

NEW HAMPSHIRE ASSOCIATION OF PASTORAL PSYCHOTHERAPISTS  
CODE OF ETHICS  
APPROVED OCTOBER 2019  
AMENDED MARCH 2021

**PRINCIPLE I - PROLOGUE**

As members of the New Hampshire Association of Pastoral Psychotherapists (“the Association”), we are committed to the various spiritual traditions, and values of our faith communities and to the dignity and worth of each individual. We are dedicated to advancing the welfare of those who seek our assistance and to the maintenance of high standards of professional conduct and competence. We are accountable for our ministry whatever its setting. This accountability is expressed in relationships to clients, colleagues, students, the agencies we may serve, our spiritual communities, and through the acceptance and practice of the principles and procedures of this Code of Ethics.

In order to uphold our standards, as members of the Association we covenant to accept the following foundational premises:

- A. To maintain a responsible association with the faith group in which most closely aligned.
- B. To avoid discriminating against or refusing employment, educational opportunity or professional assistance to anyone on the basis of race, gender, sexual orientation, religion, or national origin; provided that nothing herein shall limit a member or agency from utilizing religious requirements or exercising a religious preference in employment decisions.
- C. To remain abreast of new developments in the field through both educational activities and clinical experience. We agree at all levels of membership to continue post-graduate education and professional growth including supervision, consultation, and active participation in the meetings and affairs of the Association.
- D. To seek out and engage in collegial relationships, recognizing that isolation can lead to a loss of perspective and judgment.
- E. To manage our personal lives in a healthful fashion and to seek appropriate assistance for our own personal problems or conflicts.
- F. To diagnose or provide treatment only for those problems or issues that are within the reasonable boundaries of our competence.
- G. To establish and maintain appropriate professional relationship boundaries.  
We use our knowledge and professional associations for the benefit of the people we serve and not to secure unfair personal advantage.

**PRINCIPLE II - PROFESSIONAL PRACTICES**

In all professional matters members of the Association maintain practices that protect the public and advance the profession.

- A. We use our knowledge and professional associations for the benefit of the people we serve and not to secure unfair personal advantage.
- B. Fees and financial arrangements, as with all contractual matters, are always discussed without hesitation or equivocation at the onset and are established in a straight-forward, professional manner.
  - 1. The Association Code of Ethics may be reproduced only after contacting the Association to insure that the most current copy of the Code can be provided.

2. The use of "member," "we," "us," and "our" refers to and is binding upon all levels of individual and institutional membership and affiliation with the Association.

C. We are prepared to render service to individuals and communities in crisis without regard to financial remuneration when necessary.

D. We neither receive nor pay a commission for referral of a client.

E. We conduct our practice, agency and Association fiscal affairs with due regard to recognized business and accounting procedures.

F. Upon the transfer of a pastoral psychotherapy practice or the sale of real, personal, tangible or intangible property or assets used in such practice, the privacy and well being of the client shall be of primary concern.

1. Client names and records shall be excluded from the transfer or sale.
2. Any fees paid shall be for services rendered, consultation, equipment, real estate, and the name and logo of the counseling agency.

G. We are careful to represent facts truthfully to clients, referral sources, and third party payers regarding credentials and services rendered. We shall correct any misrepresentation of our professional qualifications or affiliations.

H.. We do not malign colleagues or other professionals.

### **PRINCIPLE III - CLIENT RELATIONSHIPS**

It is the responsibility of members of the Association to maintain relationships with clients on a professional basis.

A. We do not abandon or neglect clients. If we are unable, or unwilling for appropriate reasons, to provide professional help or continue a professional relationship, every reasonable effort is made to arrange for continuation of treatment with another professional.

B. We make only realistic statements regarding the pastoral psychotherapy process and its outcome.

C. We show sensitive regard for the moral, social, and religious standards of clients and communities. We avoid imposing our beliefs on others, although we may express them when appropriate in the pastoral psychotherapy process.

D. Counseling relationships are continued only so long as it is reasonably clear that the clients are benefitting from the relationship.

E. We recognize the trust placed in and unique power of the therapeutic relationship. While acknowledging the complexity of therapeutic relationships, we avoid exploiting the trust and dependency of clients. We avoid those dual relationships with clients (e.g., business or close personal relationships) which could impair our professional judgment, compromise the integrity of the treatment, and/or use the relationship for our own gain.

F. We do not engage in harassment, abusive words or actions, or exploitative coercion of clients or former clients.

G. All forms of sexual behavior or harassment with clients are unethical, even when a client invites or consents to such behavior or involvement. Sexual behavior is defined as, but not limited to, all forms of overt and covert seductive speech, gestures, and behavior as well as physical contact of a sexual nature;

harassment is defined as but not limited to, repeated comments, gestures or physical contacts of a sexual nature.

H. We recognize that the therapist/client relationship involves a power imbalance, the residual effects of which are operative following the termination of the therapy relationship. Therefore, all sexual behavior or harassment as defined in Principle III, G with former clients is unethical.

