PRINCIPLES AND STANDARDS OF ETHICS
FOR PSYCHOANALYSTS
And Procedures for their Implementation

2460 Fairmount Boulevard, Suite 312
Cleveland Heights, OH 44106-3164

phone: 216-229-5959  fax: 216-229-7321

e-mail: dmorsepc@sbcglobal.net
Website: www.psychoanalysiscleveland.org

______, 2018

Based on the Principles and Standards of Ethics of
The American Psychoanalytic Association
INTRODUCTION:

These principles are intended to assist Psychoanalysts and those training to be Psychoanalysts (“Psychoanalysts”) in maintaining a high level of ethical conduct. They are not laws, but standards by which a Psychoanalyst may determine the propriety of his or her conduct in his or her relationship with patients, colleagues, candidates, supervisees, residents, students, members of allied professions and the public.

When doubts about the ethics of a Psychoanalyst’s conduct arise, early intervention is encouraged. Prompt consultation and mediation tend to serve the best interest of all parties concerned.

There are times when ethical principles conflict, making a choice of action difficult. When balancing ethical obligations, the first duty is to the patient directly, or indirectly through supervision or consultation with or by the treating Psychoanalyst. In the case of patients who are minors there are also ethical obligations to parent(s) or guardian(s), which change as the patient becomes older and more mature. Thereafter, ethical obligations are to the profession, to students and colleagues and to society must also be considered. Judgment, integrity and common sense may be required in some situations, e.g., legal requirement for reporting.

The ethical practice of psychoanalysis requires the Psychoanalyst to be familiar with these Principles & Standards, which are in accordance with those of the American Psychoanalytic Association; to conduct regular self-examination; to seek consultation promptly when ethical questions arise; and to reach appropriate sanctions when judging the actions of a colleague.

I. Professional Competence:

A) Psychoanalysts are expected to work within the range of their professional competence and to refuse responsibilities for which they not are trained. B) Psychoanalysts should keep up to date with changes in theories and techniques and to make appropriate use of professional consultations both psychoanalytic and in allied fields such as psychopharmacology.
C) Psychoanalysts should seek to avoid making claims in public presentations that exceed the scope of their competence.

D) A Psychoanalyst should take steps to correct any impairment in his or her analyzing capacities and do whatever is necessary to protect patients from such impairment.

II. **Respect for Persons:**

A) Psychoanalysts should try to eliminate the effects of biases based on age, disability, ethnicity, gender, race, culture, religion, sexual orientation, gender identity or expression, or socioeconomic status from his or her work.

B) The Psychoanalyst should refuse to observe, and attempt to change, organizational policies that discriminate with regard to age, disability, ethnicity, gender, race, culture, religion, sexual orientation, gender identity or expression, or socioeconomic status.

III. **Mutuality and Informed Consent:**

A) Psychoanalytic treatment exists by virtue of an informed choice leading to a mutually accepted agreement between a Psychoanalyst and a patient or the parent(s) or guardian(s) of a minor patient.

B) It is not ethical for a Psychoanalyst to take advantage of the power of the transference relationship to actively solicit patients, students or supervisees into treatment or to prompt testimonials from current or former patients. Neither is it ethical to take such advantage in relation to parent(s) or guardian(s) or current or former patients.

C) It is unethical for a Psychoanalyst to use his/her position of power in analytic organization, professional status or special relationship with a potential patient or parent or guardian of a minor patient to coerce or manipulate the person into treatment.

D) Careful attention should be given to the process of a referral to avoid conflicts of interest with other patients and colleagues.

E) All aspects of the treatment contract which are applicable should be discussed with the patient during the initial consultation process. The Psychoanalyst’s policy of charging for missed sessions should be understood in advance of such a charge. The applications of this policy to third party payment for services should be discussed and agreed upon by the patient. In the case of patients who are minors these matters should be discussed early on with the parent(s) or guardian(s) as well as with the patient as age and capability dictate.

F) A reduced fee does not limit any of the Psychoanalyst’s ethical responsibilities.
G) The Psychoanalyst should not unilaterally discontinue treating a patient without adequate notification and discussion with the patient and, if a minor, with the parent(s) or guardian(s) and an offer of referral for further treatment. Consultation with the Patient and Colleague Assistance Committee should be considered.

