

Hong Kong Professional Counseling Association Code of Ethics (2011 Revision)

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General Principles

The general principles intend to guide and inspire counselors toward the high ethical ideals of the profession. General principles do not represent obligations or form the basis for imposing sanctions.

Principle 1: Beneficence

Counselors seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. Counselors strive to benefit those with whom they work and take care to do no harm. Counselors are alert to guard against personal, financial, social, organizational or political factors that might lead to misuse of their influence. They also strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

Principle 2: Responsibility

Counselors are aware of their professional and scientific responsibilities to society and to the specific communities in which they work, as they establish relationships of trust with those they work. Counselors uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. They should consult with, refer to, or cooperate with other professionals and institutions to serve the best interests of those they work with.

Principle 3: Integrity

Counselors promote accuracy, honesty, and truthfulness in the science, teaching and practice of counseling. They do not steal, cheat or engage in fraud, subterfuge, or intentional misrepresentation of fact in these activities. They strive to maximize benefits and minimize harm in situations in which deception may be ethically justifiable.

Principle 4: Justice

Counselors recognize that all persons are entitled to fairness and justice when benefiting from the contributions of counseling. Counselors exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of

their competence, and the limitations of their expertise do not lead to or condone unjust practices. Justice should also be maintained in the counseling processes, procedures and services being conducted by counselors.

Principle 5: Respect

Dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination are respected by counselors. Special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making. Cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status are to be respected when counselors are working with members of such groups.

1. Counseling Relationship

1.1 Welfare of Clients

Counselors encourage client growth and development in ways that foster the interest and welfare of clients and promote formation of healthy relationships. The primary responsibility of counselors is to respect the dignity and to promote the welfare of clients.

1.2 Records

Counselors maintain records necessary for rendering professional services to their clients and as required by laws, regulations, or agency or institution procedures. Counselors include sufficient and timely documentation in their client records to facilitate the delivery and continuity of needed services. Counselors take reasonable steps to ensure that documentation in records accurately reflects client progress and services provided. If errors are made in client records, counselors take steps to properly note the correction of such errors according to agency or institutional policies.

1.3 Counseling Plans

Counselors and their clients work jointly in devising integrated counseling plans that offer reasonable promise of success and are consistent with abilities and circumstances of clients. Counselors and clients regularly review counseling plans to assess their continued viability and effectiveness, respecting the freedom of choice of

clients.

1.4 Support Network

Counselors recognize that support networks hold various meanings in the lives of clients and consider enlisting the support, understanding, and involvement of others (e.g., family members, friends) as positive resources, when appropriate and with client consent.

1.5 Informed Consent

Clients have the freedom to choose whether to enter into or remain in a counseling relationship, and need adequate information about the counseling process and the counselor. Counselors have an obligation to review, in writing and verbally with clients, the rights and responsibilities of both the counselor and the client. Informed consent is an ongoing part of the counseling process, and counselors appropriately document discussions of informed consent throughout the counseling relationship. When counseling minors or persons unable to give voluntary consent, counselors seek the assent of clients to receive services, and include them in decision making as appropriate. Counselors recognize the need to balance the ethical rights of clients to make choices, their capacity to give consent or assent to receive services, and parental or familial legal rights and responsibilities to protect these clients and make decisions on their behalf.

1.6 Clients Served by Others

When counselors learn that their clients are in a professional relationship with another counselor, they request release from clients to inform the other professionals and strive to establish positive and collaborative professional relationships with them.

1.7 Information Needed

Counselors explicitly explain to clients the nature of all services provided. They inform clients about issues such as, but not limited to, the following: the purposes, goals, techniques, procedures, limitations, potential risks, and benefits of services; the counselor's qualifications, credentials, and relevant experience. Counselors take steps to ensure that clients understand the implications of diagnosis, the intended use of tests and reports, fees, and billing arrangements.

1.8 Personal Values

Counselors are aware of their own values, attitudes, beliefs and behaviors, and avoid imposing values that are harmful to the client, former client, or to an individual

significantly involved with the client or former client. Where unintentional harm occurs, the counselor must show evidence of an attempt to remedy such harm.

1.9 Role Changes in the Professional Relationship

When a counselor changes a role from the original or most recent contracted relationship, he or she obtains informed consent from the client and explains the right of the client to refuse services related to the change. Examples of role changes include: changing from individual to relationship or family counseling, or vice versa; changing from a non-forensic evaluative role to a therapeutic role, or vice versa; changing from a counselor to a researcher role (i.e., enlisting clients as research participants), or vice versa; and changing from a counselor to a mediator role, or vice versa. Clients must be fully informed of any anticipated consequences (e.g., financial, legal, personal, or therapeutic) of counselor role changes.

