SCHOOL OF VISUAL ARTS  
MPS Graduate Art Therapy Program  
Ethical Principles for Students and Faculty

Preamble

This ethics document is intended to provide principles to address a number of situations encountered by students while participating in and/or faculty while teaching/supervising in the MPS graduate art therapy program at The School of Visual Arts. The goal of this document is to provide guidance to safeguard the welfare of individuals and groups with whom the student or faculty member may encounter as well as to provide guidelines for ethical behavior of the latter.

This document is based on the guidelines set forth by the American Art Therapy Association’s Ethical Principles for Art Therapists and this document shall not supersede any guidelines issued by the latter.

The guidelines of this document are intended to complement and provide specificity for any issues of confidentiality set forth by HIPAA regulations and any guidelines set forth by institutions where a student or faculty member may be interning or supervising. This document is not intended to supersede any HIPAA guidelines or institutional policy regarding confidentiality.

This document applies to art therapy student and faculty professional behavior within multiple contexts including but not limited to direct personal, postal, telephone, Internet, faxsimile and other electronic transmissions.

The development of these guidelines requires that students and faculty as well as administration encourage ethical behavior and to consult with the Ethics Committee, comprised of the Graduate Advisor and other faculty members) when there is question. In addition, the Ethics Committee may also seek consult and advice from the American Art Therapy Association.

Definition of Terms

For the purposes of this document, faculty are defined as any individual employed by the School of Visual Arts to teach in the MPS graduate art therapy program.

Supervisors are defined as art therapist who have been designated within the MPS graduate art therapy program to serve as either on site or program supervisors to directly oversee the clinical work of art therapy students. These individuals meet the educational requirements and standards designated by the American Art Therapy Association and the administration of the School of Visual Arts MPS graduate art therapy program for designating themselves as supervisors.

Students and Student Interns are defined as any individual who has been accepted into the MPS graduate art therapy program at the School of Visual Arts. Students may also simultaneously be defined as supervisees, as part of their degree requirements entails participation in an internship placement under the supervision of both an on site and faculty supervisor.

In the document, the term reasonable means the prevailing professional judgment of art therapists engaged in similar activities in similar circumstances, given the knowledge the student or faculty member had or should have had at the time.

Ethics Committee Statement of Purpose

The Ethics Committee shall be comprised on the Graduate Advisor and faculty members. The committee shall encourage and educate students and faculty regarding issues of ethical practice and to maintain adherence to the guidelines set forth herein. If a question of ethical behavior arises among a student or faculty member, the committee may be consulted to issue recommendations.
I. ETHICAL PRINCIPLES FOR ART THERAPY STUDENTS

When accepted into the MPS graduate art therapy program, art therapy students agree to abide by the Ethical Principles for Art Therapy Students. It is the ethical responsibility of each student to act in accordance with these principles and to comply with all applicable laws, regulations and requirements that govern the practice of art therapy in general. These principles are written to provide a basis for education and a foundation for ethical practice while enrolled in the MPS graduate art therapy program at the School of Visual Arts.

1.0 ART THERAPY STUDENT INTERN’S RESPONSIBILITY TO CLIENTS

Art therapist student interns endeavor to advance the welfare of clients, respect the rights of those persons seeking their assistance. While the art therapy student intern is under the guidance of both the on site and faculty supervisor, both student and supervisor are responsible for the kind and quality of art therapy performed and that this service is consistent with the training and experience of the supervisee.

1.1 Art therapy student interns do not discriminate against or refuse professional service to anyone on the basis of age, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis prescribed by law.

1.2 At the outset of the client-student therapist relationship, art therapy student discuss and explains client rights, roles of both client and student therapist, and expectations and limitations of the art therapy process.

1.3 In the therapeutic milieu, as well as in any kind of documentation, the art therapy student will identify themselves as such - an art therapist in training - and in no way attempt to misrepresent themselves as a registered, licensed practitioner.

