CODE OF ETHICS FOR ASSESSMENT CENTRES IN SOUTH AFRICA

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A. PREAMBLE

A.1 Introduction

The South African Assessment Centre Study Group (ACSG) is a professional association of assessment centre practitioners. The Study Group provides a venue in which practitioners can interact and exchange knowledge, best practices and experiences concerning the use of assessment centres.

The ACSG believes the advancement of assessment centre (AC) practice in South Africa requires ethical guidelines for ACSG members and anyone involved in AC activities. The ACSG also believes that AC practitioners should act ethically in the conduct of their AC practices in the workplace and in relations with both members of the public and their clients.

By conducting ethical ACs the wider society is positively impacted by basing selection and development decisions on valid and reliable AC results. When AC-based recommendations and decisions are based on unethically conducted ACs, they may lead to wrong appointments and also scarce resources being inappropriately expended. The ACSG also has a special obligation towards new and emerging AC practitioners entering the industry to stimulate ethical conduct.

The ACSG views ethics as a system of conduct that indicates how we should behave and what our responsibilities are. It includes a commitment to do what is right and implies that being ethical means that conduct should serve the welfare of all stakeholders involved with and directly impacted by an AC.

The ACSG’s Code of Ethics derives from best ethical practices and is intended to supplement the legal environment in which AC’s take place in South Africa and the voluntary Best Practice Guidelines for the use of the Assessment Centre Method in South Africa (5th Edition) (Meiring & Buckett, 2015). The Code is intended to be both aspirational, identifying what AC practitioners should aspire to, and also to guide the minimally acceptable ethical standards for AC practice in South Africa. It should assist with both the “why” and the “how” of expected behaviour, especially when AC practitioners are faced with ethical dilemmas.

The Code of Ethics is organized around major ethical principles but is also written from the perspective of AC practitioners – those people who design, implement and manage the various types of AC. Since AC assessors and simulation role-players are integral parts of the...
AC itself, these groups are also included in the description of AC practitioner, unless specifically excluded.

Although there are many AC stakeholders (e.g. line-managers; subordinates; human resource practitioners; other service providers) we will focus on the following stakeholders: participants (those who attend the AC to be assessed), the client (those who requested the AC for whatever reason), and the AC practitioner (as described above).

A.2 Structure of the Code

Six ethical principles are presented, to be considered and balanced in ethical decision-making in AC practice. Each principle is followed by a statement of those values that are included in and give definition to the principle. Each values statement is followed by a list of ethical standards that illustrate the application of the specific principle and values to the activities of AC practice.

A.3 The Use of the Code

Applicability of this Code: This code applies to all members of the ACSG. It also applies to any other groups (licensing boards, other professional associations) that choose to adopt the code.

This Code is intended to guide AC practitioners in their everyday conduct, in thinking about and planning the use of AC methodology and in the resolution of ethical dilemmas. The code advocates the practice of both proactive and reactive ethics in AC practice. In addition, the principles and values focus on standards that are specific to the field of AC practice.

The Code provides an ethical framework in which the values embodied in this code can be applied during the application of AC methodology. It is also meant to be helpful in determining whether a complaint is of enough concern to warrant action either at the level of the individual AC practitioner or at the level of the profession as a whole. In determining corrective action for an individual AC practitioner, one of the judgments the adjudicating body needs to make is whether an individual conscientiously engaged in an ethical decision-making process and acted in good faith, or whether there was a negligent or wilful disregard of ethical principles.
A.4 Responsibility of AC Practitioners

The responsibility for ethical action depends foremost on each AC practitioner’s commitment to behave ethically. Accordingly members of the South African Assessment Centre Study Group commit:

1. To adhere to the ACSG Code of Ethics in all AC activities.
2. To apply the ethical principles, values, and standards of the Code of Ethics conscientiously.
3. To assess and discuss ethical issues and practices with AC colleagues on a regular basis (e.g., at ACSG and other professional conferences, workshops and in individual discussions with other professionals).
4. To bring ethical issues that require clarification or the development of new guidelines or standards to the attention of the ACSG.
5. To bring concerns about possible unethical actions by AC practitioners directly to the attention of the ACSG.
6. To bring concerns about possible unethical actions of a more serious nature or actions that are considered misconduct to the person(s) or relevant body(ies) (e.g., ACSG, HPCSA, SIOPSA, SABPP, as appropriate) best suited to investigate the situation and to stop or offset the harm.

