



**BRITISH ASSOCIATION FOR
BEHAVIOURAL & COGNITIVE
PSYCHOTHERAPIES**
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BRITISH ASSOCIATION FOR BEHAVIOURAL AND COGNITIVE PSYCHOTHERAPIES

Standards of Conduct, Performance and Ethics in the Practice of Behavioural and Cognitive Psychotherapies

Your Duties as a Cognitive Behaviour Therapist

The standards of conduct, performance and ethics you must keep to in CBT

1. You must act in the best interests of service users.
2. You must maintain high standards of CBT assessment and practice.
3. You must respect the confidentiality of service users.
4. You must keep high standards of personal conduct.
5. You must provide (to us and any other relevant regulators and/or professional bodies) any important information about your conduct and competence.
6. You must keep your professional knowledge and skills up to date.
7. You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner.
8. You must communicate properly and effectively with service users and other practitioners.
9. You must effectively supervise tasks that you have asked other people to carry out.
10. You must get informed consent to give treatment (except in an emergency).
11. You must keep accurate records.
12. You must deal fairly and safely with the risks of infection.
13. You must limit your work or stop practising if your performance or judgement is affected by your health.
14. You must behave with honesty and integrity and make sure that your

behaviour does not damage the public's confidence in you or your profession.

15. You must make sure that any advertising you do is accurate.

Introductory Statement

1. As a member of the BABCP you are required to make sure that you are familiar with the standards and that you keep to them. If you are applying for membership or Accreditation as a CBT practitioner, trainer or supervisor, you will be asked to sign a declaration to confirm that you have read and will keep to the standards.

Existing members of BABCP will already have signed a declaration that they will adhere to the "guidelines for good practice" of BABCP. These 'Standards' replace those 'Guidelines' and existing members are deemed to have accepted these 'standards'.

It is important that you read and understand this document. If someone raises concerns about your practice, we will consider these standards (and our standards of Accreditation for accredited members) when we decide whether we need to take any action.

2. It is important that you meet BABCP standards and are able to practise CBT safely and effectively. We also want to make sure that you maintain high standards of personal conduct and do not do anything which might affect the public's confidence in you, the BABCP or any profession to which you may belong. However, we do not dictate how you should meet our standards.

Each standard can normally be met in more than one way. The way in which you meet our standards might change over time because of improvements in technology or changes in your practice.

As an autonomous and accountable professional, you need to make informed and reasonable decisions about your practice to make sure that you meet the standards that are relevant to your practice. This might include getting advice and support from education providers, employers, your clinical supervisor, colleagues and other people to make sure that you protect the wellbeing of service users at all times.

Many BABCP members are also members of other professional bodies and will therefore be bound by codes of practice of those professions. BABCP recognises the valuable role other professional bodies play in representing and promoting the interests of their members. This often includes providing guidance and advice about good practice, which can help you meet their standards and those in this document.

3. It is expected that all members of BABCP approach their work with the aim of resolving problems and promoting the well-being of service users and will endeavour to use their ability and skills to service users' best advantage without prejudice and with due recognition of the value and dignity of every human being. If you make informed, reasonable and professional judgements about your practice, with the best interests of your service users as your prime concern, and you can justify your decisions if you are asked to, it is very likely that you will meet our standards.

By 'informed', we mean that you have enough information to make a decision. This would include reading these standards and taking account of any other relevant guidance or laws. By 'reasonable', we mean that you need to make sensible, practical decisions about your practice, taking account of all relevant information and the best interests of the people who use or are affected by your services. You should also be able to justify your decisions if you are asked to.

4. Throughout these standards, we have used the term 'service user' to refer to anyone who uses or is affected by a member's services. Who your service users are will depend on how

and where you work. For example, if you work in clinical practice, your service users might be your patients/clients. In some circumstances, your service users might be organisations rather than individuals. The term also includes other people who might be affected by your practice, such as carers and relatives.

We have used the word ‘treatment’ in its broadest sense to include a number of actions members carry out. These actions could include diagnostic, monitoring or assessment procedures, therapy or advice.