#### **PRINCIPLE IV - CONFIDENTIALITY**

As members of the Association we respect the integrity and protect the welfare of all persons with whom we are working and have an obligation to safeguard information about them that has been obtained in the course of the counseling process.

A. All records kept on a client are stored of in a manner that assures security and confidentiality.

B. We treat all communications from clients with professional confidence.

C. Except in those situations where the identity of the client is necessary to the understanding of the case, we use only the first names of our clients when engaged in supervision or consultation. It is our responsibility to convey the importance of confidentiality to the supervisor/consultant; this is particularly important when the supervision is shared by other professionals, as in a supervisory group.

D. We do not disclose client confidences to anyone, except: as mandated by law; to prevent a clear and immediate danger to someone; in the course of a civil, criminal or disciplinary action arising from the counseling where the pastoral psychotherapist is a defendant; for purposes of supervision or consultation; or by previously obtained written permission. In cases involving more than one person (as client) written permission must be obtained from all legally accountable persons who have been present during the counseling before any disclosure can be made.

E. We obtain informed written consent of clients before audio and/or video tape recording or permitting third party observation of their sessions.

F. We do not use these standards of confidentiality to avoid intervention when it is necessary, e.g., when there is evidence of abuse of minors, the elderly, the disabled, the physically or mentally incompetent.

G. When current or former clients are referred to in a publication, while teaching or in a public presentation, their identity is thoroughly disguised.

H. We as members of the Association agree that as an express condition of our membership in the Association, Association ethics, communications, files, investigative reports, and related records are strictly confidential and waive the right to use same in a court of law to advance any claim against another member. Any member seeking such records for such purpose shall be subject to disciplinary action for attempting to violate the confidentiality requirements of the organization. This policy is intended to promote pastoral and confessional communications without legal consequences and to protect potential privacy and confidentiality interests of third parties.

#### **PRINCIPLE V-SUPERVISEE STUDENT & EMPLOYEE RELATIONSHIPS**

As members of the Association we have an ethical concern for the integrity and welfare of our supervisees, students and employees. These relationships are maintained on a professional and confidential basis. We recognize our influential position with regard to both current and former supervisees, students and employees, and avoid exploiting their trust and dependency. We make every effort to avoid dual relationships with such persons that could impair our judgment or increase the risk of personal and/or financial exploitation.

- A. We do not engage in ongoing counseling relationships with current supervisees, students and employees.
- B. We do not engage in sexual or other harassment of supervisees, students, employees, research subjects or colleagues.
- C. All forms of sexual behavior, as defined in Principle III, G, with our supervisees, students, research subjects and employees (except in employee situations involving domestic partners) are unethical.
- D. We advise our students, supervisees, and employees against offering or engaging in, or holding themselves out as competent to engage in, professional services beyond their training, level of experience and competence.
- E. We do not harass or dismiss an employee who has acted in a reasonable, responsible and ethical manner to protect, or intervene on behalf of, a client or other member of the public or another employee.

## **PRINCIPLE VI-INTERPROFESSIONAL RELATIONSHIPS**

As members of the Association we relate to and cooperate with other professional persons in our community and beyond. We are part of a network of health care professionals and are expected to develop and maintain interdisciplinary and interprofessional relationships.

- A. We do not offer ongoing clinical services to persons currently receiving treatment from another professional without prior knowledge of and in consultation with the other professional, with the clients-informed consent. Soliciting such clients is unethical.
- B. We exercise care and interprofessional courtesy when approached for services by persons who claim or appear to have inappropriately terminated treatment with another professional.

## **PRINCIPLE VII - ADVERTISING**

Any advertising by or for a member of the Association, including announcements, public statements and promotional activities, is undertaken with the purpose of helping the public make informed judgments and choices.

- A. We do not misrepresent our professional qualifications, affiliations and functions, or falsely imply sponsorship or certification by any organization,
- B. We may use the following information to describe ourselves and the services we provide:
- name- highest relevant academic degree earned from an accredited institution;
  - date;
  - type and level of certification or licensure;
  - Association membership level, clearly stated;
  - address and telephone number, office hours;
  - a brief review of services offered, e.g., individual, couple and group counseling;
  - fee information;
  - languages spoken;
  - and policy regarding third party payments.
  - Additional relevant information may be provided if it is legitimate reasonable free of deception and not otherwise prohibited by these principles. We may not use the initials "NHPPA" after our names in the manner of an academic degree.

C. Announcements and brochures promoting our services describe them with accuracy and dignity devoid of all claims or evaluation. We may send them to professional persons, religious institutions and other agencies but to prospective individual clients only in response to inquiries.