IV. Confidentiality:

A) All information about the specifics of a patient’s life is confidential, including the name of the patient and the fact of treatment. The Psychoanalyst should resist disclosing confidential information to the full extent permitted by law. Furthermore, it is ethical, though not required, for a Psychoanalyst to refuse legal, civil or administrative demands for such confidential information even in the face of the patient’s informed consent and accept instead the legal consequences of such a refusal.

B) The Psychoanalyst should never share confidential information about a patient with non-clinical third-parties (e.g., insurance companies) without the patient’s or, in the case of a minor patient, the parent’s or guardian’s informed consent. For the purpose of claims review or utilization management, it is not a violation of confidentiality for a Psychoanalyst to disclose confidential information to a consultant Psychoanalyst, provided the consultant is also bound by the confidentiality standards of these Principles and the informed consent of the patient or parent or guardian of minor patient has first been obtained. If a third-party payer or patient or parent or guardian of a minor patient demands that the Psychoanalyst act contrary to these Principles, it is ethical for the Psychoanalyst to refuse such demands, even with the patient’s or, in the case of minor patient, the parent’s or guardian’s informed consent.

C) The Psychoanalyst of a minor patient must seek to preserve the patient’s confidentiality, while keeping parents or guardians informed of the course of treatment in ways appropriate to the age and stage of development of the patient, the clinical situation and these Principles.

D) The Psychoanalyst should take particular care that patient records and other documents are handled so as to protect patient confidentiality. A Psychoanalyst may direct an executor to destroy such records and documents after his or her death.

E) It is not a violation of confidentiality for a Psychoanalyst to disclose confidential information about a patient in a formal consultation or supervision in which the consultant or supervisor is also bound by the confidentiality requirements of these Principles. On seeking consultation, the Psychoanalyst should first ascertain that the consultant or supervisor is aware of and accepts the requirements of the
Confidentiality standard.

F) If the Psychoanalyst uses confidential case material in clinical presentations or in scientific or educational exchanges with colleagues, either the case material must be disguised sufficiently to prevent identification of the patient, or the patient’s informed consent must first be obtained. If the latter, the Psychoanalyst should discuss the purpose(s) of such presentations, the possible risks and benefits to the patient’s treatment and the patient’s right to withhold or withdraw consent. In the case of a minor patient, parent(s) or guardian(s) should be consulted and, depending on the age and developmental stage, the matter may be discussed with the patient as well.

G) Supervisors, peer consultants and participants in clinical and educational exchanges have an ethical duty to maintain the confidentiality of patient information conveyed for purposes of consultative or case presentations or scientific discussions.

V. Truthfulness:

A) Candidate psychoanalysts are not authorized to represent themselves as graduate psychoanalysts or to conduct psychoanalysis without supervision unless the Candidate receives written permission from the Education Committee. Candidate psychoanalysts are required to comply with the Center’s procedure for informing each prospective patient of the Candidate’s training status prior to the commencement of psychoanalysis and for obtaining the patient’s consent to be treated by a Candidate.

B) The Psychoanalyst should speak candidly with prospective patients or the parent(s) or guardian(s) if the patient is a minor about the benefits and burdens of psychoanalytic treatment.

C) The Psychoanalyst should avoid misleading patients or parents or guardians of minor patients or the public with statements that are knowingly false, deceptive or misleading.

D) The Psychoanalyst owes a duty of candor to his or her colleagues when seeking consultation.

E) The Psychoanalyst has a duty to be honest with his or her colleagues and cooperate in ethics investigations.

VI. Avoidance of Exploitation:

A) Sexual relationships involving any kind of sexual activity between the Psychoanalyst and a current patient, a parent or guardian of a current patient, or any member of the patient’s immediate family —whether
initiated by the patient, the parent, or guardian or family member or by the treating Psychoanalyst — are unethical. Physical touching is not ordinarily regarded as a technique of value in psychoanalytic treatment. If touching occurs, whether of the patient by the Psychoanalyst or of the Psychoanalyst by the patient, such an event should alert the Psychoanalyst to the potential for misunderstanding of the event by the patient or the Psychoanalyst, and consequent harm to the future course of treatment and consultation should be considered. Consultation should be considered if there is concern about the future course of treatment.