A.5 Code of Ethics Review Schedule

To maintain its relevance and responsiveness, this Code of Ethics for ACs in South Africa will be reviewed regularly by the ACSG and revised as needed. Interested parties are invited to forward comments and suggestions to the ACSG at any time.

A.6 Definitions

The following definitions relate to the six ethical principles.

1. **Assessment Centre (AC)** - it is a standardised assessment process where one or more participants complete multiple simulation exercises and are observed by multiple assessors who are competent in observing and evaluating each participant against a number of predetermined, job-related behavioural constructs.
2. **Assessor** - a person who observes, records, classifies and evaluates the behaviour of AC participants across focal constructs such as competencies, tasks, etc. By implication the term may include AC administrators.

3. **AC developer or designer** - the person who conducts relevant research and designs the AC accordingly.

4. **Role-player** - the person who plays the part of a specific character during an interactive simulation in order to elicit competency-related behaviour from the participant.

5. **Participant** - the individual taking part in the AC with the purpose of being assessed by the assessors for selection or developmental purposes.

6. **Client** - the person who requested the services of an AC provider; e.g. the hiring manager.

7. **AC provider** - the person who promotes, offers or supplies AC products and services to clients.

8. **AC practitioner** – the person acting in any of the following roles: AC provider; role-player; AC designer or developer; assessor; AC administrator.

9. **AC staff** - includes assessors; role-players; AC developers or designers; AC administrator(s); AC administrative staff; feedback givers; data management staff.

10. **Client’s organisation** - the organisation or affiliation that the client represents.

11. **AC stakeholders** – participants (those who are assessed during the AC), the client (those who requested the AC for whatever reason) and the AC practitioner (as described above).

12. **Accountability** – answerability and the expectation of account-giving.

13. **Integrity** – the quality of being honest and having strong moral principles.

14. **Honesty** – truthfulness and straightforwardness of conduct.

15. **Respectfulness** – courteous regard for people’s feelings.

16. **Sensitivity** – the quality or condition of being perceptive and responsive.

17. **Norm** – a reference point; something that is usual or standard.
18. **Appropriate transparency** - operating in such a way that actions and their purpose are open to scrutiny and review.

19. **Privacy / private** – freedom from unauthorized intrusion; intended for or restricted to the use of a particular person, group or class.

20. **Confidentiality** – the safeguarding of documents and information and preventing the unwarranted disclosure thereof.

21. **Dignity** – the state or quality of being worthy of honour or respect.

22. **Equal opportunity** – the right to be treated without discrimination, on the grounds of race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, sexual orientation, age, disability, religion, conscience, belief, culture, language and birth.

23. **Equal treatment** – the concept that all people are equal as regards their rights.

24. **Equitably** – characterised by fairness; just and right; fair; reasonable: equitable treatment of all citizens.

25. **Impartiality/objectivity** – a lack of bias, judgment or prejudice.

26. **Acceptance of diversity** – understanding that each individual is unique and recognizing individual and cultural differences.

27. **Reasonable accommodation** – adjustment or modification to an element of the AC process that will enable an alternatively abled participant to participate whilst maintaining the validity of the results of the assessments done in this manner.

28. **Procedural fairness** – acting with impartiality throughout the whole AC process.

29. **Adverse impact** – on average the results of selection instrument(s) are different for ethnic / cultural, gender, age groups.

30. **Interactional fairness** – impartiality in the interpersonal treatment people receive when procedures are applied and outcomes are distributed.

31. **Distributive fairness** – the perceived impartiality with which rewards and costs are shared by AC participants with equity exchange being based on merit (e.g., contribution and performance).

32. **Professional** – a natural person who has been accepted as a member of a professional body by virtue of educational qualifications, proven competence in the field of practice
and adherence to the prescribed moral and professional code of conduct of the profession.

33. **Professional standards** – the ethical or legal duty of a professional to exercise the level of care, diligence and skill prescribed in the code of practice of his or her profession, or as other professionals in the same discipline would in similar circumstances.

34. **Professional conduct** – the accepted manner in which a professional person behaves, makes judgements, applies skills and reaches informed decisions.

