

## Addiction Counsellors of Ireland Code of Ethics and Practice for Counsellors

### 1. INTRODUCTION

- 1.1 Counselling is a non-exploitative activity and, as such, is underpinned by integrity, impartiality and respect. Counsellors are obliged to work ethically whether the counselling is paid for by the client or offered free by an Organisation or the Counsellor.
- 1.2 Counsellors shall have regard for the client's beliefs and values. The service offered shall not be minimised or diminished by any bias regarding gender, sexual orientation, disability, race, religion or politics, ethnicity, social standing or class.
- 1.3 The Counsellor shall take all reasonable steps to ensure the client's safety during counselling.
- 1.4 Counsellors must not abuse their client's trust in order to gain sexual, emotional, financial or any other kind of personal advantage.
- 1.5 The terms on which counselling is being offered must be made clear to clients before counselling begins. Regular reviews must be agreed at this stage.
- 1.6 The counsellor-client relationship is the foremost ethical concern. This relationship also reflects upon colleagues, other Associations and members of the wider community. These will be considered in this Code under different headings.
- 1.7 The practice of counselling depends on gaining and honouring the trust of clients. Keeping trust requires:
  - (i) Attentiveness to the quality of listening and respect offered to clients
  - (ii) Culturally appropriate ways of communicating that are courteous and clear
  - (iii) Respect for privacy and dignity
  - (iv) Careful attention to client consent and confidentiality.

### 2. CONFIDENTIALITY

- 2.1 Confidentiality is a means of providing the client with safety and privacy.
- 2.2 As a general principle Counsellors must not reveal confidential material concerning clients. Confidentiality can only be broken where required by law, or if the Counsellor has reason to believe the client(s) will cause physical harm to themselves or others or be themselves in danger of such harm. Before such disclosure is made, every effort shall be

made to get the client's consent, and the Counsellor should consult their supervisor or experienced colleague. Minimise any breach of confidentiality by conveying only the information that is relevant and necessary. However, in emergencies, Counsellors shall make their own judgement as to what action is best.

- 2.3 Communications made on the basis of client consent do not constitute a breach of confidentiality. Client consent is the preferred way of resolving any dilemmas over confidentiality.
- 2.4 Confidential information about clients may be shared within teams where the client has consented or knowingly accepted a service on this basis. The disclosure enhances the quality of service available to clients or improves service quality.
- 2.5 Care must be taken to ensure that personally identifiable information is not transmitted through overlapping networks of confidential relationships.
- 2.6 Any agreement between the Counsellor and client may be reviewed and changed by joint negotiations.
- 2.7 Agreements between Counsellor and client about confidentiality continue after the client's death unless there are overriding legal or ethical considerations.
- 2.8 Special care is required when writing about specific counselling situations for case studies or publication.
- 2.9 When a report is requested by a doctor, probation officers, courts etc., a mutual agreement is negotiated with the client and a signed consent is obtained.
- 2.10 Every possible care must be taken to protect the rights of children where a counsellor has knowledge or suspicion that a child is being abused or is at risk at home. Where a client reports sexual abuse as presently occurring, then the safety of the child must take priority and steps outlined in the current Children First (2011) guidelines issued by the Department of Health & Children, must be followed. ([See link to Children First Guidelines/Legislation](#)).
- 2.11 When working with minors, Counsellors are legally obliged to have Garda clearance and operate fully and consistently within the terms of the current Children First (2011) guidelines issued by the Department of Health & Children. ([See link to Children First Guidelines/Legislation](#)).
- 2.12 Counsellors have a responsibility to inform themselves of the current statutory obligations (and any changes therein) in Child Protection legislation.
- 2.13 Discuss the limits of confidentiality with the client, including the implications for confidentiality of the supervisory relationship, at the time of initial contracting.
- 2.14 In a situation where a Counsellor is in any doubt about their legal rights/obligations, or where a current crime is disclosed, the Counsellor should seek legal advice and/or contact their supervisor and/or their Association for guidance.

### 3. COMPETENCE

- 3.1 Counsellors should have received adequate training before commencing counselling and should maintain on-going professional development (See link to CPD training).
- 3.2 It is an indication of the competence of counsellors that, where applicable, they recognise their lack of training or expertise to work with a client and make an appropriate referral.
- 3.3 Counsellors shall take all reasonable steps to monitor and develop their own competence and ensure they work within the level of that competency. This includes having on-going supervision from a supervisor who is appropriately trained and experienced.
- 3.4 Counsellors must cease work when their functioning is impaired due to illness, alcohol, drugs, gambling or any other process or behavioural addictions. Where personal problems or emotional difficulties impinge on their ability to function, they should seek advice from appropriate professionals to help them decide if they should limit, suspend or terminate their counselling activity. In some circumstances, the decision to limit or suspend practice may lie with the Counsellor's Clinical Supervisor or the employing organisation.
- 3.5 Commitment to good practice requires Counsellors to keep up-to-date with latest knowledge and respond to changing circumstances. They are expected to monitor their own need for continuing professional development and engage in appropriate educational practices.