B) Sexual relationships involving any kind of sexual activity between the Psychoanalyst and a former patient, a parent or guardian of a former patient, or any member of the former patient’s immediate family, after the conclusion of treatment, are unadvisable and should be avoided.

C) With children before the age of puberty touching between the patient and the Psychoanalyst is likely to occur as in helping or during a patient’s exuberant play. Also, a disruptive or out of control child may need to be restrained. The Psychoanalyst needs to be alert to the multiple meanings for both parties of such touching. Keeping parent(s) or guardian(s) informed when this occurs may be useful. Consultation should be considered if the touching causes the Psychoanalyst concern.

D) Marriage between a Psychoanalyst and a current patient, a Psychoanalyst and a candidate or resident that the Psychoanalyst is supervising (“Supervisee”), or between a Psychoanalyst and the parent or guardian of a current patient is unethical, notwithstanding the absence of a complaint from the spouse and the legal rights of the parties. Marriage between a Psychoanalyst and a former patient, a Psychoanalyst and a former Supervisee, or a Psychoanalyst and the parent or guardian of a former patient, after the conclusion of treatment or supervision, is inadvisable and should be avoided.

E) It is not ethical for a Psychoanalyst to engage in financial dealings with patient, or in the case of a minor patient, the parent(s) or guardian(s) beyond reimbursement for treatment, or to use information shared by a patient or parent(s) or guardian(s) for the Psychoanalyst’s financial gain.

F) It is not ethical for a Psychoanalyst to solicit financial contributions from a current or former patient or the parent/guardian of a current or former patient for any purpose; nor should a Psychoanalyst give the names of current or former patients or their parents/guardians for purposes of financial solicitation by others.

G) If a patient or parent or guardian of a minor patient brings up the idea of a financial gift to a psychoanalytic organization or cause during treatment, it should be handled psychoanalytically and, if necessary, the patient should be informed that his or her confidentiality might be breached by the treating Psychoanalyst’s obligation to recuse him/herself from involvement in decisions.
governing use of the gift. If a gift is given nevertheless, the Psychoanalyst is ethically obliged to refrain from any decision regarding its use by the recipient organization or cause.

H) If a current or former patient or the parent/guardian of a current or former patient, gives an unsolicited financial gift, or establishes a trust or foundation or other entity for the benefit of his/her Psychoanalyst, or for the benefit of the professional or scientific work of said Psychoanalyst, or for the benefit of the Psychoanalyst’s family, or the gift is placed under the control of the Psychoanalyst, even if not directly beneficial to the Psychoanalyst or his/her family, it is not ethical for the Psychoanalyst to accept any financial benefit or to control its disposition.

I) It is ethical for a Psychoanalyst to accept a bequest from the estate of a former patient, provided that it is promptly donated to an organization or cause from which the Psychoanalyst or his/her family do not personally benefit and over which the Psychoanalyst has no direct control.

J) It is unethical for Psychoanalyst to use his or her professional status, special relationship, or position of power in an analytic organization to solicit gifts or funds, sexual favors, sexual or other special relationships, or other tangible benefit from patients, the parent(s) or guardian(s) of minor patients, members of the patient’s immediate family, Psychoanalysts-in-training or Supervisees. Sexual relationships between current Psychoanalyst supervisors and Supervisees are unethical. Sexual relationships between Faculty of the Center and Candidates must be disclosed to the Chair of the Ethics Committee. The Ethics Committee may direct the Faculty member to recuse himself or herself from commenting on or participating in the training of the Candidate.

VII. Scientific Responsibility:

A) The Psychoanalyst should take every precaution in using clinical material to respect the patient’s rights and to minimize the impact of its use on the patient’s privacy and dignity. In the case of minor patients, the impact on parent(s) or guardian(s) needs to be considered. Particular care should be exercised in using material from a patient who is still undergoing treatment.

B) It is unethical for a Psychoanalyst to make public presentations or submit for publication in scientific journals falsified material that does not refer to actual observations drawn from the clinical situation. Such clinical material must be disguised sufficiently to protect identification of the patient.

