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Professional Guidelines for Psychologists

**Informed Consent:
Ethical Guidelines, Principles
and Standards**

Approved by CAP May 2008



COLLEGE OF ALBERTA PSYCHOLOGISTS
INFORMED CONSENT: ETHICAL GUIDELINES, PRINCIPLES AND STANDARDS

Preamble

Informed consent is exercised to protect the integrity of the psychologist's professional relationships. It is also a process through which interpersonal rapport is built, boundaries are established and permissions are obtained. Each psychologist has the professional responsibility to interpret the Canadian Psychological Association Code of Ethics and The College of Alberta Psychologists (CAP) Standards of Practice in terms of their daily practice. However, it is the translation of this responsibility into action that causes confusion within the psychological community.

Psychologists frequently ask questions of The College of Alberta Psychologists or the Psychologists' Association of Alberta practice advisors regarding how to effectively integrate informed consent into their professional activities. This guideline was created to support psychologists in translating the Code's aspirational discussion of informed consent into practical action. Like all CAP guidelines, the intent here is to provide a supportive process that encourages best practices rather than to create a prescription for specific professional behaviour.

DEFINING ROLES

Informed Consent and the Canadian Psychological Association Code of Ethics

I. Respect for the Dignity of Persons

The Canadian Psychological Association (CPA; 2000) defines informed consent as a process whereby the psychologist seeks to engage "full and active participation from others in decisions that affect them, respecting and integrating as much as possible their opinions and wishes" (I.16). The issue of informed consent is identified most closely with the ethical principle of Respecting the Dignity of the Person (I.16 – I.26).

The Code identifies that psychologists are to engage people in collaborative decision making processes (I.17) by providing as much information as the "reasonable or prudent person" might want to know to make an informed choice (I.23). Typical information to be shared includes: the purpose and nature of the activity; mutual responsibilities; confidentiality protections and limitations; likely benefits and risks; alternatives; likely consequences of non-action; the option to refuse or withdraw at any time without prejudice; time limits of consent and how to rescind consent if desired (I.24). The Code also stresses that informed consent is connected to freedom to consent (I.27 - I.30), protection of vulnerable persons (I.32 – I.33) and confidentiality (I.45).

II. Responsible Caring

The importance of the informed consent process is reflected in the obligation the psychologist holds to document the consent process. The psychologist is further bound by the duty to provide responsible caring. Principle Two of the Code recognizes that the autonomy of individuals, families, groups and communities is exercised through the informed consent process.

III. Integrity in Relationships

Informed consent processes support the third principle of the Code: Integrity in Relationships. Psychologists are to be clear and straightforward about all information needed to establish consent (III.14) and to avoid incomplete disclosure in research (III.24).

IV. Responsibility to Society

Informed consent processes exist within a social context. Many psychologists work within multi-disciplinary institutions or organizations. Psychologists are to maintain currency in their understanding of consent issues and to have this updated knowledge reflected in their practices (IV.3). There is also an expectation within the Code for psychologists to “participate in and contribute to the continuing education and the professional and scientific growth of self and colleagues (IV.4).

The framework suggested within this guideline is consistent with Principle IV in that it encourages a “process of critical self-evaluation...in the development and implementation of structures and procedures that help the discipline to contribute to beneficial societal functioning and changes” (IV.6). Psychologists are expected to support the discussion of ethical issues within their work environments (IV.7) and to engage in regular “peer review, in program reviews, case management reviews... of their ethical practices and safeguards” (IV.8). Finally psychologists are to help develop, promote, and participate in accountability processes and procedures related to their work (IV.9).

These expectations and professional responsibilities are further clarified in the College of Alberta Psychologists Standards of Practice.

Informed Consent and the College of Alberta Psychologists Standards of Practice

The Standards of Practice (SOP, 2005) defines informed consent as a decision to participate in a psychological service based upon “adequate disclosure of information by the psychologist, the client understanding the information and the client expressing a voluntary choice” (p.1).

