



BOARD OF REGISTRATION FOR SOCIAL WORKERS
in British Columbia

CODE OF ETHICS

and

STANDARDS OF PRACTICE

General

CODE OF ETHICS

CODE OF ETHICS

1. A social worker shall maintain the best interest of the client as the primary professional obligation.
2. A social worker shall respect the intrinsic worth of the persons served in professional relationships with them.
3. A social worker shall carry out professional duties and obligations with integrity and objectivity.
4. A social worker shall have and maintain competence in the provision of social work services to a client.
5. A social worker shall not exploit the relationship with a client for personal benefit, gain or gratification.
6. A social worker shall protect the confidentiality of all professionally acquired information by disclosing such information only when required or allowed by law to do so or when clients have consented to disclosure.
7. A social worker who engages in another profession, occupation, affiliation or calling shall not allow these outside interests to affect the social work relationship with the client, professional judgment, independence and/or competence.
8. A social worker shall not provide social work services or otherwise behave in a manner that discredits the profession of social work or diminishes the public's trust in the profession.
9. A social worker shall promote service, program, and/or agency practices and policies that are consistent with this Code of Ethics and the Standards of Practice of the Board of Registration for Social Workers in British Columbia.
10. A social worker shall promote excellence in the profession.
11. A social worker shall advocate change in the best interest of the client and for the overall benefit of society.

STANDARDS OF PRACTICE

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Introduction

As the regulatory body for the practice of social work in British Columbia, the Board of Registration for Social Workers (BRSW) establishes standards of practice for social work. This is one of the key resources the Board has to assist in meeting its mandate of protecting the public interest.

The purposes of standards of practice are to:

- set the minimum acceptable level of practice,
- provide guidelines for social workers to assess their own practice and develop high standards of practice,
- establish criteria for the assessment of complaints about the practice of social work, and
- inform the public about reasonable expectations of social work practice.

The BRSW adopts general standards of practice which apply to all areas of social work, as well as standards which apply to specific fields of practice.

These written standards articulate specific aspects of generally accepted standards of practice. This is based on a body of knowledge developed and acquired through a combination of formal social work education, continuing education and academic literature, as well as experience in professional practice.

In some instances the standards of practice for specific fields may identify knowledge which is relevant for the field, in addition to knowledge necessary for basic social work practice. Specific standards of practice should be read as a whole along with the general standards of practice. In all areas of practice, social workers are expected to comply with the *Social Workers Act*, the Code of Ethics and Standards of Practice, both general and specific.

No document can ever address all situations arising in practice. Fundamental to good practice is the use of professional judgment in assessing how to apply knowledge and standards to specific situations.

Acknowledgements

This Standards of Practice document is based on the Code of Ethics and Standards of Practice Handbook (1st Edition, 2000) published by the Ontario College of Social Workers and Social Service Workers. This in turn was based on the Professional Practice and Conduct Handbook published by the Ontario College of Certified Social Workers.

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SCOPE OF PRACTICE

These Standards of Practice apply to the profession of social work.

The scope of practice of the profession of social work means the assessment, diagnosis, treatment and evaluation of individual, interpersonal and societal problems through the use of social work knowledge, skills, interventions and strategies, to assist individuals, dyads, families, groups, organizations and communities to achieve optimum psychosocial and social functioning and includes, without limiting the generality of the foregoing, the following:

- a) The provision of assessment, diagnostic, treatment, counselling and evaluation services within a relationship between a social worker and client;
- b) The development, promotion, management, administration, delivery and evaluation of human service programs, including that done in collaboration with other professionals;
- c) The provision of advocacy services;
- d) The provision of professional supervision to a social worker, social work student or other supervisee;
- e) The provision of consultation services to other social workers or professionals in relation to the activities described in paragraph a) above;
- f) The development, promotion, implementation and evaluation of social policies aimed at improving social conditions and equality;
- g) The conduct of research or provision of education regarding the practice of social work, as defined in paragraphs a) to f) above and h) below; and
- h) Any other activities recognized by the Board of Registration for Social Workers.

RELATIONSHIP WITH CLIENTS

Principle I

The social work relationship, as a component of professional service, is a mutual endeavour between active participants providing and using social work expertise. Clients and social workers jointly address relevant social and/or personal problems of concern to clients. The foundation of this professional orientation is the belief that clients have the right and capacity to determine and achieve their goals and objectives. The social work relationship is grounded in and draws upon theories of the social sciences and social work.

Interpretation

Clients and client systems with whom social workers are involved include individuals, couples, families, groups, communities, organizations and government. The following fundamental practice principles arise from basic professional values. Registrants with the Board of Registration for Social Workers (BRSW) adhere to these principles in their relationships with clients.