1.10 Roles and Relationships at Individual, Group, Institutional, and Societal Levels

When appropriate, counselors advocate at individual, group, institutional, and societal levels to examine potential barriers and obstacles that inhibit access and/or the growth and development of clients. Counselors obtain client consent prior to engaging in advocacy efforts on behalf of an identifiable client to improve the provision of services and to work toward removal of systemic barriers or obstacles that inhibit client access, growth, and development.

1.11 Multiple Clients

When a counselor agrees to provide counseling services to two or more persons who have a relationship, the counselor clarifies at the outset which person or persons are clients and the nature of the relationships the counselor will have with each involved person. If it becomes apparent that the counselor may be called upon to perform potentially conflicting roles, the counselor will clarify, adjust, or withdraw from roles appropriately.

1.12 Group Work

Counselors screen prospective group counseling participants. To the extent possible, counselors 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. In a group setting, counselors take reasonable precautions to protect clients from physical, emotional, or psychological trauma.

1.13 End-of-Life Care for Terminally Ill Clients

Counselors strive to take measures that enable clients: to obtain high quality end-of-life care for their physical, emotional, social, and spiritual needs; to exercise the highest degree of self-determination possible; to be given every opportunity possible to engage in informed decision making regarding their end-of-life care; and to receive complete and adequate assessment regarding their ability to make competent, rational decisions on their own behalf from a mental health professional who is experienced in end-of-life care practice. Recognizing the personal, moral, and competence issues related to end-of-life decisions, counselors may choose to work or not work with terminally ill clients who wish to explore their end-of-life options. Counselors provide appropriate referral information to ensure that clients receive the necessary help. Counselors who provide services to terminally ill individuals who are considering hastening their own deaths have the option of breaking or not breaking confidentiality, depending on applicable laws and the specific circumstances of the situation, and after seeking consultation or supervision from appropriate professional and legal parties.

1.14 Termination and Referral

1.14.1 Continuation of Counseling

Counselors do not abandon or neglect clients in counseling. Counselors assist in making appropriate arrangements for the continuation of treatment, when necessary, during interruptions such as vacations, illness, and following termination.

1.14.2 Referral

If counselors determine an inability to be of professional assistance to clients, they avoid entering or continuing counseling relationships. Counselors are knowledgeable about culturally and clinically appropriate referral resources and suggest these alternatives. If clients decline the suggested referrals, counselors should discontinue the relationship.

1.14.3 Termination

Counselors terminate a counseling relationship when it becomes reasonably apparent that the client no longer needs assistance, is not likely to benefit, or is being harmed by continued counseling. Counselors may terminate counseling when in jeopardy of harm by the client or another person with whom the client has a relationship, or when clients do not pay fees as agreed upon. Counselors provide pre-termination counseling and recommend other service providers when necessary.

1.14.4 Transfer

When counselors transfer or refer clients to other practitioners, they ensure that appropriate clinical and administrative processes are completed and open communication is maintained with both clients and practitioners.

2. Confidentiality and Privacy

2.1 Trust

Counselors recognize that trust is a cornerstone of the counseling relationship. Counselors aspire to earn the trust of clients by creating an ongoing partnership, establishing and upholding appropriate boundaries, and maintaining confidentiality. Counselors communicate the parameters of confidentiality in a culturally competent manner.

2.2 Respecting Client Rights

2.2.1 Cultural Meaning of Confidentiality

Counselors maintain awareness and sensitivity regarding cultural meanings of confidentiality and privacy. Counselors respect differing views toward disclosure of information. Counselors hold ongoing discussions with clients as to how, when, and with whom information is to be shared.

2.2.2 Privacy

Counselors respect client rights to privacy. Counselors solicit private information from clients only when it is beneficial to the counseling process.

2.2.3 Consent and Justification

Counselors do not share confidential information without client consent or without sound legal or ethical justification.

2.2.4 Limitations of Confidentiality

At initiation and throughout the counseling process, counselors inform clients of the limitations of confidentiality and seek to identify foreseeable situations in which confidentiality must be breached.

2.2.5 Review by Treatment Team

When client treatment involves a continued review or participation by a treatment team, the client will be informed of the team's existence and composition, information being shared, and the purposes of sharing such information.

2.2.6 Setting

Counselors discuss confidential information only in settings in which they can reasonably ensure client privacy.

2.2.7 Third-Party Payers

Counselors disclose information to third-party payers only when clients have authorized such disclosure.

2.2.8 Transmission of Information

Counselors take precautions to ensure the confidentiality of information transmitted through the use of computers, electronic mail, facsimile machines, telephones, voice mail, answering machines, and other electronic or computer technology.

2.2.9 Deceased Clients

Counselors protect the confidentiality of deceased clients, consistent with legal requirements and agency or setting policies.

2.2.10 Group Work

In group work, counselors clearly explain the importance and parameters of confidentiality for the specific group being entered. In couples and family counseling, counselors clearly define who is considered "the client" and discuss expectations and limitations of confidentiality. Counselors seek agreement and document in writing such agreement among all involved parties having capacity to give consent concerning each individual's right to confidentiality and any obligation to preserve the confidentiality of information known.

