Indian Association of Clinical Psychologists

Code of Conduct -1995

Scientific and Professional organizations generally prescribe a code of conduct for their members. Its sanctity is undoubtedly of a vital importance to the practitioners of health profession. Indian Association of Clinical Psychologists (IACP) has adopted the following code of conduct for its professional members with the objective that it would further strengthen a sense of professional commitment and responsibility as well as help in sensitizing them to the ethical issues of health profession in general.

(i) PROFESSIONAL COMPETENCE & SERVICES: ‘Competence’ should always be a watchword to a professional man and such a clinical psychologist should keep abreast of the latest in the field to enable him to provide efficient and effective services to the sick and needy. Members of the association fulfilling the eligibility criteria (see Note 2) as laid down in the IACP revised constitution (1988) are professionally competent to carry out the responsibilities of a clinical psychologist. As an independent consultant or private practitioner of mental health his services are likely to be considerably challenging as is true for professionals of other disciplines. Further, although the consultation fee would largely depend upon the nature of services offered interest of the patient and his health should always remain paramount to a clinical psychologist. It is obligatory that he should try his best to uphold the image of the profession.

(ii) REFERRALS :Whenever a case is referred to a clinical psychologist for his expert opinion, it is his responsibility to ascertain the basic prerequisites of psychological assessment. In cases where proper assessment could not be possible, the same should be communicated to the referring source. He may however suggest to seek opinion of another colleague or any other health professional having required expertise. Similarly, while providing therapeutic care if he observes any such sign or symptom which require consultation of a physician, psychiatrist or any other health specialist he should do the needful at the earliest possible and accordingly decide the management.

(iii) METHOD OF EXPERT OPINION: A clinical psychologist should exercise his own discretion in selection of the tests to be administered unless the referring professional had made request for a particular test. Further, while communicating his expert opinion inferences may be based upon his test findings as well as clinical notes and observations. As an expert in the field of mental health he should assume full responsibility of his opinion under all the circumstances.

(iv) CONSENT FOR TREATMENT: Before starting any treatment, a clinical psychologist should explain to the patient and available relative the nature of illness, method of psychological treatment and factors associated with its efficacy and so-called risk factors of the illness. In psychological methods of treatment or in the application of
behavioural techniques, involvement on the part of patient is of crucial importance and therefore consent of the patient in true sense is essential. Needless to say, the consent is valid only when the person is legally competent in doing so.

(v) PATIENTS WELFARE: A clinical psychologist should not only provide efficient mental health care but should also maintain a high regard for the patient’s integrity and welfare. Further, whatever treatment procedure he employs should be based upon scientific knowledge and its reasonably proved efficacy. Professional ethics implies that a therapist should not take up a case that is not fairly within his competence.

(vi) COURT TESTimony: While appearing in a courtroom for testimony, he should follow the required etiquette and maintain the image of a trustworthy and reliable expert. He should fully refrain from any bias or prejudice and his comments should be based upon the test findings and his observation as a clinical psychologist.

(vii) CONFIDENTIILITY: The information elicited from the patient or his relatives should not be disclosed to anyone other than concerned co-professional or appropriate authorities. Clinical record of each patient should be kept carefully under his custody. Further, to maintain professional sanctity of the test material and prevent its abuse he should not allow test material to be taken out of his clinical or laboratory except for purposes of teaching or training students of the discipline or related subject.

NOTE:
1. All the professional members are supposed to abide by the above code of conduct and acknowledge their continuing obligation to follow the rules and regulation of the association.
2. Essential qualification of a clinical psychologist(professional member)as given in clause-4 of the annexure of IACP constitution (1988) relates to any one following degrees or diplomas after Master’s Degree in Psychology:
   i) Diploma in Medical Psychology (D.M.P)
   Diploma in Medical & Social Psychology (D.M. & S.P)
   M.Phil. in Medical & Social Psychology (M.Phil.M.S.P)
   Doctorate in Clinical Psychology (Ph.D. Cl. Psy.)
   The above relate to the courses offered at NIMHANS (formerly AIIMH), Bangalore and CIP., Ranchi.
   ii) Any doctorate degree in Clinical Psychology approved by American Psychological Association.
   iii) Postgraduate Academic Diploma in Psychology (Abnormal) from Institute of Psychiatry, University of London, or Diploma in Clinical Psychology of the University of Glasgow.
3. ‘He’ also refers to ‘she’. Likewise, the word ‘patient’ also refers to ‘client’ i.e., any individual seeking psychological consultation or treatment.

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