Revised to focus on Ethics for the practice of Licensed Educational Psychologists
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Code of Ethics for Licensed Educational Psychologists

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CASP’S PRINCIPLES FOR PROFESSIONAL ETHICS for LEPs

Purpose

The formal principles that guide the proper conduct of a professional are known as Ethical Standards. By virtue of joining CASP, each member agrees to abide by this Code of Ethics, acting in a manner that shows respect for human dignity, and assuring a high quality of professional service. CASP acknowledges that ethical behavior is both the individual responsibility of each member, and the collective responsibility of CASP as an organization, CASP Affiliates, and any CASP sponsored group or function. Upon receiving the license to practice privately in California as a Licensed Educational Psychologist (LEP), each LEP agrees to observe the professional ethical principles outlined in this Code.

The primary purpose of these guidelines is to educate Licensed Educational Psychologists (LEP) and the public regarding our professional ethical responsibilities. Because CASP does not issue credentials or licenses, and CASP cannot authorize services, CASP does not engage in investigations regarding violations of these standards.

Introduction

A Code of Ethics includes both good practice and professional standards for conduct. The CASP Code of Ethics for LEPs provides guidelines in the following areas:

1) Professional competence (personal and professional limitations, professional growth, confidentiality, records, information shared)
2) Professional relationships and responsibilities (clients, parents, school and the community, interpersonal relations)
3) Professional practice in public settings (assessment, use of materials and computers, intervention, school-based research and evaluation, reporting data and conferencing results); and
4) Professional practice in private settings (district employment, service delivery, announcements/advertising, online counseling or telehealth).

These guidelines recognize the obligation of professional persons to provide services and to conduct themselves so as to place the highest esteem on human rights and individual dignity. Even though ethical behavior involves interactions among the professional and employing institutions, responsibility for ethical conduct must rest with the professional.

The content of these guidelines is to supply clarification that will facilitate the delivery of high-quality psychological services in the school or community. Thus they acknowledge the fluid and expanding functions of the Licensed Educational Psychologist. In addition to these ethical standards, there is the ever-present necessity to differentiate legal
mandate and ethical responsibility. The LEP is urged to become familiar with all applicable legal requirements and standards.

The ethical standards in this guide are organized into several sections representing the multifaceted concerns with which psychologists must deal. The grouping arrangement is a matter of convenience, and principles discussed in one section may also apply to other areas and situations.

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than required by law, psychologists must meet the higher ethical standard.

*If psychologists’ ethical responsibilities conflict with law, regulations or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner in keeping with basic principles of human rights.* –American Psychological Association

Throughout this document, the word “psychologist” is used to include LEPs.

**General Overview**

The Board of Behavioral Sciences governs the practice of Licensed Educational Psychologists. The scope of practice of educational psychology is the performance of any of the following professional functions pertaining to academic learning processes or the education system or both:

(a) Educational evaluation.
(b) Diagnosis of psychological disorders related to academic learning processes.
(c) Administration of diagnostic tests related to academic learning processes including tests of academic ability, learning patterns, achievement, motivation, and personality factors.
(d) Interpretation of diagnostic tests related to academic learning processes including tests of academic ability, learning patterns, achievement, motivation, and personality factors.
(e) Providing psychological counseling for individuals, groups, and families.
(f) Consultation with other educators and parents on issues of social development and behavioral and academic difficulties.
(g) Conducting psychoeducational assessments for the purposes of identifying special needs.
(h) Developing treatment programs and strategies to address problems of adjustment.
(i) Coordinating intervention strategies for management of individual crises.
The psychologist's role, whether functioning in a public or private setting, mandates a mastery of skills in both education and psychology. This includes knowledge of current state and federal laws governing education, and adherence to these laws. In the interest of adults and children served in both the public and private sectors, psychologists strive to maintain high standards of competence. LEPs apply influence, position, and professional skills in ways that protect the dignity and rights of persons served and that promote the quality of education and life in general. In situations where there are divided or conflicting interests psychologists are responsible for attempting to work out a plan of action that encourages mutual benefit and protection of rights. Ethical behavior may occasionally be contradicted by policy or law, in which case psychologists are expected to declare their dilemma and work to bring the discrepant regulations into compliance with the “CASP Code of Ethics for LEPs.”