35. **Moderating factors** – qualitative or quantitative variables that may influence the outcome of an AC.

36. **AC competence** – a combination of knowledge, skills, values and behaviour necessary to perform the role of AC practitioner.

37. **AC design** – the creation of all aspects comprising an AC (e.g. focal constructs; norms; sequence of simulations and processes; feedback).

38. **Practical ACs** – ACs that enhance other organisational practices, processes, procedures.

39. **Effective ACs** – ACs that deliver the intended results.

40. **AC use** – the application of the AC results.

41. **Fit-for-purpose ACs** – ACs designed to deliver results for a specific purpose, based on rigorous job and other analyses, e.g. selection, diagnosis and development.

42. **Cost-effective ACs** – ACs that deliver what was agreed upon without excessive cost.

43. **AC implementation** – the roll-out of an AC within the targeted organisation or environment.

44. **AC standardization** – consistently conducting the AC in the same way (timing, sequence, instructions, resources, conditions, scoring, feedback, etc.) over time.

45. **Value adding ACs** – ACs that satisfy a need that can only be addressed effectively by an AC.

46. **AC governance** – the process for making and implementing decisions about all aspects of an AC.

47. **AC due-diligence** - the degree of care that a prudent AC practitioner would exercise.
48. **Appropriate feedback** – sharing contextualised and relevant information about the AC, with affected parties (e.g., the participant, the client). This may include, but not limited to, applicable AC results, implications of the results and recommended actions.

49. **Access to own AC information** – the AC participant is provided with his or her own AC results.

50. **AC data management** – the whole set of activities intended to improve AC data quality, including data capturing, storage, retrieval, quality control and data security.

51. **Proper protection of intellectual property** – the degree of precaution a prudent person would take to ensure that the intellectual property owner’s rights are adhered to.
### B. CODE OF ETHICS PRINCIPLES, VALUES AND STANDARDS

The Code consists of six principles, each consisting of values which in turn give rise to standards.

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<td>Clearly informed</td>
<td>Deliver effective ACs</td>
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<td>Ensure continual AC related development</td>
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<td>Deliver context-focused ACs</td>
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<td>Ensure proper protection of intellectual property</td>
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**B.1 Principle 1: Respect for Participant Dignity**

**Values statement**

AC practitioners acknowledge that all AC participants have a right to have their worth as human beings appreciated and that this worth is not dependent upon their race, religion,
gender, national origin, disability, age, marital status, sexual orientation, physical or mental abilities, age, socio-economic status, or any other legally protected status.

**Ethical standards**

In adhering to the principle of respect for participant dignity of persons in the AC, AC practitioners will treat participants respectfully.

**B.1.1 - integrity**

B.1.1.1 - by ensuring that the same assessment conditions and norms apply to all AC participants and being impartial¹,

B.1.1.2 - by using the AC results solely for the purpose agreed with the AC participants²,

**B.1.2 - honesty**

B.1.2.1 - by honestly and fully communicating the purpose of the AC and the use of the AC results to the AC participants as was agreed with the AC client,

**B.1.3 - respectfulness**

B.1.3.1 - by treating all AC participants with respect and dignity throughout the AC process,

**B.1.4 - sensitivity**

B.1.4.1 - by making reasonable accommodations to participants enhancing their ability to fully participate in the AC process³,

B.1.4.2 - by willingly and professionally answering questions that are asked by AC participants that are within the respondents’ scope of practice,

B.1.4.3 - by endeavouring to create an appropriate atmosphere to elicit participant behaviour linked to the focal constructs being assessed,

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¹ Promotion of Equality and Prevention of Unfair Discrimination (Act 4 of 2000)
² Protection of Personal Information Act (PoPI)(Act 4 of 2013)
³ Employment Equity Act (Act 55 of 1998)
B.1.5 - privacy
B.1.5.1 - by treating all information of AC participants with care and restricting access to it in accordance with best practice guidelines and South African legislation\(^4\),
B.1.5.2 - by taking appropriate reasonable action to enable the discussions with or about AC participants during the AC process to take place in private,

B.1.6 - confidentiality
B.1.6.1 - by taking appropriate, reasonable, technical and organisational measures to secure the confidentiality of all AC participant information,

B.1.7 - dignity
B.1.7.1 - by taking reasonable steps to ensure that all AC participants are treated with dignity by all assessors and AC staff throughout the process.

