

How I protect myself and consumers – responsible service management

Dr Phil Watts
 Adjunct Associate Professor in Clinical Psychology
 Forensic Psychologist
 Neurofeedback practitioner, QEEG Diplomat, BCIA-A Chair

Why think about what you do with a new client?

- Treatment outcomes are better when expectations are clear
- Clients feel safe and will recommend you
- You will not have the stress of professional allegations
- You could be subject to legal outcomes – sued
- You could be subject to consumer law issues

Guiding Principles of Good Practice

Behavioural action points

- Advertising**
 - Explanations, frequently asked questions
- booking**
 - How you set up the appointment
 - Contract and information prior to appointment
- treatment**
 - Contract
 - Explanations, especially around touch
- followup**
 - Review and respond

Advertising

- Consumer law
- Sets Expectations


Consumer Laws

Australia has State and Federal laws about misleading or deceiving consumers which include unconscionable conduct. It extends to provision of professional services including counselling. Monetary compensation can be awarded if misleading statements are used about:-

- The standard quality or grade of the counselling.
- The performance characteristics or benefit of the service.
- The price of the service, length of time required.
- The need for counselling or the suitability of the type of counselling.
- Failure to disclose risks may imply none exist (see informed consent).

SATISFACTORY QUALITY,
As
DESCRIBED

FIT FOR PURPOSE
AND LAST A
REASONABLE LENGTH OF
TIME




Booking

- Information about treatment – letter
- Confirmation of appointments

How Much Treatment?

- Explain that is not a quick fix
- Explain the costs
- Explain the compliance issues

Treating Stage



Clients have Rights:-

- What treatment will take place is up to the person not the therapist.
- The efficacy of the treatment needs to be known and explained.
- Any side effects or risk from the treatment are important information.
- What other options are available and are you competent to advise? (e.g. medication for depression)
- Likely impact if there was no treatment

Evidence Based Practice

Advantage	disadvantage
<ul style="list-style-type: none"> • Reasonably Prudent Psychologists do this. • Science based. • Everyone does it. • Know that it works. 	<ul style="list-style-type: none"> • No progress in science. • New techniques may be found to work. • Who <i>really</i> does evidence based treatment anyway?
<p>Lower likelihood of being sued, or found incompetent.</p>	<p>Need to inform that is an experimental technique if not evidence based</p>

Boundaries



Therapy is an unequal relationship between two people. We should know where we stand and cannot expect the other person to have the same understanding.

One of the most common problems for psychologists is we either forget where we should stand or don't tell the client what they can and cannot do.

Physical Contact

Any unwanted touching, that is, intentional physical contact without consent, may amount to an assault.

- It does not have to result in injury.
- It does not include accidental brushing
- It can render you liable for criminal prosecutions, could result in an award against in civil action, and professional misconduct.



"My therapy is quite simple: I wag my tail and lick your face until you feel good about yourself again."

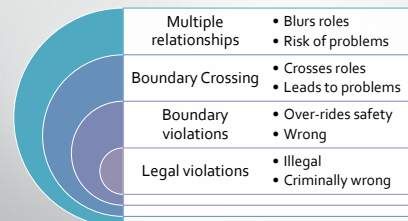
Touch

- Is putting on an electrode physical touch
- When does rubbing the ear with Nuprep cross over to fondling the ear....?
- What about doing TDCS and placing an electrode on the shoulder....?
- Male therapist standing, she is sitting, are you "perving" on her breasts...?
- Tell them what you are doing, use caution, minimal touch

Guidelines relating to procedures/ assessments that involve psychologist- client physical contact (May 2006)

- *Where interventions or assessments require physical contact between psychologists and clients, it is always necessary that a third party be in the vicinity.*
- *Clients are consulted on whether or not they wish to have a third party present in the room during the procedure/assessment.*
- *The location and identity of the third party (partner, family member, employee of the psychologist, etc.) must be agreed upon before the commencement of the procedure and should be documented in the notes for that session, or in a pre-written, signed agreement.*

Some Pathways to Boundary violations



Follow-up

- Clients need to know you are checking that it is working
- Performance measured is better than subjective change



Enemies to Good Management

Ignorance	• Don't know the problems
Busy, Tired	• Cut corners
Careless	• Make errors leading to problems
Over-estimate Capacity	• Take on too much
Greed	• Cut systems to save time / money
Poor Systems	• React rather than manage

Bullet-Proofing Risk

- Mainstream practice
- Evidence based / "Experimental" when not evidence
- Informed consent in all steps of the process
- Careful statements of benefits and expectations
- Don't make unsupported statements
- Don't remain silent on any aspect of service if telling them may impact their decision to engage.
- Explain treatments steps and all touch processes
- Good Records