_The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees and colleagues; and to consult with others concerning ethical problems._ –American Psychological Association.

### I. Professional Competency

#### A. Personal and Professional Limitations

1. Psychologists offer only those services that are within their individual area of training and experience. They must continually seek additional training with the welfare of those served in mind.

2. Competency levels, education, training, experience, and certification and licensing credentials are accurately represented to parents, recipients of services, and others. Psychologists accurately represent their level of competence, education, training, and experience to schools and clients in a professional manner. Psychologists correct any misperceptions of their qualifications. Psychologists do not represent themselves as specialists in a particular domain without verifiable training and supervised experience in the specialty.

3. Psychologists define the direction and nature of personal loyalties, objectives, and competencies, and advise and inform all persons concerned of these commitments. When these commitments may influence a professional relationship, the psychologist informs all concerned persons of relevant issues in advance. From the American Psychological Association: “A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with
whom the professional relationship exists.” A multiple relationship occurs when a professional assumes two or more roles at the same time or sequentially with a client, family, or educational setting or with someone who has a significant relationship with the client, family, or educational setting.

4. Psychologists refrain from any activity in which conflicts of interest or multiple relationships with a client or a client’s family may interfere with professional effectiveness. Psychologists attempt to resolve such situations in a manner that provides greatest benefit to the client. Psychologists whose personal or religious beliefs or commitments may influence the nature of their professional services or their willingness to provide certain services inform clients and responsible parties of this fact. When personal beliefs, conflicts of interests, or multiple relationships threaten to diminish professional effectiveness or would be viewed by the public as inappropriate, psychologists seek reassignment of responsibilities, or they direct the client to alternative services.

5. Psychologists do not guarantee outcomes as the result of their work.

6. Psychologists do not use affiliations with other professional persons or with institutions to imply a level of professional competence different from that which has actually been achieved.

7. Psychologists are aware of their limitations and enlist the assistance of other professionals in a consultative or referred role, as appropriate.

8. Psychologists refrain from involvement in any activity in which personal problems or conflicts may interfere with professional effectiveness. Competent professional assistance is sought to alleviate such problems and/or conflicts in professional relationships.

9. The maintenance of high standards of professional competence in any psychological specialty is a responsibility that must be shared by all psychologists. In the interest of the public and the profession as a whole, when psychologists become aware of practices likely to result in the offering of inferior professional work or the lowering of standards for psychological services, influence should be exerted to rectify the situation.

10. Psychologists have a working knowledge regarding the CASP Code of Ethics and thoughtfully apply them to situations within private practice. Ignorance or misapplication of an ethical principle is not a reasonable defense against a charge of unethical behavior.
B. Professional Growth

1. Psychologists engage in continuing professional development. They remain current regarding developments in research, training, and professional practices that benefit children, families, schools and the education field in general. They also understand that professional skill development beyond that of the novice practitioner requires well-planned continuing professional development, including training and supervision.

2. Psychologists follow the requirements of the Board of Behavioral Sciences, along with any other applicable licensing, certification and/or credentialing entities with regards to continuing professional development.

3. Psychologists will utilize assessment and counseling procedures, instruments, and methods that are consistent with accepted practice, recent research, and good judgment.

4. Psychologists recognize that their clients’ needs are their primary responsibility. If some organizational practices are not beneficial or are actually detrimental to the mental health of the population served, it is the psychologist’s duty to consider whether he/she can contribute most by:
   a. Remaining and working for improvements through the appropriate channels
   b. Deciding whether the situation is serious enough to warrant use of professional avenues for modifying objectionable practices; and
   c. Resigning if the detrimental practices cannot be modified by any of these procedures.

5. Psychologists take the responsibility of informing school district personnel and supervisors/administrators of practices within the school district that are potentially detrimental to students, such as the misuse of instruments and results, use of test instruments by inadequately trained -or unqualified personnel, or questionable counseling strategies.