- 1.2 Social workers and clients participate together in setting and evaluating goals. A purpose for the relationship between social workers and clients is identified.
 - 1.2.1 Goals for relationships between social workers and clients include the enhancement of clients' functioning and the strengthening of the capacity of clients to adapt and make changes.
- 1.3 Social workers observe, clarify and inquire about information presented to them by clients.
- 1.4 Social workers respect and facilitate self-determination in a number of ways including acting as resources for clients and encouraging them to decide which problems they want to address as well as how to address them.¹
- 1.5 Although not compelled to accept clients' interpretation of problems, social workers demonstrate acceptance of each client's uniqueness.
- 1.6 Social workers are aware of their own values, attitudes and needs and how these impact on their professional relationships with clients.
- 1.7 Social workers distinguish their own needs and interests from those of their clients to ensure that, within professional relationships, clients' needs and interests remain paramount.
- 1.8 Social workers employed by organizations maintain an awareness and consideration of the purpose, mandate and function of those organizations and how these impact on and limit professional relationships with clients.

¹ Limitations to self-determination may arise from clients' incapacity for positive and constructive decision-making, from law and from agency mandate and function.

COMPETENCE AND INTEGRITY

Principle II

Social workers maintain competence and integrity in their practice and adhere to the standards in the BRSW Code of Ethics and Standards of Practice.

Interpretation: Competence

Social workers are committed to ongoing professional development and maintaining competence in their practice.

2.1 Social workers are responsible for being aware of the extent and parameters of their competence and their professional scope of practice and limit their practice accordingly. When a client's needs fall outside the social worker's usual area of practice, the social worker informs the client of the option to be referred to another professional. If, however, the client wishes to continue the professional relationship with the social worker and have the social worker provide the service, the social worker may do so provided that:

- a) he or she insures that the services he or she provides are competently provided by seeking additional supervision, consultation and/or education; and
- b) the services are not beyond the social worker's professional scope of practice.

Recommendations for particular treatment services, referrals to other professionals or a continuation of the professional relationship are guided by the client's interests as well as the social worker's clinical judgment and knowledge.

2.2 Social workers remain current with emerging social work knowledge and practice relevant to their area of professional practice. Social workers demonstrate their commitment to ongoing professional development by engaging in any continuing education and continuing competence measures required by the Board of Registration for Social Workers in BC.

2.3 Social workers maintain current knowledge of policies, legislation, programs and issues related to the community, its institutions and services in their areas of practice.²

2.4 Social workers ensure that any professional recommendations or opinions they provide are appropriately substantiated by evidence and supported by a credible body of professional social work knowledge.^{3, 4}

2.5 As part of maintaining competence and acquiring skills in social work, social workers engage in the process of self review and evaluation of their practice and seek consultation when appropriate.

² It is the social worker's responsibility to remain knowledgeable about legislation that may govern their field of practice such as, but not limited to, the *Child, Family and Community Service Act*, the *Mental Health Act*, the *Infants Act*, the *Freedom of Information and Protection of Privacy Act*, the *Personal Information Protection Act* and the *Health Care (Consent) and Care Facility (Admission) Act*.

³ "Evidence" refers to information tending to establish facts. For social workers, evidence can include, but is not limited to, direct observation, information collected in clinical sessions and professional meetings, collateral information, information from documents and information gathered from the use of clinical tools (e.g. questionnaires, diagnostic assessment measures, rating scales).

⁴ The phrase "body of professional social work knowledge" relates to both theoretical and practical understanding. A body of knowledge can be attained through education, clinical experience, consultation and supervision, professional development and a review of relevant research and literature. Professional social work knowledge draws upon the knowledge base of other professions including sociology, psychology, anthropology, medicine, law and economics as well as its own distinct body of knowledge.

Interpretation: Integrity

Social workers are in a position of power and responsibility with respect to all clients. This necessitates that care be taken to ensure that all clients are protected from the abuse of such power during and after the provision of professional services.

Social workers establish and maintain clear and appropriate boundaries in professional relationships for the protection of clients. Boundary violations include sexual misconduct and other misuse and abuse of the social worker's power.

- 2.6 Social workers do not engage in professional relationships that constitute a conflict of interest or in situations in which they ought reasonably to have known that the client would be at risk in any way. Social workers avoid or declare conflict of interest situations. Social workers do not provide a professional service to the client while the social worker is in a conflict of interest. (See also 3.7)
- 2.7 Social workers do not have sexual relations with clients. (See footnote 24 under Principle VIII Sexual Misconduct.) In other professional relationships, social workers do not have sexual relations with any person where these relations, combined with the professional relationship, would create a conflict of interest.
- 2.8 Social workers do not use information obtained in the course of a professional relationship and do not use their professional position of authority to coerce, improperly influence, harass, abuse or exploit a client, former client, student, trainee, employee, colleague, research subject or volunteer.
- 2.9 Social workers do not solicit or use private or confidential information from clients to acquire, either directly or indirectly, advantage, material benefits or gratification.
- 2.10 When a complaint investigation is underway or a matter has been referred for a hearing, social workers cooperate fully with all policies and procedures of the Board of Registration for Social Workers and conduct themselves in a manner which demonstrates respect for both the complainant and the Board of Registration for Social Workers.⁵
- 2.11 Social workers do not engage in the practice of social work
 - a) while under the influence of any substance, or
 - b) while suffering from illness or dysfunctionwhich the social worker knows or ought reasonably to know impairs the social worker's ability to practice.
- 2.12 Social workers do not misrepresent professional qualifications, education, experience or affiliation. (See Principle VI Fees and Principle VII Advertising)
- 2.13 In the practice of social work, social workers avoid conduct which could reasonably be perceived as reflecting negatively on the profession of social work.
- 2.14 Social workers promote social justice and advocate for social change on behalf of their clients. Social workers are knowledgeable and sensitive to cultural and ethnic diversity and to forms of social injustice such as poverty, discrimination and imbalances of power that exist in the culture and that affect clients. Social workers strive to enhance the capacity of clients to address their own needs and problems in living. Social workers assist clients to access necessary information, services and resources wherever possible. Social workers promote and facilitate client participation in decision making.
- 2.15 If there is a conflict between BRSW Standards of Practice and a social worker's work environment, the social worker's obligation is to the Code of Ethics and the Standards of Practice.