2.3 Clients Lacking Capacity to Give Informed Consent

2.3.1 Responsibility to Clients

When counseling minor clients or adult clients who lack the capacity to give voluntary, informed consent, counselors protect the confidentiality of information received in the counseling relationship as specified by federal and state laws, written policies, and applicable ethical standards.

2.3.2 Responsibility to Parents and Legal Guardians

Counselors inform parents and legal guardians about the role of counselors and the confidential nature of the counseling relationship. Counselors are sensitive to the cultural diversity of families and respect the inherent rights and responsibilities of parents or guardians over the welfare of their children or charges according to law. Counselors work to establish, as appropriate, collaborative relationships with parents or guardians to best serve clients.

2.3.3 Release of Confidential Information

When counseling minor clients or adult clients who lack the capacity to give voluntary consent to release confidential information, counselors seek permission from an appropriate third party to disclose information. In such instances, counselors inform clients consistent with their level of understanding and take culturally appropriate measures to safeguard client confidentiality.

2.4 Record Keeping

2.4.1 Documentation of Professional and Scientific Work

Counselors create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work, in order to: facilitate the subsequent provision of services by them or by other professionals; allow for replication of research design and analysis; meet institutional requirements; and ensure compliance with law.

2.4.2 Maintenance, Dissemination and Disposal of Confidential Records

Counselors maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. If confidential information is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, counselors use coding or other techniques to avoid the inclusion of personal identifiers.

2.4.3 Confidentiality of Records

Counselors ensure that records are kept in a secure location and that only authorized persons have access to records.

2.4.4 Permission to Record

Counselors obtain permission from clients or their legal representatives prior to voice

or image recording through electronic or other means.

2.4.5 Permission to Observe

Counselors obtain permission from clients prior to observing counseling sessions, reviewing session transcripts, or viewing recordings of sessions with supervisors, faculty, peers, or others within the training environment.

2.4.6 Client Access

Counselors provide reasonable access to records and copies of records when requested by competent clients. Counselors limit the access of clients to their records, or portions of their records, only when there is compelling evidence that such access would cause harm to the client. Counselors document the request of clients and the rationale for withholding some or all of the record in the files of clients. In situations involving multiple clients, counselors provide individual clients with only those parts of records that are directly related to them and do not include confidential information related to any other client.

2.4.7 Assistance with Records

When clients request access to their records, counselors provide assistance and consultation in interpreting counseling records.

2.4.8 Disclosure or Transfer

Counselors make plans in advance to facilitate the appropriate transfer of records. Unless exceptions to confidentiality exist, counselors obtain written permission from clients to disclose or transfer records to legitimate third parties. Steps are taken to ensure that receivers of counseling records are sensitive to their confidential nature.

2.4.9 Storage and Disposal after Termination

Counselors store records following termination of services to ensure reasonable future access, maintain records in accordance with the Personal Data (Privacy) Ordinance in Hong Kong, and dispose of client records and other sensitive materials in a manner that protects client confidentiality.

2.4.10 Counselor Departure

Counselors take reasonable precautions to protect client confidentiality in the event of the counselor's termination of practice, incapacity, or death.

2.5 Research and Training

2.5.1 Institutional Approval

When institutional approval is required, counselors provide accurate information about their research proposals and obtain approval prior to conducting their research. They conduct research in accordance with the approved research protocol.

2.5.2 Adherence to Guidelines

Counselors are responsible for understanding and adhering to government, agency, or institutional policies or applicable guidelines regarding confidentiality in their research practices.

2.5.3 Confidentiality of Information Obtained in Research

Violations of participant privacy and confidentiality are risks of participation in research involving human participants. Investigators maintain all research records in a secure manner. They explain to participants the risks of violations of privacy and confidentiality and disclose to participants any limits of confidentiality that reasonably can be expected. Regardless of the degree to which confidentiality will be maintained, investigators must disclose to participants any limits of confidentiality that reasonably can be expected.

2.5.4 Disclosure of Research Information

Counselors do not disclose confidential information that reasonably could lead to the identification of a research participant unless they have obtained the prior consent of the person. Use of data derived from counseling relationships for purposes of training, research, or publication is confined to content that is disguised to ensure the anonymity of the individuals involved.

2.5.5 Agreement for Identification

Identification of clients, students, or supervisees in a presentation or publication is permissible only when they have reviewed the material and agreed to its presentation or publication.

2.6 Consultation

2.6.1 Agreements

When acting as consultants, counselors seek agreements among all parties involved

concerning each individual's rights to confidentiality, the obligation of each individual to preserve confidential information, and the limits of confidentiality of information shared by others.