C. Confidentiality

1. Informed Consent
   a. American Psychological Association position on informed consent:
      i. “(a) When psychologists conduct research or provide assessment, therapy, counseling or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when
conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code.

ii. (b) Psychologists obtain informed consent for assessments, evaluations or diagnostic services. Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties and limits of confidentiality and sufficient opportunity for the client/student to ask questions and receive answers.

iii. (c) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.

iv. (d) Psychologists using the services of an interpreter obtain informed consent from the client/parent to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports and diagnostic or evaluative statements, including discussion of any limitations on the data obtained."

b. Psychologists are recommended to follow the rules and regulations set forth by the Health Insurance Portability and Accountability Act (HIPPA) with regard to informed consent, regardless if such rules and regulations apply to their private practice, as this is the higher standard.

2. Information Received

a. Psychologists are aware of and adhere to current statutory and court mandates in the following situations:

(1) The confidentiality of the relationship between the psychologist and the client, as well as the limits of confidentiality.

(2) The requirement that all helping service professionals take appropriate and reasonable measures to protect the safety of their clients and the public. Such appropriate and reasonable measures may require disclosure of certain information, as required by California laws mandating reporting, and/or when the psychologist, using his/her best judgment believes that:

(a) A student is about to harm himself or others; or
(b) A student has been the victim of abuse or molestation.

b. Psychologists inform children and other clients of the limits of confidentiality at the outset of establishing a professional relationship. They seek a shared understanding with clients regarding the types of information that will and will not be shared with third parties. However, if a child or adolescent is in immediate need of assistance, it is permissible to delay the discussion of confidentiality until the immediate crisis is resolved. Psychologists recognize that it may be necessary to discuss confidentiality at multiple points in a professional relationship to ensure client understanding and agreement regarding how sensitive disclosures will be handled.

c. Psychologists respect the right to privacy of clients, parents, and colleagues with regard to sexual orientation, gender identity, or transgender status. They do not share information about the sexual orientation, gender identity, or transgender status of a client (including minors), or parent, with anyone without that individual’s permission.

d. Psychologists provide assessment, counseling, and consultation from an office or workspace that is adequate to ensure confidentiality and reliability of data.

e. Psychologists respect the confidentiality of information collected from other professional sources as they would their own.

3. Records

a. Psychologists are informed regarding confidentiality of client records and guide others in compliance with the law.

b. Clients, when appropriate, are informed by psychologists of persons who have access to records and what those records would include.

c. Psychologists comply with all laws, regulations, and policies pertaining to the adequate storage and disposal of records to maintain appropriate confidentiality of information. Obsolete information will be shredded or otherwise destroyed before placement in recycling bins or trash receptacles.

d. Records should be maintained for seven years after the services to the client have ceased.

e. Paper records are to be stored in a locked file cabinet. Electronic records are to be kept on a password protected and/or encrypted, secure server or computer.
f. Psychologists discuss with parents and adult clients their rights regarding creation, modification, storage, and disposal of psychological and educational records that result from the provision of services. Parents and adult clients are notified of the electronic storage and transmission of personally identifiable records and the associated risks to privacy.

g. Private notes maintained by the psychologist are not part of the client’s record.

h. Psychologists should make arrangements for the management of client records in the event of their death or incapacitation. This can include creating a Professional Will, or naming a competent designee to contact and refer clients for continuing services with a qualified mental health professional. In such a case where no arrangements have been made, records should be forwarded to the new mental health professional, or released to the client.

4. Information Shared

a. Psychologists discuss information, including written reports or documents concerning clients only with those individuals who have legitimate claim to and “right to know” such information. It is necessary to obtain written consent from parents prior to release or request of information to or from any agency or individual.

b. Psychologists should adhere to the regulations set forth by HIPPA when gaining consent from clients and/or their parents to release information to a third party. Such language in the consent to release information should be reasonably understandable to the client.

c. Psychologists provide parents with information that will serve the best interests of their children and will be discreet and professional with information received from parents.

d. The identity of persons involved is disguised when case materials are used for instruction, research, or media presentation by psychologists, unless prior written consent is obtained.

e. Psychologists inform parents of the nature of records made of parent conferences and evaluations of the client. Rights of confidentiality and content of reports are shared.

f. Permission to share information via e-mail or electronic transmission should be stipulated within the release of information, along with who is permitted to share/receive such information and the limits of that
information. When sharing information about a client with another professional via e-mail or electronic transmission, the identity of the client should be disguised to maintain privacy.

g. Psychological services for the purposes of diagnosis, treatment, or personalized advice are provided only in the context of a professional relationship and are not given by means of newspaper articles, public lectures, radio, television, internet, or other media presentation. These services are to be distinguished from public awareness activities.