Practice Self-Evaluation regarding Informed Consent

While issues related to informed consent appear straightforward when they are reviewed, translating the information into practice is not necessarily that straightforward. This is particularly true for psychologists who are shifting from one form of practice to another (e.g., public to private practice) or from one area of practice to another (e.g., family counselling to bi-lateral child custody assessments).

The authors of this guideline chose to develop a series of questions for each of the CAP Standard of Practice to guide psychologists' self-reflection on their current practices regarding informed consent. Each psychologist could use the questions as a prompt to affirm or make changes to their practices as appropriate. This response respects the diversity of settings, populations and philosophies that exists within the Alberta community of psychologists.

Psychologists may choose to do this critical self-review in either a formal or informal manner. The self-review is appropriate for use by individuals or groups within supervision or professional consultation sessions. The purpose of this self-review is to provide psychologists with a tool to enhance professional accountability and to enable responsible, ethical practice.

Critical Self-analysis of the Standards of Practice regarding Informed Consent

Standard of Practice	Self-Review Questions
<p>Obtaining Informed Consent</p> <p>2.1 Psychologists shall obtain the informed consent of all persons who are competent to give such consent for psychological services provided to them except in circumstances of urgent need. In urgent circumstances, psychologists may proceed in accordance with the expressed preferences of such persons, and obtain informed consent as soon as possible.</p>	<ul style="list-style-type: none"> • Does a defined informed consent process exist within my practice setting? <ul style="list-style-type: none"> ○ What level of formality is appropriate to my practice? ○ Who is involved in obtaining informed consent? ○ Does my process address clinical, administrative, legal and financial issues? • Does a process for making decisions regarding competency exist in my practice? <ul style="list-style-type: none"> ○ How do I define competency to provide consent within my practice? ○ How do I determine that a person is competent to provide consent? ○ What types of competency concerns might I encounter in my practice? • Does my current process include all the services I provide or might provide to this client? • Do I have a process to confirm what my client has understood about informed consent?

Standard of Practice	Self-Review Questions
	<ul style="list-style-type: none"> ○ How might this feedback process occur in my practice? ○ What process might be required if the feedback process confirms that the client does not understand the information provided? ● Do I have a working definition of what "urgent" might mean in my practice context? ● Do I have a working understanding of what it means to have a minimal level of consent?
<p>Responsibility to Give Consent</p> <p>2.2 Psychologists shall carry out informed consent processes with those persons who are legally responsible or appointed to give informed consent on behalf of persons not competent to consent on their own behalf, seeking to ensure respect for any expressed preferences of persons not competent to consent.</p>	<ul style="list-style-type: none"> ● Does my process reflect current laws regarding who may consent to psychological services? ● Do I have a process by which I determine who is legally responsible to give consent? ● Do I have a process for determining who can give consent in unusual situations? ● What challenges in determining who can give consent are likely to arise in my practice? ● Have I explored issues of assent (i.e., to agree to something or express agreement) as well as consent (i.e., to give permission or approval for something to happen) within my process? ● Do I have a standardized method of documenting the process?
<p>The Basics of Consent</p> <p>2.3 Psychologists shall provide, in obtaining informed consent, such information as a "reasonable" person should want to know to make a decision to consent to the service. The psychologist must relay this information in language that the persons understand (including providing translation into another language, if necessary) and will take whatever "reasonable" steps are needed to ensure that the information is understood.</p>	<ul style="list-style-type: none"> ● Have I defined, for my practice, what information a "reasonable" person might need to know in order to give consent? <ul style="list-style-type: none"> ○ Is this a research-based determination? ○ Have I consulted with other professionals in my area of practice? ○ Does my definition of "reasonable" reflect the needs and abilities of the population(s) I serve? ● Do I have a defined process for providing this information? ● What does the "reasonable" person need to know to give consent regarding my professional qualifications, theoretical foundations, choice of interventions or the issues I address? ● How do I describe my services to clients? <ul style="list-style-type: none"> ○ What degree of detail is required? ○ What level of literacy do I use for descriptions and materials? Is it