2.6.2 Respect for Privacy

Information obtained in a consulting relationship is discussed for professional purposes only with persons directly involved with the case. Written and oral reports present only data germane to the purposes of the consultation, and every effort is made to protect client identity and to avoid undue invasion of privacy.

2.6.3 Disclosure of Confidential Information

When consulting with colleagues, counselors do not disclose confidential information that reasonably could lead to the identification of a client or other person or the organization with which they have a confidential relationship unless they have obtained the prior consent of the person or organization.

2.7 Information Shared With Others

Counselors make every effort to ensure that privacy and confidentiality of clients are maintained by subordinates, including employees, supervisees, students, clerical assistants, and volunteers.

2.8 Technology Applications

2.8.1 Benefits and Limitations

Counselors inform clients of the benefits and limitations of using information technology applications in the counseling process and in business or billing procedures. Such technologies include, but are not limited to, computer hardware and software, telephones, the World Wide Web, the Internet, online assessment instruments and other communication devices.

2.8.2 Distance Counseling

When providing technology-assisted distance counseling services, counselors determine that clients are intellectually, emotionally, and physically capable of using the application and that the application is appropriate for the needs of clients. When technology-assisted distance counseling services are deemed inappropriate by the counselor or client, counselors consider delivering services face to face. Counselors provide reasonable access to computer applications when providing technology-assisted distance counseling services.

2.8.3 *Violation of Laws*

Counselors ensure that the use of technology does not violate the laws of any local, national, or international entity and observe all relevant statutes.

2.8.4 *Informed Consent*

As part of the process of establishing informed consent, counselors do the following:

- (a) Address issues related to the difficulty of maintaining the confidentiality of electronically transmitted communications.
- (b) Inform clients of all colleagues, supervisors, and employees, such as information technology administrators, who might have authorized or unauthorized access to electronic transmissions.
- (c) Urge clients to be aware of all authorized or unauthorized users including family members and fellow employees who have access to any technology clients may use in the counseling process.
- (d) Inform clients of pertinent legal rights and limitations governing the practice of a profession over regional, national or international boundaries.
- (e) Use encrypted web sites and e-mail communications to help ensure confidentiality when possible.
- (f) When the use of encryption is not possible, counselors notify clients of this fact and limit electronic transmissions to general communications that are not client specific.
- (g) Inform clients if and for how long archival storage of transaction records is maintained.
- (h) Discuss the possibility of technology failure and alternate methods of service delivery.
- (i) Inform clients of emergency procedures, such as calling 999 or a local crisis hotline, when the counselor is not available.
- (j) Discuss time zone differences, local customs, and cultural or language differences that might impact service delivery.
- (k) Inform clients when technology-assisted distance counseling services are not covered by insurance.

2.8.5 *Maintenance of Websites*

Counselors maintaining sites on the World Wide Web (the Internet) do the following:

- (a) Regularly check that electronic links are working and professionally appropriate.
- (b) Establish ways clients can contact the counselor in case of technology failure.

- (c) Provide electronic links to relevant professional certification bodies to protect consumer rights and facilitate addressing ethical concerns.
- (d) Establish a method for verifying client identity.
- (e) Obtain the written consent of the legal guardian or other authorized legal representative prior to rendering services in the event the client is a minor child, an adult who is legally incompetent, or an adult incapable of giving informed consent.
- (f) Strive to provide a site that is accessible to persons with disabilities.
- (g) Strive to provide translation capabilities for clients who have a different primary language while also addressing the imperfect nature of such translations.
- (h) Assist clients in determining the validity and reliability of information found on the World Wide Web and other technology applications.

2.9 Exceptions

2.9.1 Disclosure for Protection and Legal Requirements

The general requirement that counselors keep information confidential does not apply when disclosure is required to protect clients or other identifiable parties from serious and foreseeable harm, or when legal requirements demand that confidential information must be revealed. Counselors consult with other professionals when in doubt as to the validity of an exception. Additional considerations apply when addressing end-of-life issues.

2.9.2 Communicable and Life Threatening Diseases

When clients disclose that they have a disease commonly known to be both communicable and life threatening, counselors may be justified in disclosing information to identifiable third parties, if they are known to be at demonstrable and high risk of contracting the disease. Prior to making a disclosure, counselors confirm that there is such a diagnosis and assess the intent of clients to inform the third parties about their disease or to engage in any behaviors that may be harmful to an identifiable third party.

2.9.3 Subpoena

When subpoenaed to release confidential or privileged information without a client's permission, counselors obtain written, informed consent from the client or take steps to prohibit the disclosure or have it limited as narrowly as possible due to potential harm to the client or counseling relationship.

2.9.4 Decision for Disclosure

To the extent possible, clients are informed before confidential information is disclosed and are involved in the disclosure decision making process. When circumstances require the disclosure of confidential information, only essential information is revealed.