⁵ Social workers are cognizant of their influential position with respect to witnesses or complainants in complaint and discipline proceedings.

RESPONSIBILITY TO CLIENTS

Principle III

Social workers ensure that professional services are provided responsibly to those persons, groups or organizations seeking their assistance.

Interpretation

- 3.1 Social workers provide clients with accurate and complete information regarding the extent, nature and limitations of any services available to them.
- 3.2 Social workers deliver client services and respond to client queries, concerns and/or complaints in a timely and reasonable manner.
- 3.3 Social workers do not solicit their employers' clients for private practice.^{6, 7}
- 3.4 Social workers do not discriminate against anyone based on race, ethnicity, language, religion, marital status, gender, sexual orientation, age, ability, economic status, political affiliation or national origin.⁸
- 3.5 Social workers assist potential clients to obtain other services if they are unable or unwilling, for appropriate reasons, to provide the requested professional help.^{9, 10}
- 3.6 Social workers inform clients of foreseeable risks as well as rights, opportunities and obligations associated with the provision of professional services.

⁶ The term "employer" also includes a person or organization with whom the social worker has an independent service contract.

⁷ Social workers may accept referrals from their employers.

⁸ Social workers adhere to the *British Columbia Human Rights Code* and the *Charter of Rights and Freedoms* in the provision of services.

⁹ Appropriate reasons for refusing to provide service include but are not limited to:

- i) complying with the potential client's request for service would require the social worker to violate ethical and legal requirements including, but not limited to, the Code of Ethics, the Standards of Practice, the *Criminal Code of Canada*; the *British Columbia Human Rights Code* and/or the *Charter of Rights and Freedoms*;
- ii) complying with the potential client's request would violate the social worker's values, beliefs and traditions to the extent that the social worker would not be able to provide appropriate professional service;
- iii) the social worker is aware of extenuating circumstances (e.g. a planned absence from the office, serious health problems, relocation of practice) that would make compliance with the potential client's request for service impossible and/or not in the potential client's best interests;
- iv) the potential client is unable or unwilling to reimburse the social worker or the social worker's employer for services rendered, wherever such reimbursement is both appropriate and required as a condition of providing service;
- v) the potential client has repeatedly, and without adequate explanation, cancelled or changed the interview or meeting time to the extent that the social worker experiences or believes that financial hardship and/or service disruption will occur; and
- vi) the potential client behaves in a threatening or abusive manner such that the social worker believes that the safety of the social worker or anyone with whom the social worker has a personal or professional relationship would be in jeopardy.

¹⁰ When a client is refused further service, the client should be provided with an explanation.

- 3.7 Social workers avoid conflicts of interest and/or dual relationships with clients or former clients, students, volunteers, research subjects, employees and supervisees that could impair the social worker's professional judgment or increase the risk of exploitation or harm to clients.¹¹
- 3.8 In a situation where a personal relationship does occur between the social worker and a client or former client, it is the social worker, not the client or former client, who assumes full responsibility for demonstrating that the client or former client has not been exploited, coerced or manipulated, intentionally or unintentionally.
- 3.9 Social workers may provide services and/or products so long as the provision of these services and/or products are relevant to the scope of practice and conform to BRSW standards. Social workers do not provide a service and/or product that the social worker knows or, ought reasonably to know, is not likely to benefit the client.
- 3.10 Social workers terminate professional services to clients when such services are no longer required or requested. It is professional misconduct to discontinue professional services that are needed unless:
 - a) the client requests the discontinuation,
 - b) the client withdraws from the service,
 - c) reasonable efforts are made to arrange alternative or replacement services,
 - d) the client is given a reasonable opportunity to arrange alternative or replacement services, or
 - e) continuing to provide the services would place the social worker at serious risk of harm and in the circumstances described in a), b), c) or d) the social worker makes reasonable efforts to hold a termination session with the client.
- 3.11 Social workers who anticipate the termination or interruption of service to clients notify clients promptly and arrange the termination, transfer, referral or continuation of service in accordance with clients' needs and preferences.
- 3.12 Where appropriate, social workers advocate for and/or with clients and inform clients of any action taken and its outcome. Social workers adhere to Principle V Confidentiality of the Standards of Practice when providing advocacy services.¹²
- 3.13 Social workers may provide appropriate services as a courtesy without remuneration so long as these services adhere to the BRSW Code of Ethics and Standards of Practice and do not constitute a conflict of interest.