The standards of conduct, performance and ethics in CBT

1. You must act in the best interests of service users.

- 1.1 You are personally responsible for making sure that you promote and protect the best interests of your service users. You must respect and take account of these factors when providing care or a service, and must not abuse the relationship you have with a service user, sexually, emotionally, financially or in other ways. Some CBT interventions may involve you being with service users in social situations but you must still make a clear distinction between personal and professional relationships. If you are providing treatment on a private basis, you must make it clear to the service user at the outset what your fees are and the terms and conditions for you providing the treatment and the service user paying for it.
- 1.2 You must not allow your views about a service user’s sex, age, colour, race, disability, sexuality, social or economic status, lifestyle, culture, religion or beliefs to affect the way you treat them or the professional advice you give. You must treat service users with respect and dignity. If you are providing care, you must work in partnership with your service users and involve them in their care as appropriate.
- 1.3 You must not do anything or fail to do anything, or allow someone else to do anything that you have good reason to believe will put the health or safety of a service user or others in danger. This includes both your own actions and those of other people. You should take appropriate action to protect the rights of children and vulnerable adults if you believe they are at risk, including following national and local policies.
- 1.4 You are responsible for your professional conduct, any care or advice you provide, and any failure to act. You are responsible for the appropriateness of your decision to delegate a task. You must be able to justify your decisions if asked to.
- 1.5 You must protect service users or others if you believe that any situation puts them in danger. This includes the conduct, performance or health of a colleague. The safety of service users and others must come before any personal or professional loyalties at all times. As soon as you become aware of a situation that puts a service user or someone else in danger, you should discuss the matter with your clinical supervisor, a senior colleague or another appropriate person.

2. You must maintain high standards of CBT assessment and practice.

- 2.1 You must ensure that any intervention procedures adopted will be based upon evaluation and assessment of the service user and the environment. You must also ensure that any assessments/treatments will be in the best interests of the service user.
- 2.2 You must always be able to justify assessments/treatments by utilising the available evidence in the public domain.
- 2.3 You must plan and implement assessments/treatments in such a way that effectiveness can be evaluated.

- 2.4 You must discuss and agree the aims and goals of assessments/treatments with service users at the outset and these may be renegotiated, terminated or a referral made to another worker at the request of either party if the goals are not being met after a reasonable period of time or if they later appear to be inappropriate.
- 2.5 If a service user is asked to be tested or interviewed as part of a research project, you must ensure that you follow the guidelines of any relevant Mental Capacity laws and any other relevant guidance.

3. You must respect the confidentiality of service users.

- 3.1 You must treat information about service users as confidential and use it only for the purposes for which they have provided it. You must not knowingly release any personal or confidential information to anyone who is not entitled to it, and you should check that people who ask for information are entitled to it.
- 3.2 You must only use information about a service user to continue to care for that person; or for purposes where that person has given you specific permission to use the information. Examples where such specific permission should be sought are:
- information made available for the purpose of research
 - the service user is presented to an individual or group for teaching or supervision purposes and it is made clear that refusal would have no implication for intervention.
 - a video tape, film or other recording is made and consent specifies whether the recording may be shown to; (a) other professionals; (b) students; (c) the lay public.
- 3.3 If an intervention is being published, details of service users are restricted to the minimum required for describing the intervention.
- 3.4 You must also keep to the conditions of any relevant data-protection laws and always follow best practice for handling confidential information. Best practice is likely to change over time, and you must stay up to date.

4 You must keep high standards of personal conduct.

- 4.1 You must keep high standards of personal conduct, as well as professional conduct. You should be aware that poor conduct outside of your professional life may still affect someone's confidence in you and your profession.

5 You must provide (to us and any relevant regulators and/or professional bodies) any important information about your conduct and competence.

- 5.1 You must tell us (and any relevant regulators/professional bodies) if you have important information about your conduct or competence, or about other therapists and health professionals you work with. In particular, you must let us know straight away if you are:
- convicted of a criminal offence, receive a conditional discharge for an offence, or if you accept a police caution;
 - disciplined by any organisation responsible for regulating or licensing a healthcare or social care profession; or
 - suspended or placed under a practice restriction by an employer or similar

organisation because of concerns about your conduct or competence.