C) The Psychoanalyst should exercise caution in disguising patient material to avoid misleading colleagues as to the source and significance of his or her scientific conclusions.
VIII. Protection of the Public and the Profession:

A) The Psychoanalyst should seek consultation when, in the course of treating a patient, the work becomes continuously confusing or seriously disturbing to either the Psychoanalyst or the patient, or both. On occasion in the treatment of a minor, the relationship between the Psychoanalyst and parental figure may cause sustained disturbance or confusion of the Psychoanalyst. In such a situation consultation is indicated.

B) A Psychoanalyst who undergoes a serious illness and extended convalescence, or whose analyzing capacities are impaired, should consult with a colleague and/or medical specialist to clarify the significance of his or her condition for continuing to work.

C) A request by a patient, a parent/guardian of a minor patient, or a colleague that the Psychoanalyst seek consultation should receive respectful and reflective consideration.

D) If a Psychoanalyst is officially notified by a representative of the Center that a possible impairment of his/her clinical judgment or analyzing ability exists, the Psychoanalyst must consult with no less than two colleagues, one of whom may be a non-analyst medical specialist, each acceptable to the notifying body. If impairment is found, remedial measures must be followed by the Psychoanalyst in order to protect patients from harm and to prevent degradation of the standards of care in the profession.

E) It is ethical for a Psychoanalyst to consult with the patient of a colleague without giving notice to the colleague, if the patient has requested the consultation.

F) It is ethical for a Psychoanalyst to intervene on behalf of a colleague’s patient if he or she has evidence from a direct or indirect consultation with the colleague’s patient or from supervision of the colleague’s work with the patient that the colleague may be conducting him/herself unethically toward the patient or may be so impaired as to threaten the patient’s welfare.

G) It is ethical for a Psychoanalyst to accept for treatment the current patient of a colleague if consultation with a third colleague indicates that it is in the best interest of the patient to do so.

H) In the event that a credible threat of imminent bodily harm to a third party by a patient becomes evident, the Psychoanalyst should take reasonable appropriate steps to protect the third-party from bodily harm and may breach patient confidentiality only to the extent necessary to prevent imminent harm from occurring. The same applies to a credible threat of suicide.

I) In the case of a minor where the Psychoanalyst is concerned that a credible threat of serious self-injury or suicide is imminent, the Psychoanalyst should
take appropriate steps. This would include the notification of parent(s) or guardian(s) even if a breach of confidentiality were required. Under these circumstances, any breach of confidentiality should be restricted to the minimum necessary to prevent harm of the minor child.

J) In Ohio it is mandated that if a practitioner becomes convinced that child abuse of a patient or by a patient is occurring, the practitioner must report the abuse to the appropriate government authority (Ohio Revised Code §2151.421). If the patient is a minor, informing parent(s) or guardian(s) should be considered. In these circumstances, confidentiality may be breached to the minimum extent necessary. However, in keeping with Guiding General Principle IX of the American Psychoanalytic Association’s Principles and Standards, a Psychoanalyst may also refuse to comply with local reporting laws if that Psychoanalyst believes that to do so would seriously undermine the treatment or damage the patient. Given the complexities of these matters, a Psychoanalyst who is concerned that abuse of an adult or child is occurring is encouraged to continue to explore the situation and to consider utilizing consultation to determine what course of action would be most helpful to the patient and is required by law.

K) Local psychoanalytic societies and institutes have an obligation to promote the competence of their members and to initiate confidential inquiries in response to ethics complaints.

L) Psychoanalysts who are not licensed by the State of Ohio are required to take three hours of ethics training during each two-year calendar period as required by Ohio’s Counselor, Social Worker and Marriage and Family Therapist Board.

IX. Social Responsibility:

A) The Psychoanalyst should make use of all legal, civil, and administrative means to safeguard patients’ rights to confidentiality, to ensure the protection of patient treatment records from third party access, and to utilize any other ethical measures to ensure and maintain the privacy essential to the conduct of psychoanalytic treatment.

B) The Psychoanalyst is urged to support laws and social policies that promote the best interests of patients and the ethical practice of psychoanalysis.

X. Personal Integrity:

A) Psychoanalysts and candidate Psychoanalysts-in-training should be familiar with the Principles of Ethics and Standards, other applicable professional ethics codes, and their application to psychoanalysis.

B) Psychoanalysts should strive to be aware of their own beliefs, values, needs and limitations and to monitor how their personal interests impact their work.