1.4 When a student is working with a minor client under the age of 18 years, any and all disclosure or consent required is obtained from the parent or legal guardian of the minor client, except where otherwise mandated by law. Care is taken to preserve confidentiality with the minor client and to refrain from disclosure of information to the parent or guardian that might adversely affect the treatment of the client.

1.5 Art therapy student interns respect the rights of clients to make decisions and assist them in understanding the consequences of these decisions. Art therapist student interns advise their clients that decisions on the status of therapeutic relationships are the responsibility of the client. It is the professional responsibility of the art therapy student intern to avoid ambiguity in the therapeutic relationship and to strive for clarity of roles at all times.

1.6 Art therapists student interns refrain from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the student’s competence or effectiveness in performing his or her functions as an art therapy student intern, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

A multiple relationship occurs when an art therapy student is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the art therapist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

Art therapy student interns recognize their influential position with respect to clients, and they do not exploit the trust and dependency of clients.

1.7 Art therapy students refrain from engaging in an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

In addition, art therapy students should be aware that with the advent of the Internet and the easy availability of electronic transmissions, interactive media, television, radio and other forms of
communication, that any personal information that appears in these formats may also be easily accessed by potential clients. Art therapy student interns should carefully consider the accessibility of personal information and the impact of this information on a potential therapeutic relationship with a client.

1.8 Art therapy student interns refrain from taking on a professional role when (1) personal, professional, legal, financial, or other interests and relationships could reasonably be expected to impair their competence or effectiveness in performing their functions as art therapy student intern, or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.

1.9 Art therapy student interns terminate therapy when it becomes reasonably clear that the client no longer needs the service, is not likely to benefit, or is being harmed by the continuing service.

1.10 Art therapy student interns do not engage in therapy practices or procedures that are beyond their scope of practice, experience, training, and education. The student intern should alert the supervisor to issues beyond the scope of their training. The supervisee, together with the assistance of the supervisor, will assist persons in obtaining other therapeutic services if the student is unable to work with a client, or where the problem or treatment indicated is beyond the scope of practice of the art therapist.

1.11 Art therapy student interns, prior to termination, provide pre-termination counseling and suggest alternate service providers as appropriate, except where precluded by the actions of clients or third-party payers.

1.11. Art therapy student interns strive to provide a safe, functional environment in which to offer art therapy services. This includes:
   a. proper ventilation;
   b. adequate lighting;
   c. access to water;
   d. knowledge of hazards or toxicity of art materials, and the effort needed to safeguard the health of clients;
   e. storage space for artwork and secured areas for any hazardous materials;
   f. allowance for privacy and confidentiality;
   g. compliance with any other health and safety requirements according to state and federal agencies which regulate comparable businesses.

The art therapy student intern should report any situation in the therapeutic environment that is a hindrance to safety or confidentiality to the on site supervisor immediately.

2.0 CONFIDENTIALITY

Art therapy student interns protect confidential information obtained from clients, through artwork and/or conversation, in the context of the professional relationship while clients are in treatment and post-treatment.

2.1 Art therapy student interns treat clients in an environment that protects privacy and confidentiality.

2.2 Art therapy student interns inform clients of the limitations of confidentiality.

2.3 Art therapy student interns do not disclose confidential information for the purposes of supervision without client’s explicit consent unless there is reason to believe that the client or others are in immediate, severe danger to health or life. Any such disclosure must be consistent with laws that pertain to the welfare of the client, family, and the general public.

2.4 In the event that an art therapy student intern believes it is in the interest of the client to disclose confidential information, he/she seeks and obtains written consent from the client or client’s guardian(s) when possible before making any disclosures, unless there is reason to believe that the client or others are in immediate, severe danger to health or life.