- 5.2 You should cooperate with any investigation or formal inquiry into your professional conduct, the conduct of any other healthcare provider or the treatment of a service user, where appropriate. If anyone asks for relevant information in connection with your conduct or competence, and they are entitled to it, you should provide the information.
- 5.3 We can take action against you if you are convicted of a criminal offence or have accepted a police caution. We will always consider each case individually to decide whether we need to take any action to protect the public.
- 5.4 However, we will consider dismissal from the Association if you are convicted of a criminal offence or accept a police caution that involves one of the following types of behaviour.
- Violence
 - Abuse
 - Sexual misconduct
 - Supplying drugs illegally
 - Child pornography
 - Offences involving dishonesty
 - Offences for which you received a prison sentence

This is not a full list. We will always look at any convictions or cautions we find out about.

6 You must keep your professional knowledge and skills up to date.

- 6.1 You must make sure that your knowledge, skills and performance are of a good quality, up to date, and relevant to your scope of practice.
- 6.2 You must be capable of meeting the standards of proficiency that apply to your scope of practice. We recognise that your scope of practice may change over time.
- 6.3 We acknowledge that members work in a range of different settings, including education, research and clinical practice. You need to make sure that whatever your area of practice, you are capable of practising safely and effectively. This and your professional development should be facilitated through the receipt of relevant regular supervision from an appropriately qualified and experienced person.
- 6.4 BABCP sets standards for continuing professional development and clinical supervision which CBT practitioners should meet. If you are Accredited with us, these standards link your learning and development and your clinical supervision to your continued accreditation. You also need to meet these standards.

7 You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner.

- 7.1 You must keep within your scope of practice. This means that you should only practise in the areas in which you have appropriate education, training and experience. We recognise that your scope of practice may change over time.
- 7.2 When accepting a service user, you have a duty of care. This includes the duty to refer them for further treatment if it becomes clear that the task is beyond your own scope of practice. If you refer a service user to another practitioner, you must make sure that the referral is appropriate and that the service user understands why you are making the referral.

- 7.3 In most circumstances, a person is entitled to be referred to another practitioner for a second opinion. In these cases, you must accept the request and make the referral as soon as you can.
- 7.4 If you accept a referral from another practitioner, you must make sure that you fully understand the request. You should only provide the treatment if you believe that this is appropriate. If this is not the case, you must discuss the referral with the practitioner who made the referral, and also the service user, before you begin any treatment or provide any advice.

8 You must communicate properly and effectively with service users and other practitioners.

- 8.1 You must take all reasonable steps to make sure that you can communicate properly and effectively with service users. You must communicate appropriately, cooperate, and share your knowledge and expertise with other practitioners, for the benefit of service users.

9 You must effectively supervise tasks you have asked other people to carry out.

- 9.1 People who consult you or receive treatment or services from you are entitled to assume that a person with appropriate knowledge and skills will carry out their treatment or provide services. Whenever you delegate tasks to another person to carry out on your behalf, such as to a trainee or assistant, you must be sure that they have the knowledge, skills and experience to carry out the tasks safely and effectively. You must not ask them to do work which is outside their scope of practice.
- 9.2 You must always continue to give appropriate supervision to whoever you ask to carry out a task. You will still be responsible for the appropriateness of the decision to delegate. If someone tells you that they are unwilling to carry out a task because they do not think they are capable of doing so safely and effectively, you must not force them to carry out the task anyway. If their refusal raises a disciplinary or training issue, you must deal with that separately, but you should not put the safety of the service user in danger.
- 9.3 The supervision referred to in this section does not apply to situations where you have referred the service user to another practitioner as in section 7 above. Nor does it apply to clinical supervision you may be providing to colleagues working with other service users.

10 You must get informed consent to give treatment (except in an emergency).

- 10.1 You must explain to the service user the treatment you are planning on carrying out, the aims, rationale, risks involved and any alternative treatments. You must also explain if you see a service user only for evaluative or diagnostic procedures. If the treatment is experimental rather than established and proven, you must also explain this to the service user before consent is sought. You must make sure that you get their informed consent to any treatment you do carry out. You must make a record of the person's decisions for treatment and pass this on to other members of the healthcare or social care team involved in their care.
- 10.2 In emergencies, you may not be able to explain treatment, get consent or pass on information to other members of the healthcare or social care team. However, you

should still try to do all of these things as far as you can and obtain retrospective consent as soon as practicable.