¹¹ "Dual relationship" is defined as a situation in which a social worker, in addition to his/her professional relationship, has one or more other relationships with the client, regardless of whether this occurs prior to, during or following the provision of professional services. A dual relationship does not necessarily constitute a conflict of interest; however, where dual relationships exist, there is a strong potential for conflict of interest and there may be an actual or perceived conflict of interest. Relationships beyond the professional one include, but are not limited to, those in which the social worker receives a service from the client, the social worker has a personal, familial or business relationship with the client, or the social worker provides therapy to students, employees or supervisees.

¹² "Advocacy" is defined as, "The act of directly representing or defending others; in social work, championing the rights of individuals or communities through direct intervention or through empowerment." The Social Work Dictionary 2nd edition, Robert L. Baker, 1991. See Code of Ethics number 11.

THE SOCIAL WORK RECORD

Principle IV

The creation and maintenance of records by social workers is an essential component of professional practice. The process of preparation and organization of material for the record provides a means to understanding the client and planning the social work intervention. The purpose of the social work record is to document services in a recognizable form in order to ensure the continuity and equality of service, to establish accountability for and evidence of the services rendered, to enable the evaluation of service quality and to provide information to be used for research and education. Social workers ensure that records are current, accurate, contain relevant information about clients and are managed in a manner that protects client privacy.

Interpretation: Record Content and Format

- 4.1 Social workers keep systematic, dated, and legible records for each client or client system served.
 - 4.1.1 Social work records include any or all of the following: narrative reports (handwritten, typed or electronic), progress notes, checklists, correspondence, minutes, process logs, journals or appointment records, films and audio or video tapes. The tools or data used by the social worker in developing a professional opinion may or may not be included in the record. Such tools may be personal notes, memos or messages, test results, sociograms, genograms, etc. Once placed in the record, however, they become an integral part of that record. If they are kept separate from the record, the social worker observes the same standards with respect to confidentiality, security and destruction as with the social work record.
 - 4.1.2 An accurate record will:
 - a) Document the client's situation/problem exactly and contain only information that is appropriate and useful to the understanding of the situation and the management of the case;
 - b) Report impartially and objectively the factors relevant to the client's situation. The record clearly distinguishes the social worker's observations and opinions from the information reported by the client;
 - c) Be easily understandable, avoiding vague, unclear or obscure language and symbols;
 - d) Identify corrections;
 - e) Be free of prejudice and discriminatory remarks;
 - f) Identify sources of data.
- 4.2 The record reflects the service provided and the identity of the service provider.
- 4.3 Social workers document their own actions. Social workers do not sign records or reports authored by any other person. The exception is the co-signing of records or reports when the social worker is acting in a supervisory capacity.
- 4.4 Information is recorded when the event occurs or as soon as possible thereafter.
- 4.5 Recorded information conforms with accepted service or intervention standards and protocols and is in a format that facilitates the monitoring and evaluation of the effects of the service/intervention.

- 4.6 Information in the social work record with respect to each client includes not less than:
- a) Identifying information regarding the recipient of services (individual, family, couple, group, agency, organization, community);
 - b) In the case of clinical practice, identifying information includes:
 - i) name, address, telephone number, date of birth of the client(s) and
 - ii) where indicated in risk situations, name, address, and telephone number of a person to be contacted in case of emergency;
 - c) In the case of non-clinical practice, identifying information includes:
 - i) name, address, telephone number of the client(s);
 - ii) name, address, telephone number(s) of the main contact person or position, if different from i); and
 - iii) sponsors, funders and accountability;
 - d) The date, initiator and purpose of the social work referral;
 - e) The date, initiator, purpose and, if significant, the setting of the first professional encounter with the client;
 - f) Where applicable, the key elements of the contract or working agreement, namely: client, contracted services, provider of services, fee, reimbursement schedule and time period for completion of services;
 - g) The time period of involvement if not specified in f);
 - h) The date of completion/termination, and, if significantly different from f), an explanation for the difference;
 - i) Particulars of the social work process, as applicable:
 - i) the history obtained by the social worker;
 - ii) assessment, diagnosis, formulation and plan;
 - iii) treatment and other interventions, e.g. facilitation, advocacy, transfer of skills;
 - iv) outcome or results and evaluation;
 - v) referrals made by the social worker;
 - vi) recommendations; and
 - vii) other services, e.g. verbal and/or written reports/briefs/analyses, research studies and/or their individual components, presentations/speeches/lectures, management related services, stakeholder consultations and professional opinions.
 - j) Consents, releases or authorizations pertaining to the intervention or the communication of information about the client;
 - k) Fees and charges administered, if any.
- 4.7 Social workers may use a documentation by exception system provided that the system permits the total record to capture the minimum content as set out in 4.6.
- 4.8 Social workers do not make statements in the record or in reports based on the record, or issue or sign a certificate, report or other document that the social worker knows or ought reasonably to know are false, misleading, inaccurate or otherwise improper.
- 4.9 Social workers preserve the integrity of client records. If a client disagrees with the accuracy of a record and wishes the record altered, the social worker may incorporate into the record a signed statement by the client specifying the disagreement and the client's correction.