2.5 Art therapy student interns disclose confidential information when mandated by law in a civil, criminal, or disciplinary action arising from such art therapy services. In these cases client confidences may be disclosed only as reasonably necessary in the course of that action.
2.6 Art therapy student interns maintain client treatment records for a reasonable amount of time consistent with state regulations and sound clinical practice, but not less than seven years from completion of treatment or termination of the therapeutic relationship. Records are stored or disposed of in ways that maintain confidentiality as per HIPAA and institutional guidelines.

3.0 ASSESSMENT METHODS

Art Therapy Students may wish to use assessments for thesis research and/or internship experience. There are specific conditions whereby students may employ assessment methods.

3.1 Art therapy students who use standardized assessment instruments must be familiar with reliability, validity, standardization, error of measurement, and proper application of assessment methods used.

3.2 Art therapy students use only those assessment methods in which they have acquired competence through appropriate training and supervised experience.

3.3 Art therapy students obtain informed consent from clients regarding the nature and purpose of assessment methods to be used. When clients have difficulty understanding the language or procedural directives, art therapists arrange for a qualified interpreter.

3.4 In selecting assessment methods and reporting the results, art therapy students must consider any factors that may influence outcomes, such as culture, race, gender, sexual orientation, age, religion, education, and disability. They should take reasonable steps to ensure that the results of their assessments are not misused by others.

3.5 Art therapy students take reasonable steps to ensure that all assessment artwork and related data are kept confidential according to the policies and procedures of the professional setting in which these assessments are administered.

4.0 CLIENT ARTWORK

Art therapy students regard client artwork as the property of the client. In some practice settings client artwork, or representations of artworks, may be considered a part of the clinical record retained by the therapist and/or agency for a reasonable amount of time consistent with state regulations and sound clinical practice. The art therapy student must abide by these institutional guidelines, should they exist.

4.1 Client artwork may be released to the client during the course of therapy and upon its termination. The client is notified in instances where the art therapist and/or the clinical agency retain copies or photographic reproductions of the artwork in the client file as part of the clinical record.

4.2 Art therapy students obtain written informed consent from the client or, where applicable, a legal guardian in order to keep client artwork, copies, slides, or photographs of artwork, for educational, research, or assessment purposes.

4.3 Art therapy students do not make or permit any public use or reproduction of client art therapy sessions, including dialogue and artwork, without written consent of the client.

4.4 Art therapy students obtain written informed consent from the client or, where applicable, a legal guardian before photographing clients' artwork or video taping, audio recording, otherwise duplicating, or permitting third-party observation of art therapy sessions. They must be aware of and abide by any institutional guidelines regarding consent to recording, photographing or taping clients.

4.5. Art therapy students may wish to use clinical materials in teaching, writing, and public presentations if written authorization has been previously obtained from the clients. Specific steps are to be taken to protect client identity and to disguise any part of the artwork or video tape that reveals client identity in compliance with institutional and HIPAA guidelines. See HIPAA guidelines for specifics.

4.6 Art therapy students obtain written, informed consent from the client before displaying client art in any public place.
II. FACULTY ETHICS AND RESPONSIBILITIES

5.0 EDUCATION AND TRAINING

5.1 Responsibility to the Profession
Faculty members respect the rights and responsibilities of professional colleagues and participate in activities that advance the goals of art therapy. Faculty members adhere to the ethical principles of the profession when acting as members or employees of organizations.

5.2 Design of Education and Training Programs
Faculty members 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.

5.3 Descriptions of Education and Training Programs
Faculty members 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.

5.4 Accuracy in Teaching
(a) Faculty members 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, faculty members present information accurately.

5.5 Descriptions of Workshops and Non-Degree-Granting Educational Programs
To the degree to which they exercise control, faculty members responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

5.6 Media Presentations
When faculty members provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements 1) are based on their professional knowledge, training, or experience in accord with appropriate literature and practice; 2) are otherwise consistent with ethical principles; and 3) do not indicate that a professional relationship has been established with the recipient.