C) Psychoanalysts must cooperate with ethics investigations and proceedings
conducted in accordance with the Provision for Implementation of the Principles and Standards of Ethics for Psychoanalysts. Failure to cooperate is an ethics violation.
PROCEDURES FOR IMPLEMENTATION
OF THE PRINCIPLES
AND STANDARDS OF ETHICS
FOR PSYCHOANALYSTS
OF THE CLEVELAND
PSYCHOANALYTIC CENTER

I. Ethics Committee

A) **Composition:** The Ethics Committee shall consist of at least five (5) Psychoanalytic Members of the Center (Voting or Emeritus) who shall be appointed by the Board of Directors. Members of the Ethics Committee shall serve terms of five (5) years and until the appointment and qualification of their successors; provided, however, that once the Ethics Committee has been convened to consider a particular case, the membership on the Ethics Committee for purposes of that case shall remain as originally constituted until the disposition of the case. Thus, while the membership of the Ethics Committee may change, the composition of the Ethics Committee with respect to any particular case will be determined by the date on which the matter is initially brought before the Ethics Committee. In the event that any members of the Ethics Committee cannot serve, or decline to serve, in a particular case, then the Chair of the Ethics Committee in consultation with the members of the Ethics Committee shall appoint eligible Psychoanalytic Members of the Center to fill the vacated position(s).

B) **Conflicts of Interest:** If a member of the Ethics Committee has an interest in any case brought before the Ethics Committee which might interfere with the ability of the member to act impartially with respect to the disposition of the case, then that member shall not act as a member of the Ethics Committee in any matters relating to that case. A member may excuse himself or herself on the grounds of such a conflict of interest. In addition, any member may be excused on the grounds of such a conflict of interest by action of a majority of the Ethics Committee. The member who has the potential conflict of interest shall not be present during the discussion of the matter and shall not vote.

C) **Duties:** The responsibilities of the Ethics Committee are:

1) To consider and respond to communications regarding the Principles and Standards of Ethics and the Procedures for Implementation thereof and to make recommendations for appropriate additions or modifications as indicated by experience.

2) To issue advisory opinions regarding questions about ethical conduct submitted to it.
3) To consider complaints concerning any alleged breach of the Principles of Ethics by a member of the Center referred to the Ethics Committee in accordance with its Procedures and to take appropriate action to dispose of such matters or to refer the complaint to another psychoanalytic institute, center, or professional association for investigation, consideration, and resolution.

II. Advisory Opinions
Where there is a complaint or an inquiry, but no alleged breach of the Principles and Standards of Ethics, any communications regarding the issue, to whomever addressed, may be referred to the Chair of the Ethics Committee, who will respond, with or without consulting the Ethics Committee, as he or she may deem appropriate. Copies of such correspondence shall be kept. An annual report shall be made to the Executive Committee of the Board of Directors.

III. Adjudication
Complaints regarding alleged breaches of the Principles and Standards of Ethics by a member of the Cleveland Psychoanalytic Center may be made and shall be adjudicated as provided in this Section III.

A) Requirements regarding complaint:
1) A complaint must be made in writing, addressed to the Chair, and signed by the party making the complaint.
2) The complainant must clearly describe the alleged breach (or breaches), including the name of the member or the names of any other persons involved, and the reasons for dissatisfaction.
3) In all cases of a complaint fulfilling the above conditions, the Ethics Committee will initiate all necessary action in accordance with these Procedures. While a complaint will be presumed to be a request for the Ethics Committee to take action and to include permission for the complaint to be shown to those persons whom the Chair may designate, the person making the complaint or request shall provide permission for copies to be sent to the other parties and to such other persons as the Chair may deem necessary. The complaint or request must also state the signer’s willingness to discuss the matter (with his or her legal counsel present, should he or she so wish) with the Chair or with a person or persons designated by the Chair, including legal counsel of the Center.

B) Handling of Complaints about Unethical Conduct:
1) Communications regarding an alleged breach of the Principles of Ethics will be sent to the Chair who will then refer the matter to the full Ethics Committee.
The Chair will promptly inform the accused member of the full details of the complaint.