Interpretation: Record Maintenance

- 4.10 Social workers employed by an organization acquire and maintain a thorough understanding of the organization's policies with regard to the retention, storage, preservation and security of records. Social workers in private practice establish clear policies relating to record retention, storage, preservation and security.
- 4.11 Social workers take necessary steps to protect the confidentiality and security of paper records, faxes and electronic records.
- 4.12 Client records, whether they are paper files or electronic files such as computer diskettes, are kept in an area that is not accessible to persons who have no legitimate interest in the records and where the privacy of the records may be secured by lock and key.
- 4.13 When sending faxes that contain client information, the social worker ensures that the information is marked confidential and that the information has been received by the people for whom it was intended.
- 4.14 An electronic system containing social work records has the following security features:
- a) In the event of a shared system, the social worker has a private access code or password that provides reasonable protection against unauthorized access;
 - b) The system maintains an audit trail that:
 - i) records the date and time of each entry of information for each client;
 - ii) indicates any changes in the recorded information; and
 - iii) preserves the original content of the recorded information when changed or updated;
 - c) The system allows for the recovery of files or otherwise provides reasonable protection against loss of, damage to, and inaccessibility of information;
 - d) The system provides for a paper print-out of the record.
- 4.15 Social workers ensure that each client record is stored and preserved in a secure location for a period of time not less than seven years from the date of the last entry. In the case of a client who is a minor, records should be kept for not less than seven years past the age of majority of the client. Longer periods of storage time may be defined by the policies of a social worker's employing organization or by the policies of a self-employed social worker. Such policies should be developed with a view to the potential future need for the record.¹³
- 4.16 Social workers who cease private practice may
- a) maintain their client records in accordance with standard 4.15 or
 - b) make arrangements to transfer the records to another registered social worker and advise their clients of the future location of their records. The social worker to whom such records have been transferred complies with the principles regarding retention, storage, preservation and security with respect to the transferred records.
- 4.17 Client records may be destroyed following the time frames outlined in standard 4.15. Social workers dispose of record contents in such a way that ensures that the confidentiality of the information is not compromised.

¹³ Examples of situations in which records may be retained for longer periods include cases such as sexual abuse, accidents involving minors and situations where litigation may be ongoing or may arise in the future.

- 4.18 When a social worker is required to submit client records to court, the social worker must take reasonable steps to retain a copy of the record and to arrange the return of the record as soon as possible.

Interpretation: Access and Disclosure

- 4.19 Social workers employed by an organization acquire and maintain an understanding of the organization's policies and government legislation regarding access to confidential client information. Such policies pertain to access requests by the clients themselves as well as by other parties. Self-employed social workers establish clear policies regarding access to and disclosure of confidential client information.
- 4.20 Social workers inform clients, upon request, of their policies regarding access to information. Social workers furthermore inform clients early in their relationship of any limits of record confidentiality.
- 4.21 Social workers provide clients or their authorized representatives with reasonable, supervised access to their records or such part or parts of the clients' records as is reasonable in the circumstances. Such access may include providing the client with a copy of a segment of his or her record or of the record in its entirety subsequent to the client's and the social worker's joint review of the record's contents. The client has the right to receive appropriate explanations by the social worker of the content of the social worker's reports concerning him or her.
- 4.22 A client's general access to information contained in the record may be restricted for valid reasons. The social worker may deem that such access would be extremely detrimental to the client. In such cases, the social worker informs the client of the reason for refusal of access and of the recourse available to the client if he or she disagrees. When the work has involved different members of a family, group or community, and access to a record could therefore mean divulging confidential information received from others, or when recorded language could be misunderstood and prejudicial to one of those members, access may also be restricted. In such instances, social workers allow individuals to review recorded information that pertains to those individuals only.
- 4.23 When authorized in writing by clients or their authorized representatives, social workers release information from the record to third parties within a reasonable time. The authorization must specify:
- a) the information that is to be released, for example a partial record, the entire record, or summary of the social worker's contact with the client;
 - b) the party or parties to whom the information is to be released; and
 - c) the term of validity of the authorization.
- 4.24 Social workers may release information from the record to third parties without the client's authorization only if disclosure is required or authorized by law or if the social worker believes, on reasonable grounds, that the disclosure is essential to the prevention of physical injury to self or others.
- 4.25 Prior to releasing information from a record that pertains to more than one client, for example a couple, family, group, community agency, government department or other organization/business, social workers receive authorization from each individual client.
- 4.26 Social workers who are served with a formal notice or subpoena to produce client records before a court and who are of the opinion that disclosure would be detrimental to the client, should themselves, or through legal counsel, advocate for non-disclosure to the court.