3. Fees and Bartering

3.1 Fees

Counselors refuse a private fee or other remuneration for rendering services to persons who are entitled to such services through the counselor's employing agency or institution. The policies of a particular agency may make explicit provisions for agency clients to receive counseling services from members of its staff in private practice. In such instances, the clients must be informed of other options open to them should they seek private counseling services.

3.2 Establishing Fees

In establishing fees for professional counseling services, counselors consider the financial status and locality of clients. In the event that the established fee structure is inappropriate for a client, counselors assist clients in attempting to find comparable services of acceptable cost.

3.3 Nonpayment of Fees

If counselors intend to use collection agencies or take legal measures to collect fees from clients who do not pay for services as agreed upon, they first inform clients of intended actions and offer clients the opportunity to make payment.

3.4 Bartering

Counselors may barter only if the relationship is not exploitative or harmful and does not place the counselor at an unfair advantage, if the client requests it, and if such arrangements are an accepted practice among professionals in the community. Counselors consider the cultural implications of bartering and discuss relevant concerns with clients and document such agreements in a clear, written contract.

3.5 Receiving Gifts

Counselors understand the challenges of accepting gifts from clients and recognize

that in some cultures, small gifts are a token of respect and showing gratitude. When determining whether or not to accept a gift from clients, counselors take into account the therapeutic relationship, the monetary value of the gift, a client's motivation for giving the gift, and the counselor's motivation for wanting or declining the gift.

4. Cooperation with Other Professionals

4.1 Relationships with Other Professionals

Professional counselors recognize that the quality of their interactions with colleagues can influence the quality of services provided to clients. They work to become knowledgeable about colleagues within and outside the field of counseling. Counselors develop positive working relationships and systems of communication with colleagues to enhance services to clients.

4.2 Relationships with Colleagues, Employers, and Employees

Counselors are respectful of approaches to counseling services that differ from their own. Counselors are respectful of traditions and practices of other professional groups with which they work.

4.3 Forming Relationships

Counselors work to develop and strengthen interdisciplinary relations with colleagues from other disciplines to best serve clients.

4.4 Interdisciplinary Teamwork

Counselors, who are members of interdisciplinary teams delivering multifaceted services to clients, keep the focus on how to best serve the clients. They participate in and contribute to decisions that affect the well-being of clients by drawing on the perspectives, values, and experiences of the counseling profession and those of colleagues from other disciplines.

4.5 Confidentiality

When counselors are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, they clarify role expectations and the parameters of confidentiality with their colleagues.

4.6 Establishing Professional and Ethical Obligations

Counselors who are members of interdisciplinary teams clarify professional and ethical obligations of the team as a whole and of its individual members. When a team decision raises ethical concerns, counselors first attempt to resolve the concern within the team. If they cannot reach resolution among team members, counselors pursue other avenues to address their concerns, provided that these avenues are consistent with upholding client well-being.

4.7 Personnel Selection and Assignment

Counselors select competent staff and assign responsibilities compatible with their skills and experiences.

4.8 Employer Policies

The acceptance of employment in an agency or institution implies that counselors are in agreement with its general policies and principles. Counselors strive to reach agreement with employers as to acceptable standards of conduct that allow for changes in institutional policy that are conducive to the growth and development of clients.

4.9 Negative Conditions

Counselors alert their employers of inappropriate policies and practices. They attempt to effect changes in such policies or procedures through constructive action within the organization. When such policies are potentially disruptive or damaging to clients, or may limit the effectiveness of services provided, and change cannot be effected, counselors take appropriate further action. Such action may include referral to appropriate certification, accreditation, or government organizations, or voluntary termination of employment.

4.10 Protection from Punitive Action

Counselors take care not to harass or dismiss an employee who has acted in a responsible and ethical manner to expose inappropriate employer policies or practices.

4.11 Consultant Competency

Counselors take reasonable steps to ensure that they have the appropriate resources and competencies when providing consultation services. Counselors provide appropriate referral resources when requested or needed.

4.12 Understanding Consultees

When providing consultation, counselors attempt to develop with their consultees a clear understanding of problem definition, goals for change, and predicted consequences of interventions selected.

4.13 Consultant Goals

The consulting relationship is one in which consultee adaptability and growth toward self-direction are consistently encouraged and cultivated.

4.14 Informed Consent in Consultation

When providing consultation, counselors have an obligation to review, in writing and verbally, the rights and responsibilities of both counselors and consultees. Counselors use clear and understandable language to inform all parties involved about the purpose of the services to be provided, relevant costs, potential risks and benefits, and the limits of confidentiality. Working in conjunction with the consultee, counselors attempt to develop a clear definition of the problem, goals for change, and predicted consequences of interventions that are culturally responsive and appropriate to the needs of consultees.