2) Upon receipt of a referral from the Chair, the Ethics Committee shall consider the available information, may confer with legal counsel of the Center, and shall make whatever inquiries are necessary to determine if there are sufficient grounds for proceeding with the matter, or, if the complaint should be referred to another psychoanalytic institute, center, or professional association for investigation, consideration, and resolution.

3) If the Ethics Committee determines that the complaint should be referred to another psychoanalytic institute, center, or professional association for investigation, consideration, and resolution, the complainant and the accused member shall be promptly notified of the referral.

4) If there are not sufficient grounds for proceeding, the complaint shall be dismissed, and the accused member shall be considered exonerated and as not having been subject to any disciplinary proceedings. In the event of any such dismissal, the complainant and the accused member shall be promptly notified.

5) If there are sufficient grounds for proceeding, the Ethics Committee at this juncture shall be formed to comprise at least five (5) eligible members. Once formed, it shall undertake an investigation of the charges contained in the complaint. The Ethics Committee shall provide, to the complainant and to the accused member, copies of these Procedures, of the “Principles and Standards of Ethics”, and, if the accused member is a member of the American Psychoanalytic Association, copies of the American Psychoanalytic Association’s “Provisions for Implementation of the Principles and Standards of Ethics for Psychoanalysts,” published December 2000 and as may be amended. The Ethics Committee, at its discretion, may consult legal counsel. The Ethics Committee may conduct interviews, may obtain records and other information, and may hold hearings if it decides these are necessary. If a hearing is required, or if it is otherwise considered appropriate by the Ethics Committee, it shall be held at a reasonable time and place designated by the Chair. The accused member shall receive not less than thirty days’ notice of any hearing. Attendance at any hearing may be limited to Ethics Committee members; the accused member; the complainant; counsel for the Center, for the accused member and for the complainant, each of whom may speak on behalf of his or her client; and witnesses, if any. The complainant shall be afforded an adequate opportunity to present the charges in
detail and the accused member shall be afforded an adequate opportunity to present his or her defense. Those present shall have rights as are set forth below in Section V.

6) At the completion of its investigation, the Ethics Committee shall vote upon the matter. A vote of members of the Ethics Committee may be taken in a meeting of the Ethics Committee (including a telephone meeting if all members participating can hear each other) or by mail or partly in a meeting and partly by mail. No action other than a dismissal of the complaint as set forth in paragraph “b” below, may be taken without the affirmative vote of at least five of the seven members of the Ethics Committee. If a majority of the members of the Ethics Committee cannot agree upon a course of action, the complaint shall be dismissed as provided in paragraph “b” below. The Ethics Committee may, by vote as provided herein, take any one of the following courses of action:

   a. **Exoneration** (the accused is cleared from blame where the evidence shows no unethical conduct by the accused).

   b. **Dismissal of complaint without prejudice** (for example, where a determination on the merits cannot be made because of insufficient reliable evidence or other procedural defects.) This means that the Ethics committee has the right at a later date (and as it may be constituted on such later date) to recommend the commencement of new proceedings with respect to the same charges.

   c. **Dismissal of complaint with prejudice.** The complaint is dismissed without any finding of unethical conduct; proceedings with regard to the same complaint may not be reinstated. Where appropriate, such a dismissal may be accompanied by a letter of admonition, expressing the sense of the Ethics Committee that there may be questions about the appropriateness of the conduct of the charged member and putting the member on notice that further education, consultation and/or supervision may be indicated.

   d. **Finding of Unethical Conduct.** If the Ethics Committee finds that the accused member has acted unethically, the Ethics Committee may impose a sanction on the accused member. Sanctions may include, but are not limited to, requirements for future training or consultation, letters of censure, suspension, separation, or permanent expulsion from the Center. The determination of one or more sanctions shall be within the sole discretion of the Ethics Committee.

   e. **Reporting Sanctions.** After the period for filing an appeal has expired or the Appeals Committee has sanctioned the accused member, the Committee may, within its sole discretion, report the sanction to
licensing authorities. If a member belongs to the American Psychoanalytic Association, the Committee is required to report the sanction to the Ethics Committee of the American Psychoanalytic Association. The Principles and Standards of Ethics of the American Psychoanalytic Association and the Procedures for their Implementation may be found on the association’s web site, http://www.apsa.org/About APsaA/EthicsCode.aspx.