- 4.27 Social workers to whom another social worker's client records have been transferred, comply with the aforementioned standards regarding access and disclosure with respect to the transferred records.
- 4.28 Social workers may permit client records to be used in a non-identifying manner for the purpose of research, teaching, or general evaluation of service delivery. If the removal of identifying information does not adequately protect client's anonymity, for example, where clients' roles/activities are highly specialized and/or publicized, or where confidentiality is compromised in cases of consultation, research or policy analysis, the social worker does not permit access to the record for these purposes.

CONFIDENTIALITY

Principle V

Social workers respect the privacy of clients by holding in strict confidence all information about clients. Social workers disclose such information only when required or authorized by law to do so or when clients have consented to disclosure.

Interpretation

Social workers shall not disclose confidential information concerning or received from clients, subject to any exceptions contained in the following standards.

- 5.1 When social workers are employed by an agency or organization, BRSW standards of confidentiality may conflict with the organization's policies and procedures concerning confidentiality. Where there is a conflict, BRSW standards take precedence.¹⁴
- 5.2 When in a review, investigation or proceeding under the *Social Workers Act* in which the professional conduct, competency or capacity of a social worker is in issue, the social worker may disclose such confidential information concerning or received from a client as is reasonably required by the social worker of the BRSW for the purposes of the review, investigation or proceeding, without the client's authorization. Social workers do not divulge more information than is reasonably required.
- 5.3 When disclosure is required or authorized by law or by order of a court, social workers do not divulge more information than is necessary.
- 5.4 Social workers wishing to use collection agencies or legal proceedings to collect unpaid fees may release, in the context of legal proceedings, only the client's name, the contract for service, statements of accounts and any records related to billing. This release would not extend to the content of the services provided.
- 5.5 Social workers inform clients of the parameters of information to be disclosed and make reasonable efforts to advise clients of the possible consequences of such disclosure.
 - 5.5.1 In clinical practice the social worker informs the client of at least the following:
 - a) who wants the information (name, title, employer and address);
 - b) why the information is desired;
 - c) how the receiving party plans to use the information;
 - d) if the receiving party may pass the information on to yet a third party without the client's consent;
 - e) exactly what information is to be disclosed;
 - f) the repercussions of giving consent or refusing permission for the disclosure;
 - g) the expiration date of the consent;
 - h) how to revoke the consent.
- 5.6 Social workers do not disclose the identity of and/or information about a person who has consulted or retained them unless:
 - a) disclosure is required by law or by a court, or
 - b) the social worker has reasonable grounds to believe that the disclosure is necessary to prevent serious bodily harm to an identifiable person or group of persons, and in such circumstances,

¹⁴ See Code of Ethics, "A social worker shall maintain the best interest of the client as the primary professional obligation."

the social worker shall disclose only such information as is necessary to prevent the prospective harm.¹⁵

- 5.7 In clinical practice, social workers have clients sign completed consent forms prior to the release of information. A separate consent form is required to cover each authorization for releasing client information. In urgent circumstances, a verbal consent by the client to the disclosure of information may constitute proper authorization. The social worker should document that this consent was obtained.
- 5.8 Social workers make reasonable efforts to ensure that the information disclosed is pertinent and relevant to the professional service for which clients have contracted.
- 5.9 Social workers inform clients early in their relationship of the limits of confidentiality of information. In clinical practice, for example, when social work service is delivered in the context of supervision or multi-disciplinary professional teams, social workers explain to clients the need for sharing pertinent information with supervisors, allied professionals and para-professionals, administrative co-workers, social work students, volunteers and appropriate accreditation bodies.¹⁶ (See also Principle IV The Social Work Record.)
- 5.10 Social workers in non-clinical practice distinguish between public and private information related to their clients. Public information, as defined below, may be disclosed in the appropriate circumstances.
 - 5.10.1 'Public information' is any information about clients and/or their activities that is readily available to the general public and the disclosure of which could not harm the client. When in doubt, the social worker obtains permission from the client or a duly authorized representative before disclosing or otherwise using such information.¹⁷
 - 5.10.2 When working with community groups, government agencies and other organizations, the social worker keeps confidential any information about the personal lives, personalities and personal behaviour of the individuals involved.
 - 5.10.3 The social worker also keeps confidential any other sensitive information about such clients, including human resources, financial, managerial, strategic and/or politically sensitive material, the disclosure of which could harm the client.
- 5.11 Social workers obtain clients' informed consent before photographing, audio or video taping or permitting third party observation of clients' activities.¹⁸ Where case scenarios are presented for research, educational or publication purposes, client confidentiality is ensured through the alteration and disguise of identifying information. (See also 4.27)
- 5.12 Social workers may use public information and/or non-identifying information for research, educational and publication purposes.
- 5.13 Social workers are aware of the distinction between consultation and supervision as it pertains to sharing client information. In consultation, clients are not identified.

¹⁵ In *Smith v. Jones* the Supreme Court stated that psychological harm may constitute serious bodily harm.