B.2 Principle 2: Respect for Participant Diversity

Values statements:
AC practitioners demonstrate an active concern and respect for AC participant diversity. AC participant diversity includes race, religion, gender, national origin, disability, age, marital status, sexual orientation, physical or mental abilities, age, socio-economic status, or any other legally protected status. Efforts are also made to minimize adverse impact of ACs on the aforementioned groups. These concerns are relevant to those involved with the AC both directly and indirectly.

Ethical standards
In adhering to the principle of respect for participant diversity of persons AC practitioners and assessors will provide:

B.2.1 - procedural fairness
B.2.1.1 - by ensuring that the AC is standardised and complies with AC best practice guidelines. This includes ensuring standardised administration, scoring, interpretation and use of AC results,

\(^4\) Protection of Personal Information Act (PoPI)(Act 4 of 2013)
B.2.2 - interactional fairness
B.2.2.1 - by treating all AC participants with courtesy, acknowledging participants and encouraging the feeling by all of being part of the AC process,
B.2.2.2 - by ensuring that a code of conduct is followed by all AC stakeholders contributing to interactional fairness,

B.2.3 - distributive fairness
B.2.3.1 - by taking into account moderating factors arising from participants’ social, political, economic and cultural contexts (e.g. linguistic factors) impacting on AC participants that may have affected AC performance,
B.2.3.2 - by taking reasonable precautions to ensure that the AC does not discriminate against any group of AC participants, and that participants are evaluated fairly based on the basis of objective AC criteria,

B.2.4 - equal opportunity
B.2.4.1 - by taking reasonable actions to ensure that all AC participants have equal opportunities to experience, benefit and learn from the AC process,
B.2.4.2 - by taking reasonable actions to ensure that all AC participants have an equal opportunity to obtain AC outcomes,

B.2.5 - equal treatment
B.2.5.1 - by ensuring that all AC participants are treated impartially and without prejudice by AC staff,

B.2.6 - objectivity
B.2.6.1 - by ensuring that proper AC scoring mechanisms and norms and their competent use by AC staff contribute to assessment objectivity,

B.2.7 - acceptance of diversity
B.2.7.1 - by ensuring that diversity related issues are accepted as important and relevant and are appropriately considered in the AC process.
B.3 Principle 3: Respect for Participant Freedom

Values statement:
Respect for AC participant freedom refers to an absence of undue restrictions. The AC practitioner acknowledges that all persons have a right to be clearly informed, to participate freely, to be free to withdraw from the process, to provide or withhold informed consent, to receive feedback upon request after the process and to have access to their own information.

Ethical Standards:
In adhering to the principle of respect for participant freedom, AC practitioners will ensure that participants

B.3.1 – are clearly informed and the process is transparent
B.3.1.1 - by explaining the process and criteria that will be used in the AC so that AC participants know what to expect during the AC process,
B.3.1.2 - by honestly and fully communicating to AC participants the full purpose of the AC and the intended use(s) of the AC results,
B.3.1.3 - by including information about who will have access to the AC results and for what purpose(s) and for what period of time they will have access,
B.3.1.4 - including information about how long the AC results will be stored and considered to be valid,

B.3.2 - participate freely
B.3.2.1 - by giving AC participants the right to choose to participate in the AC process after the purpose of the AC and the consequences of participation have been explained,

B.3.3 - provide / with-hold informed consent
B.3.3.1 - AC participants may decide to provide / withhold consent to participate in the AC process after the AC practitioner has explained the consequences of doing so,
B.3.3.2 - AC participants must give written consent to participate in the AC process and for the AC results to be used for the intended purpose (including future research). If a participant does not provide informed consent, AC practitioners may decline the participant’s opportunity to participate in the AC,

5 Constitution of South Africa (Act 108 of 1996)
6 Protection of Personal Information Act (PoPI)(Act 4 of 2013)
B.3.4 - are free to withdraw from the process
B.3.4.1 - by allowing AC participants to withdraw from the AC process at any time after the consequences of withdrawing have been explained by the AC practitioner,

