should be minimized both by restricting the information conveyed to that which is pertinent to the immediate situation and by limiting it to those persons who can provide the help required by the client.
- Agreements about confidentiality continue after the client's death unless there are overriding legal considerations.
- Special care is required when using specific Counselling situations for reports and publication. The author must have the client's informed consent should there be any possibility of identification of the client.

4. Contracts

- Counselling activities are to be undertaken only with professional intent and not casually and/or in extra professional relationships.
- Contracts involving the client should be realistic and clear.
- When a client is incapable of giving informed consent, Clinicians obtain consent from a legally authorised person.
- Clinicians who are providing services to children or young people will abide by any relevant legislative requirements in relation to informed consent.
- Clinicians who are providing services to children or young people will assess their ability to give informed consent to enter into a therapeutic relationship. In order for a child or young person to give informed consent they will demonstrate their understanding of the risks, benefits and alternatives to clinical services.
- Clinicians will obtain lawful consent from the child or young person's parent or guardian if they are deemed unable to give informed consent. A child or young person who is able to give informed consent will be considered entitled to



access social work services without informing their parents or guardians. However, where appropriate, the issue of the child or young person informing their parent or guardian will be discussed.

- Clinicians will provide children or young people who are able to give informed consent with the same rights of confidentiality as adult service users, in compliance with the law, including the right to refuse social work services.
- Any publicity material and all written and oral information should reflect accurately the nature of the service offered and the training, qualifications and relevant experience of the Clinician.
- Clinicians are responsible for communicating the terms on which Counselling is being offered.
- Clinicians will disclose any conflict of interest which may arise in relation to a client and will seek supervision to resolve appropriate action which may include referral.

5. Responsibilities to Self as Clinician

- Clinicians have a responsibility to themselves to maintain their own effectiveness, resilience and ability to help clients. They monitor their own personal functioning and seek help or refrain from Counselling when their personal resources are sufficiently depleted to require this.
- Clinicians do not counsel when their functioning is significantly impaired by personal or emotional difficulties, illness, alcohol, drugs or any other cause.
- Clinicians have regular suitable supervision and use such supervision to develop counselling skills, monitor performance and provide accountability for practice.

6. Responsibilities to other Clinicians

- Clinicians do not conduct themselves in their Counselling-related activities in ways which undermine public confidence in either their role as Clinicians or in the work of other Clinicians.



-
- Clinicians are committed to the ethical code of their Professional Association which will include procedures to withdraw membership for unethical practice.
 - Clinicians will address suspected or confirmed professional misconduct, incompetence, unethical behaviour or negligence by a colleague through the appropriate organisational, professional or legal channels.
 - Clinicians do not solicit the clients of other Clinicians. They have an obligation not to impair the work of their colleagues. Nevertheless, Counsellors need to be aware of the client's right to seek a second opinion.

7. Responsibilities to the Wider Community

- Clinicians work within the law.
- Clinicians take all reasonable steps to be aware of current legislation affecting their work.
- Clinicians are committed to protect the public against incompetent and dishonourable practices and are prepared to challenge these practices.

8. Complaint Procedure

- Each member association must have a procedure to be followed in the event of a complaint of unethical conduct against a member.
- Disciplinary procedures must include the possibility that a Clinician can be debarred from membership. This would automatically lead to removal from any Counselling register for which approved organisational membership is a requirement.
- Each member association must have an appeal mechanism including the involvement of a person outside the Counselling profession.
- Notification of the withdrawal of a member from an association following complaint must be given to all associations on whose register the person is listed.



Management and supervision roles

In addition to the general provisions of the *Code*, and within the Fair Work Act and other relevant legislation, Clinicians in management or supervisory positions, whatever the title, are expected to meet standards of ethical conduct specific to their roles that reflect the three core principles of the profession.

- Clinicians will encourage employers to implement policies and procedures that enable and support social workers to practise ethically, as defined by this *Code*, and to not put at risk their ability to uphold such ethical standards.
- Clinicians will encourage non-discriminatory policies and practices and advocate for resources to meet service users' needs.
- Clinicians will not engage in, nor accept other staff engaging in, any form of discrimination, abuse, bullying or harassment.
- Clinicians will promote respectful teamwork and communication and an efficient and accountable social work service.
- Clinicians will ensure culturally safe and sensitive workplace practices.
- Clinicians will seek to have adequate staff levels and acceptable working conditions for staff.
- Clinicians will arrange professional supervision for social work staff, including culturally safe supervision, where appropriate.
- Clinicians will provide or advocate for staff to have a physical working environment that supports effective practice, including appropriate arrangements for confidential interviewing and storage of confidential records.
- Clinicians will ensure that staff under their direction receive ongoing training and professional education and advocate for adequate resources to meet staff development needs.
- Clinicians will ensure that staff are fit to practise, hold appropriate qualifications, provide references (including evidence that they are not a risk to service users) and that they understand their roles and responsibilities, including their ethical duties.
- Clinicians will provide or arrange appropriate crisis management, including debriefing, and appropriate ongoing support for staff, especially when they experience difficult or traumatic circumstances.
- Clinicians will evaluate the performance of staff and supervisees fairly and responsibly, ensuring that timely feedback is provided and that those evaluated are included in the process.

I, Mandy Flint – Mental Health Social Worker, agree to abide by this code of conduct:

Signed:

Date: 4th January 2022

Review due: 4th January 2024