¹⁶ Social workers in clinical or non-clinical practice anticipate circumstances which may limit confidentiality. Clear discussion of these limits and contracting for confidentiality with the team, group or community should be undertaken. Individual clients should be aware, however, that there is no legal recourse if their confidentiality is violated by another group member.

¹⁷ For example, in non-clinical practice social workers should obtain the client's verbal permission before:

- a) publishing reports about their work with the client;
- b) referring to their work with the client in their advertising;
- c) speaking with media, funders, potential funders and other individuals/groups about the organization; and
- d) bringing guests, observers, or media to meetings involving the client.

¹⁸ Exceptions may be allowed under law, for example, in child abuse investigations.

FEES

Principle VI

When setting or administering fee schedules for services performed, social workers inform clients fully about fees, charges and collection procedures.

Interpretation

Social workers do not charge or accept any fee which is not fully disclosed.

- 6.1 Social workers seek an agreement, preferably in writing, at the time of contracting for service with a client. This agreement shall deal with the provision of standards 6.2 to 6.6 inclusive.
- 6.2 Social workers explain in advance or at the commencement of a service the basis of all charges, giving a reasonable estimate of projected fees and disbursements, pointing out any uncertainties involved, so that clients may make informed decisions with regard to using a social worker's services.¹⁹
- 6.3 Social workers discuss and renegotiate the service contract with clients when changes in the fee schedule are anticipated.
- 6.4 Social workers ensure that fee schedules clearly describe billing procedures, reasonable penalties for missed and cancelled appointments or late payment of fees, the use of collection agencies or legal proceedings to collect unpaid fees and third party fee payments.²⁰ (See also 5.4)
- 6.5 Social workers may reduce, waive or delay collecting fees in situations where there is financial hardship to clients, or they may refer clients to appropriate alternative agencies so that clients are not deprived of professional social work services.^{21, 22}
- 6.6 Social workers do not charge fees on the basis of material or financial benefits accruing to clients as a result of services rendered or fees which are excessive in relation to the service performed.
- 6.7 Social workers in clinical practice or in charitable or publicly funded settings do not accept or give commissions, rebates, fees, other benefits or anything of value for receiving or making a referral of a client to or from another person.

¹⁹ These charges may be based on such factors as the amount of time and effort required and spent, the complexity of the matter and whether a special skill, expertise or service has been required and provided.

²⁰ Interest on late payments should be expressed as an annualized rate.

²¹ Social workers who accept barter payments are aware of the potential conflict of interest and taxation issues that this style of payment may create. Social workers avoid this method of payment if it constitutes a conflict of interest.

²² Social workers are not expected to reduce their fees unless required to do so by the policy of the agency by whom they are employed. Social workers may request that the client notify the social worker immediately if any circumstances arise that may interfere with the normal payment of fees.

ADVERTISING

Principle VII

Advertising is intended to inform and educate the public about available social work services. Social workers ensure that advertisements are compatible with the standards and ethics of the social work profession.

Interpretation

- 7.1 Social workers may advertise their services through public statements, announcements, advertising media and promotional activities provided that these:
 - a) are not false or misleading, and that any factual information is verifiable;
 - b) do not bring the profession or BRSW into disrepute;
 - c) do not compare services with other social workers;
 - d) do not include any endorsements or testimonials;
 - e) do not display any affiliation with an organization or association in a manner that falsely implies that organization's sponsorship or certification;
 - f) do not claim uniqueness or special advantage unsupported by professional or scientific evidence;
 - g) are in keeping with standards of good taste and discretion; and
 - h) include the designation Registered Social Worker or RSW.
- 7.2 Social workers may advertise fees charged for their services provided that advertised fees clearly relate to proposed services and include disclosure of possible limits, uncertainties or circumstances whereby additional fees may be charged. (See also Principle VI Fees)
- 7.3 Social workers do not solicit prospective clients in ways that are misleading, that disadvantage fellow social workers or that discredit the profession of social work.
- 7.4 Social workers' education, training and experience, as well as areas of competence, professional affiliations and services are described in an honest and accurate manner.^{22, 23}
 - 7.4.1 Social workers cite educational degrees only when they have been received from a university approved by the Board of Registration for Social Workers.
 - 7.4.2 Social workers may represent themselves as specialists in certain areas of practice only if they can provide evidence of specialized training, extensive experience or education.
 - 7.4.3 Social workers do not make false, misleading or exaggerated claims of efficacy regarding past or anticipated achievements with respect to clients, scholarly pursuits or contributions to society.
 - 7.4.4 Social workers correct, wherever possible, false, misleading or inaccurate information and representations made by others concerning social workers' qualifications or services.

²² The following alternatives are acceptable forms for individual vocational designation on business cards, letterhead stationery, forms, business telephone listings, directories, signs and identification of business premises, etc.:

- a) Social workers identify themselves by using the designation "RSW" following their names. Social workers may add an optional one line description of the social worker's area of limited practice or specialty; or
- b) "RSW" following the highest academic degree or diploma;
- c) where a doctoral degree has been earned, either the degree or the prefix "Doctor" or "Dr.", but not both, in addition to the designations in either clauses a) or b);
- d) where the social worker is a consultant or advisor in the public or private sector, the phrase "Consultant in..." or "Advisor in...", when contained in professional materials, is used only in connection with such position and as an addition to the designation in either clauses a) or b); and

where the social worker is an employee in the public or private sector, such affiliation with an accurate and appropriate indication of rank, title or nature of function may be displayed on a professional card and used only in connection with such employment in addition to the designation in clauses a) or b).