5. Assessment and Evaluation

5.1 General

5.1.1 Purpose

The primary purpose of educational, psychological, and career assessment is to provide measurements that are valid and reliable in either comparative or absolute terms. These include, but are not limited to, measurements of ability, personality, interest, intelligence, achievement, and performance. Counselors recognize the need to interpret the statements in this section as applying to both quantitative and qualitative assessments.

5.1.2 Results and Interpretations

Counselors do not misuse assessment results and interpretations, and they take reasonable steps to prevent others from misusing the information these techniques provide. They respect the client's right to know the results, the interpretations made, and the bases for counselors' conclusions and recommendations.

5.2 Bases for Assessment

5.2.1 Substantiation of Findings

Counselors base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings.

5.2.2 Limited Information

Counselors provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, they document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations.

5.2.3 Consultation or Supervision

When counselors conduct a record review or provide consultation or supervision, and an individual examination is not warranted or necessary for the opinion, they explain this and the sources of information on which they based their conclusions and recommendations.

5.3 Use of Assessment

5.3.1 Competence

Counselors utilize only those testing and assessment services for which they have been trained and are competent. Counselors using technology-assisted test interpretations are trained in the construct being measured and the specific instrument being used. Counselors take reasonable measures to ensure the proper use of psychological and career assessment techniques by persons under their supervision.

5.3.2 Usefulness and Proper Application

Counselors administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.

5.3.3 *Validity and Reliability*

Counselors use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, they describe the strengths and limitations of test results and interpretation.

5.3.4 *Language Preference*

Counselors use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues.

5.3.5 *Self Administration*

Unless the assessment instrument is designed, intended, and validated for self-administration and/or scoring, counselors do not permit inadequately supervised use.

5.4 **Informed Consent in Assessment**

5.4.1 *Explanation*

Prior to assessment, counselors explain the nature and purposes of assessment and the specific use of results by potential recipients. The explanation will be given in the language of the client (or other legally authorized person on behalf of the client), unless an explicit exception has been agreed upon in advance. Counselors consider the client's personal or cultural context, the level of the client's understanding of the results, and the impact of the results on the client.

5.4.2 *Informed Consent*

Counselors obtain informed consent for assessments, evaluations, or diagnostic services, except when

- (a) testing is mandated by law or governmental regulations;
- (b) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or
- (c) one purpose of the testing is to evaluate decisional capacity.

Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.

5.4.3 Clients with Questionable Capacity

Counselors inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.

5.4.4 Interpreter Services

Counselors using the services of an interpreter obtain informed consent from the client to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained.

5.5 Release of Test Data

5.5.1 Recipients of Assessment Results

Counselors consider the examinee's welfare, explicit understandings, and prior agreements in determining who receives the assessment results. Counselors include accurate and appropriate interpretations with any release of individual or group assessment results.

5.5.2 Test Data

The term 'test data' refers to raw and scaled scores, client responses to test questions or stimuli, and counselors' notes and recordings concerning client statements and behavior during an examination. Those portions of test materials that include client responses are included in the definition of test data. Pursuant to a client release, counselors provide test data to the client or other persons identified in the release. Counselors may refrain from releasing test data to protect a client or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law.

5.5.3 Absence of Client Release

In the absence of a client release, counselors provide test data only as required by law or court order.

5.6 Interpreting Assessment Results

5.6.1 Reservations

In reporting assessment results, counselors indicate reservations that exist regarding validity or reliability due to circumstances of the assessment or the inappropriateness of the norms for the person tested.

5.6.2 Limitations

When interpreting assessment results, including automated interpretations, counselors take into account the purpose of the assessment as well as the various test factors, test-taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural difference that might affect counselors' judgments or reduce the accuracy of their interpretations. They indicate any significant limitations of their interpretations.

5.6.3 Research Instruments

Counselors exercise caution when interpreting the results of research instruments not having sufficient technical data to support respondent results. The specific purposes for the use of such instruments are stated explicitly to the examinee.

5.7 Assessment by Unqualified Persons

Counselors do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision.

5.8 Obsolete Tests and Outdated Test Results

5.8.1 Outdated Tests and Results

Counselors do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.

5.8.2 Obsolete Tests

Counselors do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

5.9 Test Scoring and Interpretation Services

5.9.1 Scoring and Interpretation Services for Others

Counselors who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures

and any special qualifications applicable to their use.

5.9.2 Selection of Scoring and Interpretation Services

Counselors select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations.

5.9.3 Responsibility

Counselors retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

5.10 Explaining Assessment Results

Regardless of whether the scoring and interpretation are done by counselors, by employees or assistants, or by automated or other outside services, counselors take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, pre-employment or security screenings, and forensic evaluations), and this fact has been clearly explained in advance to the person being assessed.

5.11 Maintaining Test Security

The term “test materials” refers to manuals, instruments, protocols, and test questions or stimuli and does not include test data. Counselors make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to the HKPCA Code of Ethics.