Standard of Practice	Self-Review Questions
	<p style="text-align: center;">appropriate for my client population?</p> <ul style="list-style-type: none"> • How do I confirm that a client understands the information provided to them? • Have I considered literacy, language, culture, attitudes to authority, etc. in my process? • What barriers to consent may be present for the population I serve?
<p>Dealing with Emerging Issues</p> <p>2.4 Psychologists shall provide new information in a timely manner whenever such information becomes available and is significant enough that it could reasonably be seen as relevant to the original or ongoing informed consent.</p>	<ul style="list-style-type: none"> • Am I providing services not discussed in the original discussion of consent? • How does my informed consent process address changing / emerging client needs? • Does my informed consent process revisit consent? • Is my consent process flexible enough to be consistent with my client's ongoing and emerging needs? • How might the practices and demands of other team members or third parties impact my informed consent process? • What specific challenges exist for me regarding emerging issues due to my particular setting and practice style?
<p>Dealing with Coercion</p> <p>2.5 Psychologists shall take all "reasonable" steps to obtain consent that is not given under conditions of coercion or undue pressure.</p>	<ul style="list-style-type: none"> • What conditions exist within my practice or environment that might apply coercion or pressure to my clients? • What potentially coercive conditions might arise within my setting? • Do I discuss potential coercion and existing contextual pressures that influence consent with my clients? <ul style="list-style-type: none"> ○ Is there an opportunity to review the difference between consent and assent with clients? ○ How do I document this discussion? • Does my process include a discussion with clients of their right to refuse to participate or withdraw previous consents? <ul style="list-style-type: none"> ○ Does my process include a discussion of the implications of refusal to participate and rescind consent that is considerate of coercion and pressure? ○ How might my clients perceive my professional authority? <ul style="list-style-type: none"> ▪ How might my professional status and authority influence client decisions regarding consent?

Standard of Practice	Self-Review Questions
	<ul style="list-style-type: none"> • What is my commitment to informed consent as part of my practice? • Do I have a need to advocate with the organization(s)/multidisciplinary teams that I work with to ensure my professional needs regarding informed consent are met?
<p>Documenting Consent</p> <p>2.6 Psychologists shall document the discussion held with their clients and whether informed consent was obtained.</p>	<ul style="list-style-type: none"> • Have I considered what level of documentation is most appropriate in my setting? • Does my level of documentation meet the professional and legal needs of my setting? • Have I determined the format of documenting informed consent in my practice? <ul style="list-style-type: none"> ○ What is the value of written consent in my practice? <ul style="list-style-type: none"> ▪ When is written consent to be obtained in my practice? ○ What is the value of oral consent in my practice? <ul style="list-style-type: none"> ▪ When is oral consent to be obtained in my practice? ○ What is the minimum level of documentation of consent for my practice? ○ How is information about informed consent communicated in my professional work (e.g., consultations, reports, letters, etc.)? • Have I considered the limitations of my consent process in relation to record retention and distribution? <ul style="list-style-type: none"> ○ What are the limits of my control regarding my records (e.g., storage after retirement, distribution of reports by third parties, etc.)?

Summary

This critical self-review provides psychologists with an opportunity to engage in a private or shared reflective process. The process respects the practical direction of the CAP Standards of Practice and the aspirational CPA Code of Ethics.

References

Canadian Psychological Association (2000). Canadian Code of Ethics for Psychologists, 3rd Edition.

<http://www.cpa.ca/cpsite/userfiles/Documents/Canadian%20Code%20of%20Ethics%20for%20Psycho.pdf> downloaded on November 5, 2006.

College of Alberta Psychologists (2005). College of Alberta Psychologists Standards of Practice. <http://www.cap.ab.ca/pdfs/HPAStandardsofPractice.pdf> downloaded on November 5, 2006.