5.7 Multiple Relationships
Faculty members refrain from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the art therapist's competence or effectiveness in performing his or her functions as an art therapist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

A multiple relationship occurs when a faculty member is in a professional role with a person and (1) at the same time is in another role with the same person. (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the art therapist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.
Faculty members recognize their influential position with respect to students and supervisees, and they do not exploit their trust and dependency.

5.8 Delegation of Work to Others
Faculty members who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and (3) see that such persons perform these services competently.

5.9 Exploitative relationships
Faculty members do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees.

5.10 Sexual Harassment
Faculty members do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature that occurs in connection with the faculty member’s activities or roles as a faculty member, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the faculty member knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts.

5.11 Multicultural Awareness
When working with people from cultures different from their own, faculty members engage in culturally sensitive supervision, seek assistance from members of that culture, and make a referral to a professional who is knowledgeable about the culture when it is in the best interest of the client to do so.

6.0 RESEARCH

6.1 Responsibility to Research Participants
Faculty members doing research respect the dignity and protect the welfare of participants in research.

Faculty researchers are guided by laws, regulations, and professional standards governing the conduct of research.

To the extent that research participants may be compromised by participation in research, investigators seek the ethical advice of qualified professionals not directly involved in the investigation and observe safeguards to protect the rights of research participants.

Faculty researchers requesting participants' involvement in research inform them of all aspects of the research that might reasonably be expected to influence willingness to participate. Investigators take all reasonable steps necessary to ensure that full and informed consent has been obtained from participants who are also receiving clinical services, have limited understanding and/or communication, or are minors.

Faculty researchers respect participants' freedom to decline participation in, or to withdraw from, a research study at any time with no negative consequences.

Information obtained about a research participant during the course of an investigation is confidential unless there is authorization previously obtained in writing. When there is a risk that others, including family members, may obtain access to such information, this risk, together with the plan for protecting confidentiality, is to be explained as part of the procedure for obtaining informed consent.

6.2 Client/Patient, Student, and Subordinate Research Participants
When faculty members conduct research with clients/patients, students, or subordinates as participants, faculty researchers take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.
When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

6.3 Debriefing
Faculty researchers 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 faculty researchers are aware.

If scientific or humane values justify delaying or withholding this information, faculty researchers take reasonable measures to reduce the risk of harm.

When faculty researchers become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

6.4 Reporting Research Results
Faculty researchers do not fabricate data. If faculty researchers 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.

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

6.6 Publication Credit
Faculty researchers take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed.

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.

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.

6.7 Duplicate Publication of Data
Faculty researchers do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

7.0 SUPERVISORY RELATIONSHIP

7.1 Responsibility to Students and Supervisees
Faculty members instruct their students using accurate, current, and scholarly information and will foster the professional growth of students and advisees.

Faculty members as teachers, supervisors, and researchers maintain high standards of scholarship and present accurate information.

Faculty members are aware of their influential position with respect to students and supervisees, and they avoid exploiting the trust and dependency of such persons. Faculty members, therefore, shall not engage in a therapeutic relationship with their students or supervisees.

Faculty members take reasonable steps to ensure that students, employees or supervisees do not perform or present themselves as competent to perform professional services beyond their education, training, and level of experience.
Faculty members who act as supervisors are responsible for maintaining the quality of their supervision skills and obtaining consultation or supervision for their work as supervisors whenever appropriate.

7.2 Student Disclosure of Personal Information
Faculty members 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, spouses or significant others, except when (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) 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 professional related activities in a competent manner or whose personal problems could reasonably be judged to pose a threat to the students or others.

7.3 Confidentiality
Faculty members do not disclose confidential information for the purposes of consultation and supervision without client’s explicit consent unless there is reason to believe that the client or others are in immediate, severe danger to health or life. Any such disclosure must be consistent with laws that pertain to the welfare of the client, family, and the general public.

7.4 Professional Competence and Integrity
Faculty members represent facts truthfully to clients, third-party payers, and supervisees regarding services rendered and the charges for services.