6. Research and Publication

Members who conduct research are encouraged to promote a clearer understanding of the conditions that lead to a healthy and more just society. We work to minimize bias and respect diversity in designing and implementing research studies or programs.

6.1 Research Responsibilities

6.1.1 Use of Human Research Participants

Research activities involving human participants are to be planned, designed, conducted, and reported in a manner that is consistent with pertinent ethical principles, federal and state laws, institutional regulations, and scientific standards governing research with human research participants. The welfare of participants is to be protected throughout the research process with reasonable precautions to avoid causing injurious psychological, emotional, physical, or social effects to participants. Counselors take reasonable precautions to avoid causing disruptions in the lives of research participants that could be caused by their involvement in research.

6.1.2 Deviation from Standard Practice

Counselors seek consultation and observe stringent safeguards to protect the rights of research participants when a research problem suggests a deviation from standard or acceptable practices.

6.1.3 Principal Researcher Responsibility

The principal researcher takes the ultimate responsibility for ethical research practice. All others involved in the research activities share ethical obligations and responsibility for their own actions.

6.1.4 Multicultural/Diversity Considerations in Research

Counselors are to be sensitive to incorporate research procedures that take into account cultural considerations found appropriate to research goals. Consultations are to be sought whenever appropriate.

6.1.5 Humane Care and Use of Animals in Research

Counselors ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. Counselors should make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects. When it is appropriate that an animal's life be terminated, counselors proceed with an effort to minimize pain and in accordance with accepted procedures under local laws and with professional standards.

6.2 Rights of Research Participants

6.2.1 Informed Consent in Research

Individuals have the right to consent to become research participants. In seeking individuals' consent to become research participants, counselors use language that

accurately explains the purpose and procedures to be followed. They also identify procedures, describe any attendant discomforts and risks, and explain any benefits or changes in individual organizations that might be reasonably expected for the participants to take note of. Counselors also offer answers to any inquiries concerning the procedures and describe any limitations on confidentiality to the research participants. Participants are to be aware of their own rights to withdraw their consent and to discontinue participation in the research project at any time without penalty. When institutional approval is required, researchers should provide accurate information about their research proposals with research protocols, and obtain approval prior to conducting the research. A debriefing session prior to the research activity is considered useful for face-to-face explanation of the above concerns.

6.2.2 Deception

Counselors are not to conduct research involving deception unless alternative procedures are not feasible. When the methodological requirements of a study necessitate concealment or deception, the investigator explains the reasons for this action as soon as possible during the debriefing.

6.2.3 Student or Supervisee Participation

The student or supervisee participants are to be clearly informed that the decision to involve in the research activity does not affect one's academic standing or supervisory relationship. Students or supervisees who choose not to participate in educational research are provided with an equitable alternative activity to fulfill their academic or clinical requirements.

6.2.4 Client Participation

Counselors conducting research involving clients are to make clear in the informed consent process that they are free to choose whether or not to participate in research activities. Necessary precautions are to be taken to protect clients from adverse consequences of declining or withdrawing from participation.

6.2.5 Confidentiality of Information

All research data during the course of investigation are confidential. Plans for protecting confidentiality are to be explained to participants as a part of the procedure for obtaining informed consent. When a participant is not capable of giving informed consent, counselors are to provide an appropriate explanation and to obtain such an agreement through a legally authorized person.

6.2.6 Informing Sponsors

Counselors inform sponsors, institutions, and publication channels regarding research procedures and outcomes. Only appropriate bodies and authorities are given pertinent information and acknowledgment.

6.2.7 Disposal of Research Data, Documents and Records

Counselors take steps to destroy data, records or documents (audio, video, digital and written) containing confidential information that may identify participants within a reasonable period of time upon the completion of a research activity. Participants' consent is to be obtained for records of artistic nature with regard to handling of such records or documents.

6.2.8 Commitments to Participants

Counselors take reasonable measures to honor all commitments to research participants.

6.3 Relationships with Research Participants (when research involves intensive or extended interactions)

6.3.1 Relationships with Research Participants

All non-professional relationships with research participants should be avoided. Sexual or romantic relationships with current research participants are prohibited. Researchers do not condone or subject research participants to sexual harassment.

6.3.2 Potentially Beneficial Interactions

Counselor researchers must document, prior to the interaction (when feasible), the rationale for such an interaction, the potential benefits and anticipated consequences for the research participant. Appropriate consent of the research participant should be obtained prior to such interactions.

6.4 Reporting Results

6.4.1 Accuracy of Results

Counselor researchers must plan, conduct and report research accurately. Fraudulent, misleading, fabricated, distorted, misrepresented or deliberately biased results should be avoided.

6.4.2 Obligations to Report Unfavorable Results and Results with Errors

Counselors are to report the results of any research of professional values. Results that reflect unfavorably on institutions, programs, services, or vested interests are not to be withheld. If significant errors are discovered, reasonable steps should be taken to correct such errors or through other publication means deemed suitable.