II. Professional Relationships and Responsibilities

In their words and actions, psychologists promote fairness and justice. They use their expertise to cultivate climates that are safe and welcoming to all persons regardless of actual or perceived characteristics, including race, ethnicity, color, religion, ancestry, national origin, immigration status, socioeconomic status, primary language, gender, sexual orientation, gender identity, gender expression, disability, or any other distinguishing characteristics.

A. Clients

1. Psychologists consider the client to be their primary responsibility and act as advocates of the client’s rights and responsibilities.

   a. The “client” is defined by the fiduciary responsibility and contract between the psychologist and the party receiving the service. The client may be a child, adult, parent, school district, or agency.

2. Psychologists are guided by an awareness of the personal nature of the assessment, counseling or consultation relationship. They perform in a manner that reflects a humanistic concern for dignity and personal integrity.

3. Psychologists respect each client with whom they are working and deal justly and impartially with each, regardless of physical, mental, emotional, political, economic, social, racial, cultural, gender and sexual orientation or religious characteristics.

4. Psychologists recognize the obligation to the client and respect his/her right to enter, participate, or withdraw from services voluntarily.

5. Psychologists inform the client about important aspects of their relationship. They will be informed of the outcomes of assessment, counseling, and other services. The client shall also be informed of the uses that will be made of the information, persons who will receive specific information, and possible
implications of the results. The sharing of information is formulated to fit the age and maturity of the client and the nature of the information.

6. Psychologists do not exploit clients, supervisees, or graduate students through professional relationships or condone these actions by their colleagues. They do not participate in or condone sexual harassment of children, parents, other clients, colleagues, employees, trainees, supervisees, or research participants. Psychologists do not engage in sexual relationships with individuals over whom they have evaluation authority, including college students in their classes or program, or any other trainees, or supervisees. Psychologists do not engage in sexual relationships with their current or former pupil-clients, the parents, siblings, or other close family members of current pupil-clients, or current consultees.

B. Parents, Legal Guardians, and Appointed Surrogates

1. Psychologists recognize the importance of the parent-child relationship and the need for appropriate family involvement when counseling and consulting with all clients.

2. Psychologists confer with parents regarding assessment, counseling, and intervention plans in a language understandable to the parents. Goals of assessment or counseling and the continuum of alternative interventions available for clients are communicated to parents in an understandable and complete manner while showing respect for the ethnic/cultural values of the family.

3. Psychologists recognize the importance of parental support and seek to obtain this by assuring that there is direct parent contact prior to seeing the client. They secure continuing parental involvement by a frank and prompt reporting to the parent of findings and progress in an understandable, thorough, and accurate manner.

C. School and the Community

1. Psychologists should become knowledgeable of the organization, philosophies, goals, objectives, and practices of local school districts and other educational institutions within the area they serve.

2. Psychologists recognize that an understanding of the goals, processes, and legal requirements of the educational system is essential for an effective relationship with their clients.

3. Familiarization with the organization, instructional materials, and teaching strategies of the schools their clients attend will enable psychologists to
contribute to the common objective for fostering maximum self-development opportunities for each client.

4. Psychologists demonstrate professional respect for other mental health professionals and educational staff. When part of an educational team, psychologists act as team members with other school district staff in areas of special education placement and evaluation, when appropriate to their role.

5. Psychologists accept the responsibility of being members of the community. They recognize the need to establish an integral role within the community, while respecting the various roles of colleagues in other professions.

6. Psychologists help to outline and interpret to the community the various educational or school programs when appropriate to their role or responsibility.

7. Psychologists are free to pursue individual interests and exercise their Constitutional rights, except to a degree that these may compromise fulfillment of their professional responsibilities and have negative impact on the profession. Awareness of such impact guides public behavior.

8. Psychologists refrain from acting in any way that could violate or diminish civil or legal rights of others.

9. Psychologists do not engage in or condone discriminating practices based on race, handicap, age, gender, sexual orientation, religion, national origin, economic status, or native language.