²³ Social workers organized within a business, partnership or corporation may use one of the following acceptable alternatives:

- a) a list of the names of the business partners, with social workers designated as in Footnote 22;
- b) a partnership title containing:
 - i) the surnames or full names of two or more actual partners; or
 - ii) where there are three or more actual partners, the surnames or full names may be used with the term "and Associate" or "and Associates" as appropriate;
- c) a partnership title as above with an individual listing of the social workers' names and acceptable vocational designations; or
- d) a business or corporation name with an individual listing of the social workers' names and acceptable vocational designations. (See also Footnote 22.)

SEXUAL MISCONDUCT

Principle VIII

The influence of the helping relationship upon clients is pervasive and may endure long after the relationship has terminated. Social workers are aware of the potential for conflict of interest and abusive treatment of clients within the helping relationship. Behaviour of a sexual nature by a social worker toward a client represents an abuse of power in the helping relationship. Social workers do not engage in behaviour of a sexual nature with clients.

Interpretation

- 8.1 Social workers are solely responsible for ensuring that sexual misconduct does not occur.
- 8.2 Social workers do not engage in the following actions with clients:
 - a) Sexual intercourse or another form of physical sexual relations between the social worker and the client;²⁴
 - b) Touching of a sexual nature of the client by the social worker;²⁵ and
 - c) Behaviour or remarks of a sexual nature by the social worker towards the client, other than behaviour or remarks of a clinical nature appropriate to the service provided.²⁶
- 8.3 If a social worker develops sexual feelings toward a client that could, in the social worker's judgment, put the client at risk, the social worker seeks consultation/supervision and develops an appropriate clinical plan.²⁷
- 8.4 If a client initiates behaviour of a sexual nature, the social worker states clearly that this behaviour is inappropriate by virtue of the professional relationship.
 - 8.4.1 If overtures or provocative sexual behaviour by a client toward a social worker become intrusive to the counselling or therapy process, the social worker may choose to terminate the relationship and may offer to assist the client to seek alternate services.
- 8.5 Social workers do not provide clinical services to individuals with whom they have had a prior relationship of a sexual nature.
- 8.6 Sexual relationships between a social worker and client at the time of referral, assessment, counselling, psychotherapy, or other professional services are prohibited.
- 8.7 Sexual relationships between a social worker and client to whom the social worker has provided psychotherapy and/or counselling services, are prohibited at any time following termination of the professional relationship.^{28, 29}
- 8.8 Sexual relationships between a social worker and client to whom the social worker has provided social work services other than psychotherapy or counselling services, are prohibited for a period of two (2) years following termination of the professional relationship.^{28, 29}
- 8.9 Social workers do not engage in sexual activities with clients' relatives or other individuals with whom clients maintain a close personal relationship when there is a risk of exploitation or potential harm to the client or when such activities would compromise the appropriate professional boundaries between the social worker and client.

²⁴ Physical sexual relations whether or not initiated by the client, include, but are not limited to, kissing of a sexual nature, touching of breasts or genitals, genital contact and sexual intercourse.

²⁵ Touching is defined as physical contact of a sexual nature. It includes hugging, holding, patting, stroking, rubbing and any form of contact which is unnecessary to the helping process.

²⁶ Behaviour or remarks of a sexual nature include but are not limited to amorous, romantic, seductive and sexual behaviours or remarks. These may include: expressing amorous and/or romantic feelings, such as being "in love"; requests to date; inappropriate gift giving; unnecessarily arranging sessions in off-site locations, such as in restaurants or the client's or the social worker's home, or beyond normal business hours; unnecessary comments about the client's body or clothing; requesting details of sexual history or sexual preferences not pertinent to the service that is being provided; initiation by the social worker of conversations regarding the social worker's sexual problems, preferences or fantasies; the wearing of sexually suggestive clothing or adornment; displaying pornographic or other offensive material and jokes or remarks that are sexually provocative or sexually demeaning.

Behaviour or remarks of a sexual nature do not include behaviour or remarks of a clinical nature appropriate to the service being provided.

²⁷ In such cases it may be appropriate for the social worker to seek alternative services for the client and terminate the relationship as soon as possible, in keeping with the client's interests.

²⁸ "Psychotherapy services" are defined as any form of treatment for psycho-social or emotional difficulties, behavioural maladaptations and/or other problems that are assumed to be of an emotional nature, in which a social worker establishes a professional relationship with a client for the purposes of promoting positive personal growth and development.

²⁹ "Counselling services" are defined as services provided within the context of a professional relationship with a goal of assisting clients in dealing with issues in their lives by such activities as giving advice, identifying alternatives, problem solving and the provision of information and not as defined in footnote 28.



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