

**TITLE 17
LEGISLATIVE RULE
PSYCHOLOGISTS**

**SERIES 6
CODE OF CONDUCT**

§17-6-1. General.

1.1. Scope. -- These legislative rules define the code of conduct for psychologists and school psychologists

1.2. Authority. -- W. Va. Code §30-21-6.

1.3. Filing Date. -- April 26, 2018.

1.4. Effective Date. -- July 1, 2018.

1.5. Sunset Provision. -- This rule shall terminate and have no further force or effect on July 1, 2023.

§17-6-2. Purpose, Scope, Responsibility, Violations, and Aids to Interpretation.

2.1. The purpose of the rules within this Code of Conduct constitutes the standards against which the required professional conduct of a psychologist or school psychologist is measured.

2.2. The scope of the psychologist shall be governed by this Code of Conduct whenever providing psychological services in any context. This Code shall not supersede state or federal statutes. This Code shall apply to the conduct of all licensees and applicants, including the applicant's conduct during the period of education, training, supervision, and employment which is required for licensure. The terms "Psychologist" and "School Psychologist," as used within this Code, shall be interpreted accordingly.

2.3. The psychologist shall be responsible for his/her own professional decisions and professional actions.

2.4. A violation of this Code of Conduct constitutes unprofessional conduct and is sufficient reason for disciplinary action or denial of either original licensure or reinstatement of licensure.

2.5. Ethics codes and standards for providers promulgated by the Association of State and Provincial Psychology Boards (ASPPB), the American Psychological Association, and other relevant professional groups shall be used as an aid in resolving ambiguities which may arise in the interpretation of this Code of Conduct, except that this Code of Conduct shall prevail whenever any conflict exists between this Code and any professional association standard.

§17-6-3. Definitions – Psychologist, School Psychologist, Client, Court Order, Licensed, Professional Relationship, Professional Service and Supervisees.

3.1. The term “Psychologist” means licensed psychologist, licensed school psychologist, supervised psychologist, and supervised school psychologist.

3.2. The term “Client,” also known as patient is: (a) A direct recipient of psychological services within the context of a professional relationship including a child, adolescent, adult, couple, family, group, organization, community, or other populations, or other entities receiving psychological services; (b) The individual or entity requesting the psychological services and not necessarily the recipient of those services (e.g., an evaluation that is court-ordered, requested by an attorney, an agency, other administrative body or organization or business); (c) An organization, such as a business, corporate entity, community or government that receives services directed primarily to the organization, rather than to the individuals associated with the organization; or (d) An individual with a legal guardian, including minors and legally incompetent adults; the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitative dual relationships, or issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship.

3.2.a. In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for (a) issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitive multiple relationships, and (b) issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship.

3.3. “Confidential information” means information revealed by a client or clients or otherwise obtained by a psychologist, where there is reasonable expectation that because of the relationship between the client(s) and the psychologist, or the circumstances under which the information was revealed or obtained, the information shall not be disclosed by the psychologist without the informed written consent of the client(s).

3.4. “Court order” means the written or oral communication of a member of the judiciary, or other court magistrate or administrator, if such authority has been lawfully delegated to such magistrate or administrator. A subpoena is not a court order.

3.5. “Licensed” means licensed, certified, registered, or any other term when such term identifies a person whose professional behavior is subject to regulation by the Board.

3.6. “Professional relationship” means a mutually agreed upon relationship between a psychologist and a client(s) for the purpose of the client(s) obtaining the psychologist’s professional expertise.

3.7. “Professional service” means all actions of the psychologist in the context of a professional relationship with a client.

3.8. “Supervisee” means any person who functions under the extended authority of the psychologist to provide, or while in training to provide, psychological services. Supervisees include but are not limited to supervised psychologists or supervised school psychologists.

§17-6-4. Competence – Limits on Practice, Maintaining Competency, Accurate Representation, Adding New Services and Techniques, Referral, Sufficient Professional Information, Maintenance and Retention of Records, Continuity of Care, and Providing Supervision.

4.1. The psychologist shall limit practice and supervision to the areas of competence in which proficiency has been gained through education, training, and experience

4.2. The psychologist shall maintain current competency in the areas in which he/she practices, through continuing education, consultation, and/or other procedures, in conformance with current standards of scientific and professional knowledge.

4.3. A licensee shall accurately represent his or her areas of competence, education, training, experience, and professional affiliations to the Board, the public, and colleagues.