Faculty members supervise only in those areas in which they are competent, as determined by their education, training and experience.

III. GUIDELINES FOR ART THERAPY SUPERVISION *

The following art therapy supervision guidelines are approved by the American Art Therapy Association, Inc. (AATA). While the Association is not responsible for monitoring how these guidelines are utilized by art therapy supervisors; it is strongly recommended that all pre-graduate and postgraduate supervisors and supervisees at The School of Visual Art MPS graduate art therapy program adhere to the following guidelines to assure quality supervision.

A. CLIENT WELFARE AND RIGHTS

The primary obligation of supervision is the training of art therapists so that they promote the welfare of their clients and respect their integrity. In this regard, supervisees must inform clients that they are being supervised and that observations, art products, and/or recordings of the session may be reviewed by the supervisor.

Supervisors who are conducting supervision to aid a supervisee in meeting ATR requirements may not permit the supervisee to communicate or in any way convey to the supervisee’s clients or other parties that the supervisee is himself/herself an ATR or ATR-BC.

Supervisors must ensure that their supervisees understand and respect the human rights of their clients, including protecting the clients’ right to privacy and confidentiality, including all information or art products resulting from therapy. Clients also should be informed that their rights will not be violated by the supervisory relationship.

Records of the therapeutic relationship, including interview notes, test data, correspondence, art productions, audio and videotape recordings, as well as the electronic storage of these documents, are considered to be confidential, professional information. The use of these materials for research and in the training and supervision of art therapists should be with the full knowledge of the client and permission granted by the agency offering service to the client. This professional information is to be used with the full protection of the client, and written consent from the client or legal guardian of a minor must be secured prior to the use of such information for instructional and/or research purposes. HIPAA guidelines and agency policies regarding client records should be followed.

Supervisors shall adhere to current professional and legal guidelines when conducting research.
B. NATURE OF SUPERVISORY RELATIONSHIP
Supervision is designed as an opportunity for a supervisee to learn from a competent role model and receive clinical training from a practicing art therapist to facilitate personal and professional development, promote effective treatment, promote accountability and critical thinking, and to preserve professional standards and ethics of the profession of art therapy.

The art therapy supervisor plays a significant role in the education of competent and professional clinicians. A supervisor has many responsibilities related to this endeavor; to the supervisee, AATA, state licensing boards, university and educational training institutions, and the public.

Supervisors should not establish a therapeutic relationship as a substitute for supervision. Supervisors should not engage in dual relationships with supervisees. Supervisors should not participate in any form of social contact or interaction which would compromise the supervisor-supervisee relationship.

Supervisors do not provide counseling or therapy to their supervisee; however, personal issues should be addressed in terms of the impact of these issues on clients and professional functioning. When appropriate, a supervisor should recommend a supervisee seek therapy.

C. SUPERVISORY ROLE
Supervision may be conducted with an individual, group or combination of both. Inherent and integral to the role of art therapy supervisor are the responsibilities for monitoring client welfare; ensuring compliance with relevant legal, ethical, and professional standards for clinical practice; monitoring the clinical performance and professional development of the supervisee; and evaluating and documenting the current performance and potential of supervisee for academic, screening, selection, placement, employment, and licensing purposes.

The supervisor shall be responsible, along with the supervisee, that the extent, kind, and quality of the art therapy performed is consistent with the training and experience of the person being supervised and is in compliance with laws, rules, and regulations governing the practice of art therapy with clients.

Supervisors shall maintain written documentation of supervisees’ clinical hours, supervision hours, and standards of competency. The supervisee shall receive competent services within the scope of supervisor’s practice and education, and supervisors shall be responsible to recognize their own limitations of ability to supervisee.

It is the responsibility of the supervisor to maintain current knowledge of regulations and requirements affecting interns which may include states licensing law, agency or university requirements, and AATA or ATCB requirements. Supervisors shall maintain communication with other supervisors involved with the same supervisee, for example, individual supervision group and simultaneous ATR supervision or agency supervision. Supervisors are responsible for obeying all consumer protection mandates, protecting confidentiality, maintaining records and client art products, and ethical codes.