D. We do not make public statements which contain any of the following:

1. A false, fraudulent, misleading, deceptive or unfair statement.
2. A misrepresentation of fact or a statement likely to mislead or deceive because in context it makes only a partial disclosure of relevant facts.
3. A testimonial from a client regarding the quality of services or products.
4. A statement intended or likely to create fake or unjustified expectations of favorable results.
5. A statement implying unusual, unique, or one-of-a-kind abilities, including misrepresentation through sensationalism, exaggeration or superficiality.
6. A statement intended or likely to exploit a client's fears, anxieties or emotions.
7. A statement concerning the comparative desirability of offered services
8. A statement of direct solicitation of individual clients.

## PRINCIPLE VIII – ELECTRONIC COMMUNICATION

As members of the Association we exercise best practices in using social media and electronic communication in our practices.

### A. Legal Issues

1. We will be aware of, and practice within, the spirit and letter of the Statutes of New Hampshire, the Rules of the New Hampshire Board of Mental Health Practice, and the Code of Ethics of the Association.
2. When a client, patient, or counselee resides in a different state we will maintain an awareness of any geographic limitations or other state or federal regulatory compliance obligations that use of electronic communications in the therapeutic relationship may trigger.
3. We will maintain awareness of the New Hampshire Board of Mental Health Practice actions, declaratory rulings, or Rules regarding the use of electronic communication, social media, and online mental health interventions.
4. We will be aware of our malpractice insurance carrier's limits that may exist for using electronic means of communication and providing therapy.

### B. Privacy and Confidentiality

1. We maintain an awareness that electronic data transfer via fax, e-mail, and other modes of electronic communication is not completely secure.
2. We protect all electronic methods for communication, billing, recordkeeping and other aspects of client care with the use of industry-standard encryption technologies.

3. We ensure that electronic data storage and communications are privacy-protected consistent with all applicable law.
4. We apply privacy settings consistent with all clients and across all platforms.
5. We use privacy screens on monitors and other electronic devices that may be seen by others.
6. We are mindful of security hazards in using wireless devices and alert clients when using them.
7. We take extra care to protect the security of portable devices used to work with client data.
8. When disposing of computers and other information storage devices we utilize the services of a skilled, ethical technical expert for wiping out the hard drive.
9. We destroy recordings when they are no longer needed, as long as destruction does not conflict with any legal and/or ethical obligations.

#### C. Informed Consent

1. We develop and provide at the start of therapy for all clients a professional disclosure statement that includes a policy on the use of social media and electronic communication within our practice. We include in this document a policy about e-mail response times.
2. We make our professional disclosure statement accessible to potential clients, students, supervisees, employees and board members.
3. We have clients sign off on this policy after ensuring that they understand the policy and risks associated with using electronic communication with us.
4. We are clear in this professional disclosure statement that we are not available to respond to clinical emergencies via e-mail, text messaging, and other electronic means of communication.

#### D. Electronic Therapy (E-Therapy, Tele-Therapy)

1. Prior to engaging in providing pastoral psychotherapy services via any electronic means, we ensure that we are compliant with all relevant laws for the delivery of the services.

2. Prior to engaging in providing pastoral psychotherapy, we determine that this means is appropriate for each client, taking into consideration the client's intellectual, emotional and physical needs.
3. We inform clients of the potential risks and benefits associated with e-therapy.
4. We ensure the security of the communication medium prior to engaging in e-therapy.
5. We do not commence e-therapy until after we have had appropriate education, training, or supervised experience using the relevant technology.

#### E. Social Media

1. We create separate, private and professional profiles and networking sites.
2. We do not "friend" our clients. We let clients know in our professional disclosure statement that we will not respond to requests from them to be "friends," "linked in," etc.
3. We assume that everything we post online can be read by our clients.

#### F. Text Messages

1. We exercise extreme caution in using text messaging as a means of communicating with clients. Text messaging cannot be considered confidential communication and should only be used when therapeutically necessary.
2. Parents of minor children will be informed at the beginning of treatment how we utilize social network platforms.
3. We remind our clients with whom we use text messaging that it is not an effective means of reach us in an emergency.
4. If a client sends us a text message after business hours and it is not an emergency, we do not respond until the next business day.

#### G. Transference and Countertransference

1. We are aware that the pace and disembodied nature of electronic communication heightens the risk of increased emotional reactivity, inaccurate inferences and inappropriate responses within the therapeutic relationship and maintain a vigilance to this risk.

2. We are cautious about making exceptions when considering altering personal and professional electronic boundaries with clients.
3. We regularly monitor the web to determine and manage what kind of information outside of our control is available about us online.
4. We are aware that the use of electronic technology is not a substitute for human judgment and will consult a clinical supervisor, our own psychotherapist, our state licensing board, the Association Code of Ethics, when any doubt arises regarding the ethical use of electronic technology.

#### PRINCIPLE IX – PRACTICE MANAGMENT

As members of the Association we shall have a written plan in place for management of clinical records in case of our death, incapacitation, retirement or practice closure. This plan shall identify an individual who is licensed by the New Hampshire Board of Mental Health Practice or an entity that includes individuals who are licensed by the New Hampshire Board of Mental Health Practice.