IV. Notice and Appeal Rights:
A notice of the decision of the Ethics Committee shall promptly be mailed to the accused member and to the complainant. If either party disagrees with the decision, he or she may, within thirty days of such decision, send a formal request for a review of the decision. Such requests must be in writing. The request must be addressed to the President of the Cleveland Psychoanalytic Center with a copy to the Chair of the Ethics Committee.

An Appeal Committee made up of five active Psychoanalytic Members of the Center as appointed by the President of the Board of Directors who are willing and able to serve, shall undertake a review of the Ethics Committee decision. The Appeal Committee shall review all records and documentation developed by the Ethics Committee during its original investigation and may make its decision based upon that review. If a majority of the members of the Appeal Committee deem it advisable, the Appeal Committee may request additional written statements from the concerned parties or their legal counsel; may at its discretion, hold any further hearings which it deems necessary; and may consult legal counsel. The Appeal Committee may, by vote of a majority of all of its members, take any one of the courses of action available to the Ethics Committee under III, B, 4, above. The decision of the Appeal Committee shall be binding upon all parties and shall supersede any differing earlier decision by the Ethics Committee relating to the matter. If the Appeal Committee neither ratifies the decision of the Ethics Committee nor takes any other action within ninety days, the charges shall be considered dismissed as provided in III, B, 4, b, above.

If the President of the Board of Directors is unable to find five active Psychoanalytic Members willing to serve as an Appeal Committee, the President of the Board of Directors may refer an appeal to another psychoanalytic institute, center, or professional association.

The American Psychoanalytic Association no longer handles ethics appeals for its members. It will review the decision of an Ethics Committee only for the purpose
of determining that due process was followed. Appeals are expected to be handled at the local level.

V. Rights and Privileges of All Parties Concerned.
A) The due process rights of all concerned parties shall be fully observed in implementing these Procedures.
B) Hearing bodies shall not be bound by rules of evidence usually employed in legal proceedings but may accept any evidence deemed appropriate and pertinent.
C) Should the complainant, the accused member, or a witness fail to appear at any hearing, the appropriate body may at its discretion postpone, dismiss or proceed with the hearing.
D) A notice of the decision of the Ethics Committee, or of the Appeals Committee shall promptly be mailed to the accused member and the other parties involved.

VI. Records and Disclosure.
A) Records of the Ethics Committee pertaining to a charge of unethical conduct may be made available: 1) to the Committee on Ethics of the American Psychoanalytic Association when that body conducts a review of the matter; 2) to other appropriate ethics bodies, upon their request, in the discretion of the Ethics Committee; and, 3) to the appropriate body of the Center considering an application or a request for reinstatement by a member who has been subject to disciplinary action under these Procedures.
B) Disciplinary actions against members who belong to the American Psychoanalytic Association shall be disclosed to the Ethics Committee of the American Psychoanalytic Committee. Disciplinary actions may also be disclosed, at the sole discretion of the Ethics Committee, to governmental bodies, licensing authorities, to other ethical bodies, to the members of the Center, and to others, as well as in publications of the Center.

VII. Effect of Resignation.
The Center shall be under no obligation to accept a resignation offered by a member when there is a charge of unethical conduct against him or her. An offer of resignation, whether accepted or not, shall not require the termination of an investigation of a charge of unethical conduct nor prevent the rendering of a decision on such a charge.

VIII. Condition of Membership.
As a condition of membership in the Center, each Psychoanalytic Member agrees to cooperate with the work of the Ethics Committee and agrees to release, hold harmless,
and indemnify the Center, its directors, officers, agents, and members of the Ethics and Appeal Committees, from any and all claims whether or not the claim or claims are based in whole or in part upon the negligence of the Center, its directors, officers, agents, and members of the Ethics and Appeal Committees:

A) Arising out of the investigation and consideration of a complaint regarding alleged unethical conduct by the Member or the imposing of sanctions after the investigation and consideration of a complaint: or,

B) With respect to any third-party action or proceeding brought against such Member based upon, relying on, arising from, or with reference to the ethical standards of the Center or the investigation and consideration of a complaint by the Center involving alleged unethical conduct by the member.

By my signature below, I acknowledge receipt of the Principles and Standards of Ethics For Psychoanalysts and agree to be bound by its terms:

_______________________________________

Printed Name

_______________________________________

Date