4.4. The psychologist, when developing competency in a service or technique that is either new to the psychologist or new to the profession, shall engage in ongoing consultation with other psychologists or relevant professionals shall seek appropriate education and training in the new area, and shall seek and acquire Board approval for new services and techniques. The psychologist shall inform clients of the innovative nature and the known risks associated with the services, so that the client can exercise freedom of choice concerning such services.

4.5. The psychologist shall make or recommend referral to other professional, technical, or administrative resources when such referral is clearly in the best interests of the client.

4.6. A psychologist rendering a formal professional opinion about a person, for example about the fitness of a parent in a custody hearing, shall not do so without direct and substantial professional contact with or a formal assessment of that person.

4.7. Professional records shall be maintained by a psychologist rendering professional services to an individual client (or a dependent), or services billed to a third-party payor.

4.7.a. These records shall include (a) the name of the client and other identifying information, (b) the presenting problem(s) or purpose or diagnosis, (c) the fee arrangement, (d) the date and substance of each billed or service-count contractor service, (e) any test results or other evaluative results obtained and any basic test data from which they were derived, (f) notation and results of formal consults with other providers, (g) a copy of all test or other evaluative reports prepared as part of the professional relationship, (h) any releases executed by the client.

4.7.b. To meet the requirements of this rule, to provide a formal record for review, but not necessarily for other legal purposes, the psychologist shall assure that all data entries in the professional records are maintained for a period of not less than five years after the last date that service was rendered or for a longer period if required by law.

4.7.c. The psychologist shall store and dispose of written, electronic and other records in such a manner as to insure their confidentiality. The psychologist shall maintain the confidentiality of all psychological records in the psychologist's possession or under the psychologist's control except as otherwise provided by law or pursuant to written or signed authorization of a client specifically requesting or authorizing release or disclosure of the client's psychological records.

4.7.d. For each person, professionally supervised, the psychologist shall maintain for a period of not less than five years after the last date of supervision a record that shall include, among other information, the type, place, and general content of the supervision.

4.8. Continuity of care. The psychologist shall make arrangements for another appropriate professional or professionals to deal with emergency needs of his/her clients, as appropriate, during periods of his/her foreseeable absences from professional availability.

4.9. Providing supervision. The psychologist shall exercise appropriate supervision over supervisees, as set forth in the rules and regulations of the Boards.

4.10. Delegating professional responsibility. The psychologist shall not delegate professional responsibilities to a person not appropriately credentialed or otherwise appropriately qualified to provide such services.

§17-6-5. Multiple Relationships – Definition of Multiple Relationships, Prohibited Multiple Relationships and Sexual Relationships

5.1. Definition of multiple relationships. Psychologists recognize that multiple relationships may occur because of the psychologist's present or previous familial, social, emotional, financial, supervisory, political, administrative or legal relationship with the client or a relevant person associated with or related to the client. Psychologists take reasonable steps to ensure that if such a multiple relationship occurs, it is not exploitative of the client or a relevant person associated with or related to the client.

5.1.a. Prohibited Multiple Relationships - A multiple relationship that is exploitative of the client or a relevant person associated with or related to the client is prohibited. Psychologists take all reasonable steps to ensure that any multiple relationships do not impair the psychologist's professional judgment or objectivity or result in a conflict of interest with the client or a relevant person associated with or related to the client.

5.1.b. Multiple relationships that would not reasonably be expected to impair a psychologist's judgment or objectivity or risk harm to the client or relevant person associated with or related to the client are not expressly prohibited.

5.2. Sexual Relationships

5.2.a. Psychologists do not engage in sexual intimacies with current clients.

5.2.b. Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients.

5.2.c. Psychologists do not terminate the professional relationship to circumvent this standard.

5.2.d. Psychologists do not accept as therapy clients, persons with whom they have engaged in sexual intimacies.

5.2.e. Psychologists do not engage in sexual intimacies with former clients to whom the psychologist has at any time within the previous 24 months provided a psychological service including but not limited to performing an assessment or rendering counseling, psychotherapeutic, or other professional psychological services for the evaluation, treatment or amelioration of emotional distress or behavioral inadequacy.

5.2.f. The prohibitions set out in (e) above shall not be limited to the 24-month period but shall extend indefinitely if the client is proven to be clearly vulnerable, by reason of emotional or cognitive disorder, to exploitative influence by the psychologist.

§17-6-6. Impairment.

6.1. Impaired psychologist. The psychologist shall not undertake or continue a professional relationship with a client when the psychologist is, or could reasonably be expected by the Board to be, impaired due to mental, emotional, physiologic, pharmacologic, or substance abuse conditions. If such a condition develops after a professional relationship has been initiated, the psychologist shall terminate the relationship in an appropriate manner, shall notify the client in writing of the termination, and shall assist the client in obtaining services from another professional.