10. Psychologists adhere to federal, state, and local laws and ordinances governing their practice and advocacy efforts. If regulations conflict with ethical guidelines, psychologists seek to resolve such conflict through positive, respected, and legal channels, including advocacy efforts involving public policy.

11. When a psychologist suspects that another psychologist or another professional has engaged in unethical practices, he or she attempts to resolve the suspected problem through a collegial problem-solving process, if feasible.

12. If a collegial problem-solving process is not possible or productive, psychologists take further action appropriate to the situation, including discussing the situation with a supervisor in the employment setting, consulting with the CASP Ethics Specialist, and if necessary in the case of a school psychologist, filing a formal ethical violation complaint with the California Teacher Credentialing Commission, or the NASP Ethical and Professional Practices Committee in accordance with their procedures.
Complaints against a Licensed Educational Psychologist are made to the California Board of Behavioral Sciences.

D. Inter-Professional Relations/Cooperation

1. Psychologists communicate with other community agencies regarding the welfare of the client within the confines of confidentiality and privacy rights.

2. Psychologists cooperate with other professional persons and groups and accept administrative policies and decisions, but do not compromise the standards of the profession.

3. Psychologists use their best professional judgment when making referrals to other professionals.

4. Psychologists do not offer professional services to a person who is receiving assistance from another professional except by agreement or after termination of the relationship with the other professional.

5. When psychologists suspect the existence of detrimental or unethical practices by a member of another profession, informal contact is made with that person to express the concern. If the situation cannot be resolved, the appropriate professional organization may be contacted for assistance in determining the procedures established by that profession for examining the practices in question.

E. School Psychologist Trainees and Interns

1. Psychologists who conduct or administer training programs provide trainees and prospective trainees with accurate information regarding program sponsorships/endorsements/accreditation, goals/objectives, training processes and requirements, and likely outcomes and benefits.

2. Psychologists who are faculty members in colleges or universities or who supervise clinical or field placements apply these ethical principles in all work with school psychology trainees. In addition, they promote the ethical practice of trainees by providing specific and comprehensive instruction, feedback, and mentoring.

3. School psychology faculty members and clinical or field supervisors uphold recognized standards of the profession by providing training related to high quality, responsible, and research-based school psychology services. They provide accurate and objective information in their teaching and training activities; identify any limitations in information; and acknowledge disconfirming data, alternative hypotheses, and explanations.
4. School psychology faculty members and clinical or field supervisors develop and use evaluation practices for trainees that are objective, accurate, and fair.

III. Professional Practice – Public Settings

A. Advocacy

1. Psychologists typically serve multiple clients including children, parents, and systems. When the psychologist is confronted with conflicts between client groups, the welfare of the child/student is primary. A fiduciary relationship exists when one person has the obligation to act for another’s benefit. A fiduciary duty exists when the confidence given by one person is accepted by the other person/psychologist.

2. Psychologists consider children and other clients to be their primary responsibility, acting as advocates for their rights and welfare. If conflicts of interest between clients are present, the psychologist supports conclusions that are in the best interest of the child. When choosing a course of action, psychologists take into account the rights of each individual involved and the duties of school personnel.

3. Psychologists’ concerns for protecting the rights and welfare of children are communicated to the parents and community as the top priority in determining services.

B. Service Delivery

1. To provide effective services and systems consultation, psychologists are knowledgeable about the organization, philosophy, goals, objectives, culture, and practices of the settings in which they provide services. In addition, psychologists develop partnerships and networks with community service providers and agencies to provide seamless services to children and families.

2. Psychologists recognize that an understanding of the goals, processes, and legal requirements of their particular workplace is essential for effective functioning within that setting.

3. Psychologists attempt to become integral members of the client service systems to which they are assigned. They establish clear roles for themselves within that system.

4. Psychologists who provide services to several different groups may encounter situations in which loyalties are conflicted. As much as possible, the stance of the psychologist is made known in advance to all parties to prevent misunderstandings.
5. Psychologists promote changes in their employing agencies and community service systems that will benefit their clients.