6.4.3 Replications Studies

Counselors are obligated to make available sufficient original research data to qualified professionals who may wish to replicate the study.

6.5 Publication

6.5.1 Plagiarism

Counselors do not plagiarize, that is, present another person's work as their own work or portions of another's work or data as their own, even if the other work or data source is cited occasionally.

6.5.1 Professional Review

Counselors who review materials submitted for presentation, publication, grant or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it. Counselors who serve as reviewers at the request of editors or publishers make every effort to review only materials that are within their scope of competency and use care to avoid personal biases.

6.5.3 Contributors

The principal contributor is listed first and minor technical or professional contributions are acknowledged in notes or introductory statements. Agreements are to be established in advance regarding allocation of tasks, publication credit and types of acknowledgment that will be received.

6.5.4 Student Research

For articles that are substantially based on students' course papers, projects, dissertations or thesis, and on which students have been the primary contributors, students are to be listed as principal authors.

6.5.5 Duplicate Submission or Publication of Data

Counselors do not publish, as original data, data that have been previously published. Counselors submit manuscripts for consideration to only one journal at a time. Manuscripts that are published in whole or in substantial part in another journal or

published work are not submitted for publication without acknowledgment and permission from the previous publication.

6.5.6 Misuse of Counselors' Work

If counselors learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

7. Resolving Ethical Issues

7.1 Professional Work

Counselors behave in a legal, ethical, and moral manner in the conduct of their professional work. They are aware that client protection and trust in the profession depend on a high level of professional conduct. They hold other counselors to the same standards and are willing to take appropriate action to ensure that these standards are upheld. Counselors strive to resolve ethical dilemmas with direct and open communication among all parties involved and seek consultation with colleagues and supervisors when necessary. Counselors incorporate ethical practice into their daily professional work. They engage in ongoing professional development regarding current topics in ethical and legal issues in counseling.

7.2 Knowledge

Counselors understand the HKPCA Code of Ethics. Lack of knowledge or misunderstanding of an ethical responsibility is not a defense against a charge of unethical conduct.

7.3 Conflicts between Ethics and Laws

If ethical responsibilities conflict with law, regulations, or other governing legal authority, counselors make known their commitment to the HKPCA Code of Ethics and take steps to resolve the conflict. If the conflict cannot be resolved by such means, counselors may adhere to the requirements of law, regulations, or other governing legal authority.

7.4 Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which counselors are affiliated or for whom they are working conflict with the HKPCA Code of Ethics, they clarify the nature of the conflict, make known their commitment to this Code, and to the extent feasible, resolve the conflict in a way that permits adherence to this Code.

7.5 Suspected Violations

7.5.1 Ethical Behavior Expected

Counselors expect colleagues to adhere to the HKPCA Code of Ethics. When counselors possess knowledge that raises doubts as to whether another counselor is acting in an ethical manner, they take appropriate action.

7.5.2 Informal Resolution

When counselors have reason to believe that another counselor is violating or has violated an ethical standard, they attempt first to resolve the issue informally with the other counselor if feasible, provided such action does not violate confidentiality rights that may be involved.

7.5.3 Reporting Ethical Violations

If an apparent violation has substantially harmed, or is likely to substantially harm a person or organization and is not appropriate for informal resolution or is not resolved properly, counselors take further action appropriate to the situation. Such action might include referral to HKPCA or appropriate institutional authorities. Section 7.5.3 does not apply when an intervention would violate confidentiality rights or when counselors have been retained to review the work of another counselor whose professional conduct is in question.

7.5.4 Consultation

When uncertain as to whether a particular situation or course of action may be in violation of the HKPCA Code of Ethics, counselors consult with other counselors who are knowledgeable about ethics and the Code, with colleagues, or with appropriate authorities.

7.5.5 Organizational Conflicts

If the demands of an organization with which counselors are affiliated pose a conflict with the HKPCA Code of Ethics, counselors specify the nature of such conflicts and express to their supervisors or other responsible officials their commitment to the Code. When possible, counselors work toward change within the organization to allow full adherence to the Code. In doing so, they address any confidentiality issues.

7.5.6 Unwarranted Complaints

Counselors do not initiate, participate in, or encourage the filing of ethics complaints that are made with reckless disregard or willful ignorance of facts that would disprove

the allegation.

7.5.7 Unfair Discrimination against Complainants and Respondents

Counselors do not deny persons employment, advancement, admission to academic or other programs, tenure, or promotion based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information.

7.5.8 Cooperation with Ethics Committees

Counselors cooperate in ethics investigations, proceedings, and resulting requirements of the Hong Kong Professional Counseling Association. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute noncooperation.

References:

ACA Code of Ethics, 2005

APA Ethical Principles of Psychologists and Code of Conduct, 2002