§17-6-7. Client Welfare – Explanation of Procedures, Termination of Services, Stereotyping, Solicitation of Business by Clients, Referrals on Request and Harassment.

7.1. Providing explanation of procedures. The psychologist shall give a truthful, understandable, and appropriate account of the client's condition to the client or to those responsible for the care of the client. The psychologist shall keep the client fully informed as to the purpose and nature of any evaluation, treatment, or other procedures, and of the client's right to freedom of choice regarding services provided.

7.2. Termination of services. Whenever professional services are terminated, if feasible, the psychologist shall offer to help locate alternative sources of professional services or assistance when indicated. The psychologist shall terminate a professional relationship when it is reasonably clear that the client is not benefiting from the relationship, and, if feasible, shall prepare the client appropriately for such termination. A psychologist may terminate a professional relationship when threatened or otherwise endangered by the client or another relevant person associated with or related to the client.

7.3. Stereotyping. The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client.

7.4. Solicitation of business by clients. The psychologist providing services to an individual client shall not induce that client(s) to solicit business on behalf of the psychologist.

7.5. Referrals on request. The psychologist providing services to a client shall, if feasible, make an appropriate referral of the client to another professional when requested to do so by the client.

7.6. Harassment. Psychologists do not engage in any verbal or physical behavior with clients which is seductive, demeaning or harassing.

§17-6-8. Welfare of Supervisees, and Participants and Students

8.1. Welfare of supervisees. The psychologist shall not engage in any verbal or physical behavior with supervisees which is seductive, demeaning or harassing or exploit a supervisee in any way -- sexually, financially or otherwise.

8.2. Welfare of research participants. The psychologist shall respect the dignity and protect the welfare of his/her research participants, and shall comply with all relevant statutes and administrative rules concerning treatment of research participants.

8.3. Welfare of students. The psychologist shall not engage in any verbal or physical behavior with students which is seductive, demeaning or harassing or exploit a student in any way – sexually, financially or otherwise.

§17-6-9. Protecting Confidentiality of Clients

9.1. In general, the psychologist shall safeguard the confidential information obtained in the course of practice, teaching, research, or other professional services. With the exceptions set forth below or in accordance with any federal, state or provincial statute or regulation, the psychologist shall disclose confidential information to others only with the informed written consent of the client.

9.2. Disclosure without informed written consent. The psychologist may disclose confidential information without the informed written consent of the client when the psychologist judges that disclosure is necessary to protect against a clear and substantial risk of imminent serious harm being inflicted by the client on the client or another person. In such case, the psychologist shall limit disclosure of the otherwise confidential information to only those persons and only that content which would be consistent with the standards of the profession in addressing such problems. When the client is an organization, disclosure shall be made only after the psychologist has made a reasonable and unsuccessful attempt to have the problems corrected within the organization.

9.3. Services involving more than one interested party. In a situation in which more than one party has an appropriate interest in the professional services rendered by the psychologist to a client or clients, the psychologist shall, to the extent possible, clarify to all parties prior to rendering the services the dimensions of confidentiality and professional responsibility that shall pertain in the rendering of services. Such clarification is specifically indicated, among other circumstances, when the client is an organization.

9.4. Multiple clients. When service is rendered to more than one client during a joint session, for example to a family or a couple or a parent and child or a group, the psychologist shall at the beginning of the professional relationship clarify to all parties the manner in which confidentiality will be handled. All parties shall be given opportunity to discuss and to accept whatever limitations to confidentiality adhere in the situation.

9.5. Legally dependent clients. At the beginning of a professional relationship, to the extent that the client can understand, the psychologist shall inform a client who is below the age of majority or who has a legal guardian, of the limit the law imposes on the right of confidentiality with respect to his/her communications with the psychologist.

9.6. Limited access to client records. The psychologist shall limit access to client records to preserve their confidentiality and shall assure that all persons working under the psychologist's authority comply with the requirements for confidentiality of client material.

9.7. Release of confidential information. The psychologist may release confidential information upon court order, as defined in Section II of this Code, or to conform with state, federal or provincial law, rule, or regulation.

9.8. Reporting of abuse of children and vulnerable adults. The psychologist shall be familiar with any relevant law concerning the reporting of abuse of children and vulnerable adults, and shall comply with such laws.

9.9. Discussion of client information among professionals. When rendering professional services as part of a team or when interacting with other appropriate professionals concerning the welfare of the client, the psychologist may share confidential information about the client provided the psychologist takes reasonable steps to assure that all persons receiving the information are informed about the confidential nature of the information and abide by the rules of confidentiality.