C. Assessment

1. Psychologists strive to maintain the highest standard of service by an objective collecting of appropriated data and information necessary to effectively work with students. In conducting a psycho-educational evaluation and counseling/consultation service, due consideration is given to individual integrity and individual differences. Psychologists recognize differences in age, gender, native language, disability, socioeconomic, and ethnic backgrounds and strive to select and use appropriate procedures, techniques, strategies and instruments relevant to such differences.

2. Psychologists understand the parameters of psycho-diagnostic instruments and utilize their data professionally. They are obligated to combine observations, background information, and other data to report the most comprehensive and valid picture possible of the individual.

3. Psychologists do not promote the use of psycho-educational assessment techniques by inappropriately trained or otherwise unqualified persons through teaching, sponsorship or supervision.

4. Psychologists assess the client in his/her native language or other mode of communication for completion of a valid assessment. In the event this is impossible, use of a skilled interpreter or pre-recorded material is clearly documented in oral and/or written reports. Adequate interpretation must follow such modified techniques.

5. Psychologists assess in all areas of suspected disability. They restrict themselves to the collection and evaluation of information only to the depth that is relevant to the educational needs of the student.

6. Psychologists draw upon their own professional experience and skill in deciding whether assessment is appropriate. Background and supportive data are acquired to justify the need for assessment. Final decisions regarding the need for assessment, however, are made by a team, based on school district policy. Parents’ requests for assessment are honored when appropriate.

7. Psychologists use assessment techniques and practices that the profession considers to be responsible, research-based practice.

8. Psychologists select assessment instruments and strategies that are reliable and valid for the child and the purpose of the assessment. When using standardized measures, psychologists adhere to the procedures for administration of the instrument that is provided by the author or publisher of
the instrument. If modifications are made in the administration procedures for standardized tests or other instruments, such modifications are identified and discussed in the interpretation of the results.

9. If using norm-referenced measures, psychologists choose instruments with up-to-date normative data.

10. When using computer administered assessments, computer-assisted scoring, and/or interpretation programs, psychologists choose programs that meet professional standards for accuracy and validity. Psychologists use professional judgment in evaluating the accuracy of computer-assisted assessment findings for the examinee.

D. Use of Materials and Technology

1. Psychologists are responsible for maintaining security of psychological tests that might be rendered useless by revealing the specific content or underlying principles.

2. When designing and implementing research in schools, psychologists choose topics and employ research methodology, subject selection techniques, data-gathering methods, and analysis and reporting techniques that are grounded in sound research practice. Psychologists clearly identify their level of training and graduate degree on all communications to research participants.

3. Psychologists follow all legal procedures when conducting research, including following procedures related to informed consent, confidentiality, privacy, protection from harm or risks, voluntary participation, and disclosure of results to participants. Psychologists demonstrate respect for the rights and well-being of research participants.

4. Psychologists select and use scoring, interpretation services and reports on the basis of evidence of validity and appropriateness for the student and setting. Psychologists maintain full responsibility for computerized or any other technology or online services used by them for diagnostic, consultative, or information management purposes. Such services, if used, should be regarded as tools to be used judiciously.

5. In the utilization of technological data management services, psychologists apply the same ethical standards for use, interpretation, and maintenance of the data as for any other information. They are assured that the computer programs are accurate in all areas of information produced prior to using the results.

6. To ensure confidentiality, student/client records are not transmitted electronically without a guarantee of privacy. (For example, a receiving
facsimile (FAX) machine must be in a secure location and operated by employees cleared to work with confidential files; e-mail messages must be encrypted or else stripped of all information that identifies the student/client.)

7. Psychologists uphold copyright laws in their publications and presentations and obtain permission from authors and copyright holders to reproduce other publications or materials. Psychologists recognize that federal law protects the rights or copyright holders of published works and authors of non-published materials.

8. Psychologists refrain from publishing or presenting fabricated or falsified data or results in their reports, publications and presentations.

9. If errors are discovered after the report, publication or presentation of research, data, or other information, psychologists make efforts to correct errors by publishing errata, rejections, or corrections.

10. Psychologists only publish data or other information that make original contributions to the professional literature. Psychologists do not publish the same findings in two or more publications and do not duplicate significant portions of their own previous publications without permission of copyright holders.