#### **4. RESPONSIBILITIES**

- 4.1 To review and evaluate the effectiveness of their professional activities.
- 4.2 Behave in professional activities in such a manner as not to undermine public confidence in the profession.
- 4.3 Counsellors are expected to take all reasonable steps to ensure that the client suffers neither physical nor psychological harm during counselling.
- 4.4 Counsellors are responsible for setting and monitoring boundaries in the counselling relationship and making these explicit to the client.
- 4.5 Clients should be offered privacy for counselling sessions and should not be observed by anyone other than the Counsellor without the client having given informed consent.
- 4.6 Counselling occurs in an environment that is supportive, so attention must be paid to physical space.
- 4.7 It is a condition of Accreditation by the Addiction Counsellors of Ireland that the applicant is covered by Professional Indemnity Insurance as well as Public Liability Insurance.
- 4.8 If a Counsellor suspects misconduct by another Counsellor which cannot be resolved or remedied after discussion with the Counsellor concerned, there is a responsibility to ensure that necessary steps are taken to resolve the matter. This may involve implementing the Complaints Procedure without breaches of confidentiality other than those necessary to resolve the complaint.

- 4.9 Counsellors are responsible for communicating the terms on which counselling is being offered, including availability, the degree of confidentiality offered, and their expectation of clients regarding fees and cancelled appointments. The communication of terms and negotiation over these should be agreed by the client and Counsellor before the client incurs any financial liability. An assessment fee may be charged.
- 4.10 Counsellors are obliged to be aware of and understand any legal requirements concerning their work; consider these consciously and be legally and professionally accountable for their practice.
- 4.11 Records of counselling sessions are kept filed and subject to the statutory regulations under the Data Protection Act, Freedom of Information Act and General Data Protection Regulations (GDPR), and clients should be made aware of this. At the client's request, information should be given about access to these records, their availability to other people, and the degree of security with which they are kept.

## 5 CLIENT AUTONOMY

This principle respects the client's right to be self-governing. It emphasises the importance of the client's commitment to participating in counselling, usually on a voluntary basis.

- 5.1 Counsellors are responsible for working in ways which promote the client's control over his/her own life; respects the client's ability to make decisions and change in the light of his/her own beliefs and values and to make decision and/or changes which promote the client's desire to enter/maintain recovery.
- 5.2 It is the client's choice whether or not to participate in counselling. Reasonable steps should be taken in the course of the counselling relationship to ensure that the Counsellor and client are given the opportunity to mutually review the terms on which counselling is being offered.
- 5.3 Any publicity material and all written and oral information must accurately reflect the nature of the service on offer, as well as the training, qualifications and relevant experience of the Counsellor. Only Accredited Counsellors may claim membership of the Association of Addiction Counsellors of Ireland relationship.
- 5.4 Counsellor will not be involved with the client in friendship, formal business relationship, sexual relationship or training relationship while the counselling is current.
- 5.5 Counsellors must avoid unnecessary conflicts of interest and are expected to make explicit to the client any such conflicts.
- 5.6 If the client is currently engaged in any other therapeutic or similar relationship, the Counsellor must obtain the client's permission before conferring with them.

- 5.7 Counsellors remain accountable for relationships with former clients and must exercise caution over entering into friendships, formal business relationships or sexual relationships. The Counsellor is expected to wait at least two years before entering into a friendship, formal business relationship or sexual relationship.

## **6. Counselling Supervision/Consultative Support**

- 6.1 It is a breach of the requirements of the Addiction Counsellors of Ireland for Counsellors to practice without regular Counselling Supervision.
- 6.2 Counselling Supervision refers to a formal arrangement which enables Counsellors/Therapists to discuss their counselling on a regular basis with one or more people who have an understanding of Counselling Supervision. Its purpose is to ensure the efficacy of the counsellor-client relationship. The relationship carries an appropriate confidentiality.
- 6.3) Counsellors who also have workplace managerial and/or head of department relationships, owe them appropriate managerial accountability for their work. The clinical supervisory role should be independent of all managerial roles. However, where the clinical/counselling supervisor is also a manager and/or department head in an organisation, the Counsellor should also have access to independent consultative support/external supervision.
- 6.4) The discussion of cases within supervision/consultative support should take place without revealing the personal identity of the client.

## **Advertising/public Statements**

- 7.1) When announcing counselling services, counsellors should limit the information to name, relevant qualifications, address, contact details, hours available, and a brief listing of the services offered and theoretical orientation. All such information should be accurate in every detail.
- 7.2) Counsellors should not display an affiliation with this Association in a manner which falsely implies the endorsement or verification of this Association.