D. ADMINISTRATION OF SUPERVISION
Art therapy supervisors and supervisees shall abide by the “AATA Ethical Standards for Art Therapists.” Supervisees shall be provided a letter, contract, or syllabus identifying supervision expectations and responsibilities, and the “AATA Guidelines for Art Therapy Supervision.” The document shall be signed by both supervisor and supervisee and should include the specifics of the supervision agreement, access to charts and client art products, on-site and off-site responsibilities, and any fees or stipends which are involved.

Supervision shall be held at the rate of one (1) hour of supervision for every ten (10) hours of patient contact. The supervisor shall keep a record of client contact hours to be signed at designated times.

The supervisor shall make every effort to observe the supervisee practicing art therapy, either by direct observation, video or audio taping.

If a supervisor must terminate his/her responsibility of supervision with a supervisee, the supervisee shall be notified in writing of why an early termination is necessary and when the termination shall take place. Supervisee shall be assisted in the location of and transition to a new supervisor.
E. STANDARDS OF COMPETENCY FOR SUPERVISORS
Any person supervising an art therapist shall have been a registered (ATR), or registered, board-certified (ATR-BC) art therapist for at least two years, and have two additional years of active practice (at least six clients or groups per week). The supervisor shall not be under censure for any ethical or legal malfeasance and shall not be related by blood or marriage to the supervisee. A supervisor shall have gained supervised experience in an approved mental health agency or private practice that provides care to the public. The supervisor shall have a broad understanding and education in clinical art therapy theory that is appropriate to the setting in which the supervisee is practicing.

Continuing education is recommended for supervisors. A minimum of two professional training experiences (total of 15 clock hours) per year in supervision and/or art therapy are recommended. The focus of the continuing education courses are to improve skills in supervision and evaluation, and to acquire knowledge for the areas of treatment in which the supervisees are training.

F. SKILLS ASSESSMENT OF SUPERVISEE
The supervisee has a legal right to periodic feedback and evaluation. It is recommended that supervisors provide formal and informal feedback as well as in verbal and written form, preferably in a consistent format tailored to fit the client population and expectations of the agency for evaluation of skills and abilities.

Supervisors shall devise a method of evaluation which will inform the supervisee of the quality of their services. It shall include assessment of clinical competency and art therapy skills, emotional awareness, autonomy, identity, respect for individual, personal motivation, and professional ethics.

G. PROBLEM RESOLUTION/MEDIATION
Supervisors have the responsibility, through ongoing evaluation of supervisee, to be aware of any personal or professional limitations of supervisee which are likely to impede future professional performance. If the supervisor has concerns about the ability of the supervisee to practice art therapy, the supervisor shall inform the supervisee of the concerns, describe in writing what must be done to improve, recommend remedial assistance to the supervisee and/or describe how the supervisor can assist the supervisee. If the deficiencies cannot be resolved, the supervisor must advise the program, agency, or licensing board that those supervisees are unable to provide professional services.

Supervision is a confidential contract between supervisor and supervisee, and confidentiality for both supervisor and supervisee cannot be breached unless there is a question of danger to the client or unethical performance on the part of the trainee.

If a supervisor abdicates responsibility to the supervisee or supervisee has specific complaints or breach of contract by the supervisor, supervisee shall present specific complaints in writing to the supervisor. The supervisor shall address the concerns, verbally and/or in writing, and shall attempt to resolve any complaint or breach of contract. If this is not done, mechanisms in due process appeal of complaints should be established and made available to supervisee.

* Adapted from guidelines originally published in AATA Newsletter, Winter 1997. Certain portions of these guidelines are adapted from “Recommended Guidelines for Supervision.” [Riley, 1990, AATA Newsletter, 23(4), p. 11].