11. Psychologists who participate in reviews of manuscripts, proposals, and other materials for consideration for publication or presentation respect the confidentiality and proprietary rights of the authors. Psychologists who review professional materials limit their use of the materials to the activities relevant to the purposes of the professional review.

E. Intervention

1. Psychologists use data-based decision making and evidence-based interventions to benefit students’ mental health and well being, and to promote learning and utilization of new skills. In deciding whether counseling or other intervention is appropriate, the student’s identified need(s), background, and supportive data, including that obtained from observations and interviews in the setting, are used to select the most appropriate intervention.

2. Psychologists obtain necessary education, training, experience and supervision when learning to implement interventions with students/clients. Interventions are implemented as designed and with fidelity. Interventions are selected that are appropriate for the student and setting.

3. Psychologists obtain informed consent, including written parent permission prior to counseling or implementing intervention that involves an individual or
a select group of students. The exception to this standard lies in the area of emergency crisis counseling.

4. Psychologists encourage and promote parental participation in selecting interventions for their children. When appropriate, this includes linking interventions between the school and the home, tailoring parental involvement to the skills of the family, and helping parents gain the skills needed to help their children.

5. Psychologists discuss with parents the recommendations and plans for assisting their children. This discussion takes into account the ethnic/cultural values of the family and includes alternatives that may be available.

6. Psychologists are alert to the need to evaluate the effectiveness of recommendations, and to engage in appropriate follow-up activities relating to each case.

7. Psychologists collect and maintain data on the dates, participation, and outcome of interventions used with students, and use this data to monitor progress and evaluate the effectiveness of the intervention. Psychologists continually assess the impact of any treatment/intervention/counseling plan and terminate or modify the plan when the data indicate that the plan is not achieving the desired goals.

8. Parents are informed of sources of support available at school, within the school district and in the community.

9. Psychologists participate in ongoing professional development to maintain current and effective intervention skills.

10. The student/client is referred to another professional for services when a condition is identified that is outside the treatment competencies or scope of training of the psychologist.

F. School-Based Research and Evaluation

1. In performing research and program evaluation, psychologists accept responsibility for the selection of topics and research methodology to be used in subject selection, data gathering, analysis and reporting. In publishing reports of their research, they provide discussion of limitations of their data and acknowledge existence of disconfirming data, as well as alternate hypotheses and explanations of their findings.

2. Psychologists seek willing and adequately informed consent for participation in research studies, and proceed only if the service or research activity is considered to be of direct benefit to the participant(s).
3. Psychologists ensure there are no harmful after-effects to the participant(s).

4. When publishing, school psychologists acknowledge through specific citations the sources of their ideas and materials.

5. Psychologists who use their assessment, intervention or consultation cases in lectures, presentations, or publications obtain written prior client consent and also remove any and all identifiable client information.

G. Reporting Data and Conference Results

1. When transmitting client information, psychologists ascertain that student/client information reaches only the authorized person(s) who is adequately trained in the use, interpretation, and confidential handling of the data.

2. Psychologists communicate information in such a form and style as to assure that the recipient of the information will be able to give maximum assistance to the student/client. The emphasis is placed on the interpretations and recommendations, rather than just the reporting of test scores, and will include an appraisal of the reliability and validity of the data.

3. Psychologists create a written minority or dissenting opinion when they are in disagreement with the multidisciplinary team decision. Psychologists provide data and/or cite applicable law to support their position.

4. Psychologists assist in interpreting district assessment data, students' cumulative folder information, and other records, when appropriate.

5. Psychologists ensure the accuracy of their reports, letters, and other documents.

6. Interns and practicum students are clearly identified as such and their work is cosigned by the supervising psychologist.

IV. Professional Practice – Private Settings

A. District Employment

1. Psychologists who are engaged in private practice while employed in a public school setting have an obligation to inform the employer of such practice. Licensed Educational Psychologists operating in both sectors recognize the importance of separation of roles and the necessity of adherence to all ethical standards.
2. Psychologists who are engaged in private practice may not accept a fee or any other form of remuneration for professional work with a client entitled to such service through the schools where they are currently assigned. This includes students who attend the non-public schools within the psychologist’s public school assignment areas. Psychologists should advocate for their client to receive those services even if they are delivered within the district, but at a school the psychologist does not service.