9.10. Disguising confidential information. When case reports or other confidential information is used as the basis of teaching, research, or other published reports, the psychologist shall exercise reasonable care to insure that the reported material is appropriately disguised to prevent client identification.

9.11. Observation and electronic recording. The psychologist shall ensure that observation or electronic recording of a client occur only with the informed written consent of the client.

9.12. Confidentiality after termination of professional relationship. The psychologist shall continue to treat as confidential information regarding a client after the professional relationship between the psychologist and the client has ceased.

§17-6-10. Representation of Services

10.1. Display of license. The psychologist shall display his/her current (name of jurisdiction) license to practice psychology, on the premises of his/her professional office.

10.2. Misrepresentation of qualifications. The psychologist shall not misrepresent directly or by implication his/her professional qualifications such as education, experience, or areas of competence.

10.3. Misrepresentation of affiliations. The psychologist shall not misrepresent directly or by implication his/ her affiliations, or the purposes or characteristics of institutions and organizations with which the psychologist is associated.

10.4. False or misleading information. The psychologist shall not include false or misleading information in public statements concerning professional services offered.

10.5. Misrepresentation of services or products. The psychologist shall not associate with or permit his/her name to be used in connection with any services or products in such a way as to misrepresent (a) the services or products, (b) the degree of his/her responsibility for the services or products, or (c) the nature of his/her association with the services or products.

10.6. Correction of misrepresentation by others. The psychologist shall correct others who misrepresent the psychologist's professional qualifications or affiliations.

§17-6-11. Fees and Statements

11.1 Disclosure of cost of services. The psychologist shall not mislead or withhold from the client, a prospective client, or third party payor, information about the cost of his/her professional services.

11.2. Reasonableness of fee. The psychologist shall not exploit the client or responsible payor by charging a fee that is excessive for the services performed or by entering into an exploitive bartering arrangement in lieu of a fee.

§17-6-12. Assessment Procedures

12.1. Confidential information. The psychologist shall treat an assessment result or interpretation regarding an individual as confidential information.

12.2. Communication of results. The psychologist shall accompany communication of results of assessment procedures to the client, parents, legal guardians or other agents of the client by adequate interpretive aids or explanations.

12.3. Reservations concerning results. The psychologist shall include in his/her report of the results of a formal assessment procedure, for which norms are available, any deficiencies of the assessment norms for the individual assessed and any relevant reservations or qualifications which affect the validity, reliability, or other interpretation of results.

12.4. Protection of integrity of assessment procedures. The psychologist shall not reproduce or describe in popular publications, lectures, or public presentations psychological tests or other assessment devices in ways that might invalidate them.

12.5. Information for professional users. The psychologist offering an assessment procedure or automated interpretation service to other professionals shall accompany this offering by a manual or other printed materials which fully describes the development of the assessment procedure or service, the rationale, evidence of validity and reliability, and characteristics of the normative population. The psychologist shall explicitly state the purpose and application for which the procedure is recommended and identify special qualifications required to administer and interpret it properly. The psychologist shall ensure that the advertisements for the assessment procedure or interpretive service are factual and descriptive.

12.6. Psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions.

12.7. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions and appropriately limit the nature and extent of their conclusions or recommendations.

§17-6-13. Test Scoring and Interpretation Services

13.1. Psychologists retain responsibility for the appropriate application, interpretation and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services. When using automated interpretation programs, psychologists shall analyze and interpret test data and the computer-generated interpretation report and apply pertinent findings to the specific client. If using the computer-generated interpretation report word for word, psychologists shall place such information in quotes and identify the source.

13.1.a. Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability and applications of the procedures and any special qualifications applicable to their use.

13.1.b. Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations.

§17-6-14. Maintaining Test Security.

14.1. Psychologists shall maintain the integrity and security of assessment-materials, assessment data, and other assessment techniques consistent with law and contractual obligations, and in adherence to this ethics code.

14.2. The term assessment-materials refers to manuals, instruments, protocols, raw scores, client responses to test questions or stimuli, test questions or stimuli: psychologists' notes and recordings concerning client/patient statements and behavior during an examination; as well as responses of significant others, parents, teachers, and other third-parties to collateral assessment instrument questions or stimuli.

14.3. Psychologists shall only release assessment-materials to other psychologists who are qualified to interpret such information.

14.4. The term assessment-data refers to T-scores, standard-scores, index-scores, IQ-scores, scaled scores and similar scores. The term assessment-data does not include raw scores.

