

Michlovitz, Beth

From: ST, SOCIALWORK
Sent: Wednesday, June 25, 2008 11:17 AM
To: Michlovitz, Beth
Subject: FW: Comment on proposed Code of Ethics for LPCs

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INDEPENDENT REGULATORY
REVIEW COMMISSION

Sandra E. Matter
Board Administrator
State Board of Social Workers, Marriage and Family Therapists and Professional Counselors
and
State Board of Examiners in Speech-Language and Hearing
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-----Original Message-----

From: Paul West [mailto:pwest1604@comcast.net]
Sent: Tuesday, June 24, 2008 2:21 PM
To: 'ST, SOCIALWORK'; 'Jewett, John H.'
Cc: 'Morgan Plant'
Subject: Comment on proposed Code of Ethics for LPCs

June 24, 2008

The Pennsylvania Counseling Association would like to submit the following comments regarding the proposed Code of Ethics for Licensed Professional Counselors published recently in the Pennsylvania Bulletin. We appreciate the work that has gone into the development of this Code of Ethics for LPCs and hope that our comments will be useful.

A.3 - It is most noticeable that the Code of Ethics of the American Counseling Association is missing from the list of referenced codes for LPC. The ACA is a formidable organization and the ACA Code of Ethics is endorsed by the Pennsylvania Counseling Association (PCA). Members of PCA are bound to the ACA Code of Ethics. It is difficult to accept the NAADAC Code of Ethics while rejecting ACA when NAADAC endorses the practice of non-graduate degreed individuals as certified counselors.

B.1.i - The proposed code does not prohibit an LPC with a doctorate in a non-counseling area from representing themselves as having a doctorate. An advanced graduate degree linked to the LPC credential should be limited to one in the clinical disciplines related to the counseling profession.

B.1.iii - The definition of "maintaining appropriate standards" is very weak and permits quite a bit of latitude. There is nothing in these proposed codes that requires the LPC to provide effective therapy, therapy based on rigorous research methodologies, or therapy based on an empirical or scientific foundation.

B.2.iv - This standard challenges the very essence of autonomy, a fundamental principle of all codes of ethics. The real question is whether LPCs should accept individuals who do not voluntarily agree to enter into a therapeutic relationship. There is also nothing in these proposed codes that prevent clients from being "warehoused" or kept in treatment when there

is no obvious therapeutic benefit for the client.

This code also suggests that releases of information can be made without the involuntary client's written consent. It is recommended that the Board review the federal standards set forth in 42CFR- Part 2 which specifically requires certain conditions to be met before information can be released from D/A client records without a written consent.

It should be noted that discussion of this particular code resulted in different interpretations from those reviewing the codes. Such discrepancy suggests that the code may be confusing or, at least, open to multiple interpretations.

B.5 - This code does not include the assessment of progress in therapy and a decision to terminate treatment based on lack of client progress or when continued services could cause harm. There also needs to be provisions for termination when clients fail to meet the financial commitments for receiving services. Stronger language needs to be introduced to prevent abandonment.

B.6 - There is nothing in the codes that deal with limitations on sexual or romantic relationships with current or former clients, family members of clients, client partners, student, or supervisees. Most mental health association Codes of Ethics forbid such relationships. Some Codes of Ethics permit such relationships after a period of time. This issue needs to be clearly spelled out.

B.7 - Gender identity should be added to the list.

B.7 and B.8 - Although the proposed code forbids specific damaging behavior, there is nothing in the proposed code that requires LPCs to proactively be sensitive to diversity and competent in working with diverse clients. This would certainly impact on assessment and on the delivery of services. Multicultural competencies have been developed and should be followed by LPCs. Most professional mental health associations now require multicultural competence beyond simply not discriminating or behaving badly.

E. - Nothing in the codes addresses the need for LPCs to notify colleagues of a change in role, if this occurs, when an LPC engages in research in an agency or practice with multiple practitioners.

E.2.g.i - This part is missing and appears to have been skipped.

E.2.g.ii - Prohibition of Deception - Stating that concealment and deception may not be included isn't reflective of best practice and/or government regulation. Even though deception and concealment don't occur in most research, it is problematic to say that it can't occur. The appropriate ethical code stance should be that when deception is part of research, it must have a clear and beneficial rationale, it cannot cause harm to the participant, and there must be a written procedure for debriefing the participant about the nature of the deception and purpose of the research.

F - The codes have not addressed the issue of termination of clients for non-payment of fees. It is unreasonable to place this potentially financial burden on LPCs. The codes should allow for discharge for non-payment or specifically allow for transfers in the event a client can no longer afford to pay for services.

G - There is nothing in the codes that address the security of records.

Other issues:

1. LPCs should be required to assess clients for the inclusion in group counseling settings. Clients should not be required to attend group in situations when such services may cause harm. Clients should be given the choice to participate in group counseling and should not suffer negative consequences should they decline.

2. There is nothing in the codes that require LPCs to follow the code of ethics when common practices in an agency or counseling practice may be in conflict.

3. There is nothing in the proposed Code of Ethics that requires the LPC to perform a comprehensive assessment of each client and to develop treatment strategies based on the outcomes of that assessment. The code opens the possibility of clients being admitted to services based on financial considerations of an agency or practice rather than if the services offered by the agency or practitioner actually met the needs of the client.

There is also nothing in the codes that requires LPCs to be competent in the use and interpretation of instruments they use. Also there is no mention of any requirement for LPCs to utilize current instruments.

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PCA President