3. Psychologists who are engaged in private practice have an obligation to inform parents of services that may be available from the school district free of charge and/or mandated by a student’s educational program.

4. Psychologists who are engaged in private practice will maintain their practice outside the hours of contracted employment in their school districts.

5. Psychologists who are engaged in private practice will not utilize tests, materials, equipment, secretarial assistance, or other services belonging to the school district without prior approval through a written agreement.

6. Psychologists who are engaged in private practice evaluate the appropriateness of the use of public school facilities for part-time private practice. Before the facility is used, psychologists should enter into a rental agreement with the school district and clearly define limits of use to the district and client.

B. Service Delivery

1. Psychologists engage in private practice only when holding a current and valid license.

2. Psychologists who are engaged in private practice clarify financial arrangements in advance of services to ensure to the best of their ability that they are clearly understood by the client. They neither give nor receive any remuneration for referring patients for professional services.

3. Psychologists who are engaged in private practice adhere to the conditions of a contract with the school district or other agency until service there has been performed, the contract has been terminated by mutual consent, or the contract has otherwise been legally terminated.

4. Psychologists who engage in private practice maintain professional contacts with school district professionals and value building cooperative relationships with other service providers, public and private.
5. Psychologists who engage in private practice are obligated to inform clients of those aspects of the clinical relationship that might reasonably be considered important factors in the client’s decision to enter the relationship.

C. Announcements/Advertising

1. Individual, agency, or clinical listings in telephone or internet directories should be modestly limited to the following: name/names, highest relevant degree, certification status, address, telephone number, brief description of major areas of practice, office hours, an appropriate representation of fee information, foreign languages spoken, policy with regard to third party payments, and license number.

2. Announcements of individual private practice, agency or clinic, will be done in a formal, professional manner limited to the same information that is included in a telephone or internet listing (see above).

3. Psychologists who engage in private practice may utilize brochures in the announcement of services. They may include objective descriptions of services, and may be sent to professional persons, schools, business firms, government agencies, and other similar organizations.

4. Announcements and advertising of the availability of publications, products and services for sale are presented in a professional, scientific and factual manner. Information may be communicated by means of periodical, book, list service, directory, television, radio or internet and must not include any false, misleading, or comparative statements.

5. A media release must be obtained in order to use any likeness of a client for the purposes of advertising in print, television, film or on the internet.

6. Psychologists who engage in private practice do not directly solicit clients for individual diagnosis or therapy.

7. Psychologists who engage in private practice do not compensate in any manner a representative of the press, radio, or television in return for personal professional publicity in a news item.

8. Psychologists who engage in private practice do not endorse products or services.

D. Online Counseling or Telehealth

1. Psychologists who engage in private practice may provide telehealth (counseling over the internet) and follow the Board of Behavioral Sciences (BBS) statutes and regulations if licensed by the BBS. The License for
Educational Psychology (LEP) is valid only in California. LEPs may not provide online counseling or telehealth to a client who does not reside in California, unless the psychologist also possesses a valid license to practice as a mental health provider in the state in which the client is located, and telehealth services are permitted in that state or jurisdiction.

a. Psychologists who possess a license to practice privately from other agencies abide by the regulations of the appropriate California licensing agency. (APA is a professional association, like CASP, and is not authorized to issue licenses. Each state has a board that regulates licensure. In California, this is the Board of Psychology)

2. Upon initiation of telehealth services, Psychologists shall do the following:

a) Obtain informed consent from the client and/or guardian in a manner that can be kept for the record.

b) Inform the client and/or guardian of the potential risks and limitations of receiving treatment via telehealth.

c) Provide the client with his or her license or registration number and the type of license or registration.

d) Provide the client with written procedures to follow an emergency situation. This shall include contact information for emergency services near the client’s location.

3. Each time a licensee or registrant provides services via telehealth, he or she shall do the following:

a) Verbally obtain from the client and/or guardian documentation of the client’s full name and address of present location, at the beginning of each telehealth session.

b) Assess whether the client is appropriate for telehealth, including, but not limited to, consideration of the client’s psychosocial situation.

c) Utilize industry best practices for telehealth to ensure both client confidentiality and the security of the communication medium.