14.5. In their reports psychologists include assessment-data sufficient that evaluation results may be explained.

14.6. Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release.

14.7. Psychologists shall refrain from releasing assessment-data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law.

14.8. In the absence of a client/patient release, psychologists provide test data only as required by law or court order.

§17-6-15. Violations of Law.

15.1. Psychologists shall not violate any applicable statute or administrative rule regulating the practice of psychology.

15.2. Use of fraud, misrepresentation, or deception. Psychologists shall not use fraud, misrepresentation, or deception in obtaining a psychology license, in passing a psychology licensing examination, in assisting another to obtain a psychology license or to pass a psychology licensing examination, in billing clients or third party payors, in providing psychological service, in reporting the results of psychological evaluations or services, or in conducting any other activity related to the practice of psychology.

§17-6-16. Aiding Unauthorized Practice.

16.1. Psychologists shall not aid or abet another person in misrepresenting his/her professional credentials or in illegally engaging in the practice of psychology.

16.2. Psychologists shall not delegate professional responsibilities to a person not appropriately credentialed or otherwise appropriately qualified to provide such services.

§17-6-17. Resolving Ethical Issues.

17.1. If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

17.2. If psychologists' ethical responsibilities conflict with law, regulations or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

17.3. If the demands of an organization with which psychologists are affiliated or for whom they are working are in conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the ethics code. Under no circumstances may this standard be used to justify or defend violating human rights.

17.4. When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved.

§17-6-18. Reporting Suspected Violations.

18.1. Reporting of violations to Board. If required by statute and/or the psychologist who has substantial reason to believe that there has been a violation of the statutes or rules of the Board, that might reasonably be expected to be harmful, shall report such violation to the Board. Unless required by statute, the client's name may be provided only with the written consent of the client.

18.2. Providing information to client. When a psychologist learns from a client of a possible violation of the statutes or rules of the Board, or when a psychologist receives a request from a client for information on how to file a complaint with the Board, the psychologist has an obligation to inform the client of the standards of practice of psychology and how to file a complaint with the Board.

§17-6-19. Psychological Service Delivered via Employers and Organization.

19. Psychologists shall adhere to this ethical code even if their Employers and employer organizations direct, attempt to influence them or pressure them to act unethically.

§17-6-20. Education and Training.

20.1. Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification or other goals for which claims are made by the program.

20.2. Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects or community service), training goals and objectives, stipends and benefits and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

20.3. Psychologists (a) take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (b) When engaged in teaching or training, psychologists present psychological information accurately.

20.4. Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment and relationships with parents, peers and spouses or significant others except if (a) the program or training facility has clearly identified this requirement in its admissions and program materials or (b) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

20.5. Mandatory individual or group therapy: (a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners

unaffiliated with the program. (b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy.

20.6. Assessing student and supervisee performance: (a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision. (b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

20.7. Sexual relationships with students and supervisees are prohibited. Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority.

20.8. When students are providing group and/or individual therapy as part of a class or practicum requirement, psychologists shall assure that informed consent, from clients, parents of clients, or guardians of clients is obtained. The informed consent should clearly indicate if any recording of voices or images will occur.

§17-6-21. Research and Publication.

21.1 Institutional approval: When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

21.2. Informed consent to research (a) When obtaining informed consent psychologists inform participants about (1) the purpose of the research, expected duration and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. They provide opportunity for the prospective participants to ask questions and receive answers. (b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought.

21.3. Informed consent for recording voices and images in research. Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal

identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing.

21.4. Client/Patient, student, and subordinate research participants: (a) When psychologists conduct research with clients/patients, students or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation. (b) When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

21.5. Dispensing with informed consent for research: psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations.

21.6. When offering inducements for research participation, psychologists (a) make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation. (b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations and limitations.

21.7. Deception in research (a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational or applied value and that effective nondeceptive alternative procedures are not feasible. (b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress. (c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data.

21.8. Debriefing (a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware. (b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm. (c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

21.9. Humane care and use of animals in research (a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state and local laws and regulations, and with professional standards. (b) Psychologists trained in research methods and experienced

in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health and humane treatment. (c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance and handling of the species being used, to the extent appropriate to their role. (d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness and pain of animal subjects. (e) Psychologists use a procedure subjecting animals to pain, stress or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational or applied value. (f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery. (g) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.

21.10. Reporting research results: (a) Psychologists do not fabricate data. (b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum or other appropriate publication means.

21.11. Plagiarism: Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally.

21.12. Publication Credit: (a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement. (c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate.

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