- 10.3 It is understood that consent to treatment is an ongoing process which places emphasis upon the service user's role in the continual evaluation of the treatment.
- 10.4 For service users unable to give informed consent, you must ensure that you conform to the requirements of any relevant Mental Capacity laws and other relevant guidance.
- 10.5 A person who is capable of giving their consent has the right to refuse treatment. You must respect this right. You must also make sure that they are fully aware of the risks of refusing treatment, particularly if you think that there is a significant or immediate risk to their life or the lives of others. You must give full consideration to Standard 1 of this document regarding a service user or other persons who may be in danger and you must ensure that you conform to the requirements of any relevant Mental Health laws and any other relevant guidance".
- 10.6 You must keep to your employers' procedures on consent and be aware of any guidance issued by the appropriate authority in the country in which you practise.

11 You must keep accurate records.

- 11.1 Making and keeping records is an essential part of care and you must keep records for everyone you treat or who asks for your advice or services. You must complete all records promptly. If you are using paper based records, they must be clearly written and easy to read, and you should write, sign and date all entries.
- 11.2 You have a duty to make sure, as far as possible, that records completed by students under your supervision are clearly written, accurate and appropriate.
- 11.3 Whenever you review records, you should update them and include a record of any arrangements you have made for the continuing care of the service user.
- 11.4 You must protect information in records from being lost, damaged, accessed by someone without appropriate authority, or tampered with. If you update a record, you must not delete information that was previously there, or make that information difficult to read. Instead, you must mark it in some way (for example, by drawing a line through the old information).

12 You must deal fairly and safely with the risks of infection.

- 12.1 You must not refuse to treat someone just because they have an infection. Also, you must keep to the rules of confidentiality when dealing with people who have infections. For some infections, such as sexually transmitted infections, these rules may be more restrictive than the rules of confidentiality for people in other circumstances. Confidentiality was discussed in more detail earlier in this document.
- 12.2 You must take precautions to protect your service users and yourself from infection as appropriate to the treatment you are carrying out. In particular, you should protect your service users from infecting one another. You must take precautions against the risk that you will infect someone else.
- 12.3 This is especially important if you suspect or know that you have an infection that could harm other people. If you believe or know that you may have this kind of infection, you must get medical advice and act on it. This may include the need for you to stop practising altogether, or to change your practice in some way in the best interests of protecting your service users.

13 You must limit your work or stop practising if your performance or judgement is affected by your health.

- 13.1 You have a duty to take action if your physical or mental health could be harming your fitness to practise. You should get advice from a consultant in occupational health or another suitably qualified medical practitioner and act on it. This advice should consider whether, and in what ways, you should change your practice, including stopping practising if this is necessary.

14 You must behave with honesty and integrity and make sure that your behaviour does not damage the public's confidence in you or your profession.

- 14.1 You must justify the trust that other people place in you by acting with honesty and integrity at all times. You must not get involved in any behaviour or activity which is likely to damage the public's confidence in you or your profession.

15 You must make sure that any advertising you do is accurate.

- 15.1 You must not refer to your membership of BABCP in advertising or elsewhere to imply any professional status or qualification unless you are accredited by BABCP as a Behavioural and/or Cognitive Psychotherapist.
- 15.2 Any advertising you do in relation to your professional activities must be accurate. Advertisements must not be misleading, false, unfair or exaggerated. In particular, you should not claim your personal skills, equipment or facilities are better than anyone else's, unless you can prove this is true.
- 15.3 If you are involved in advertising or promoting any product or service, you must make sure that you use your knowledge, skills and experience in an accurate and responsible way. You must not make or support unjustifiable statements relating to particular products. Any potential financial reward should not play a part in the advice or recommendations of products and services you give.

Fitness to practise

When we say someone is 'fit to practise', we mean that they have the skills, knowledge, character and health to practise CBT safely and effectively.

We consider complaints about BABCP members from the public, employers, professionals, and other people and take action to protect the public.

If the member is registered with or a member of an organisation which either statutorily or voluntarily regulates that member, then BABCP will refer any complaint to that organisation. For complaints about any other members these will be dealt with through the 'Complaints and Disciplinary Procedures' of the BABCP.

When we consider a complaint about a member, we take account of whether the standards have been met when we decide whether we need to take any action to protect the public. We will also take account of any guidance or codes of practice produced by other professional bodies and organisations.

Where BABCP considers the complaint through its procedures, the outcome can include cautioning a member, placing conditions on their membership/registration, or, in the most serious cases, removing them from membership or suspending them from the Accreditation Register. Other regulatory bodies may additionally be able to suspend or remove them from practice. Adopted AGM 16 July 2009