B.3.5 - receive feedback upon request after the process
B.3.5.1 - by providing valid, reliable and constructive feedback about their performance during the AC upon request after the process has been finalised. Responsibility for paying for the costs of the feedback will be clarified at the start of the AC process,
B.3.5.2 - by considering requests for specific personal follow-up feedback from the AC practitioner after receiving the initial feedback. The AC participant will have to pay for this additional feedback service,

B.3.6 - have access to own information
B.3.6.1 - by providing AC participants with access to own AC information in a contextualised format upon request after the process has been finalised. The AC practitioner will ensure that no raw, non-interpreted or non-contextualised data be shared with the AC participant. The AC participants do not have access to material that may compromise the intellectual property of the AC practitioner and / or the AC client.

B.4 Principle 4: Respect for the Client and the Client’s Organisation

Values Statements:
AC practitioners deliver the results of an AC firstly to a specific client and secondly to a client’s organisation (see definition of client and client organisation). The client and AC practitioner contract specify what will be delivered, so that the AC fits into other organisational processes and procedures. Unless modified by mutual consent, the AC practitioner is obliged to deliver what was marketed and contracted. The AC practitioner uses ACs that are effective, value adding, fit-for-purpose, practical, cost-effective and that provide appropriate feedback.

Ethical Standards:
In adhering to the principle of respect for the client and the client’s organisation, AC practitioners will

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7 Promotion of Access to Personal Information Act (PAPIA)(Act 2 of 2007)
8 Consumer Protection Act (Act 68 of 2008)
**B.4.1 - deliver effective ACs**

**B.4.1.1** - by ensuring that ACs adhere to the best practices for ACs including reliance on appropriate evidence for the validity and reliability of the AC methods used\(^9\).

**B.4.2 - deliver value-adding ACs**

**B.4.2.1** - by assuring at the outset that an AC is the preferred assessment method given the specific client requirements,

**B.4.3 - deliver what was marketed and contracted**

**B.4.3.1** - by only marketing to the client and contracting with the client what the specific AC has been designed to deliver,

**B.4.4 deliver fit-for-purpose ACs**

**B.4.4.1** - by using an AC only for the purpose(s) for which it was designed, e.g., for selection, diagnosis or development,

**B.4.5 - deliver practical ACs (fitting into organisational processes)**

**B.4.5.1** - by assisting the client to position the specific AC within the client organisation’s processes (e.g., talent management; succession planning; learning and development),

**B.4.5.2** - by assisting the client to establish, implement and maintain an AC policy within the client organisation,

**B.4.6 - deliver context-focused ACs**

**B.4.6.1** - by doing contextual adaption to the AC based on job analysis in terms of economic, social, political, institutional, linguistic and cultural differences,

**B.4.6.2** - by implementing an AC appropriate to organisational level, industry trends and technology use,

**B.4.7 - deliver cost-effective ACs**

**B.4.7.1** - by contracting up-front all foreseeable costs related to the AC for the client’s account,

**B.4.7.2** - by agreeing up-front with the client how return on investment for the client will be determined,

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\(^9\) Best Practice Guidelines for the use of the Assessment Centre Method in South Africa (5th Edition)
B.4.7.3 - by being transparent with the client about all AC related costs,
B.4.7.4 - by endeavouring to deliver a cost-effective AC from the perspective of the client,

**B.4.8 - provide appropriate feedback**
B.4.8.1 - by ensuring that constructive and appropriate feedback is provided to the AC stakeholders, e.g., AC participant, client or line-manager, as per agreement.

**B.5 Principle 5: Professional AC Competence**

**Values Statements:**
The AC practitioner is competent in designing, implementing, evaluating and, validating ACs. The competence expectation includes that all AC staff will also be competent in their specific roles in an AC.

**Ethical Standards:**
In adhering to the principle of professional AC competence, AC practitioners are expected to

**B.5.1 - be knowledgeable about AC design and implementation**
B.5.1.1 - by ensuring their own competence in AC design and implementation according to the current best practices for ACs,
B.5.1.2 - by providing support for claims about AC design and implementation competence,
B.5.1.3 - by demonstrating an effective track record in the design and practical application of ACs in different environments,

**B.5.2 - design ACs with scientific rigour**
B.5.2.1 - by designing ACs according to scientifically sound knowledge,
B.5.2.2 - providing support for claims about the evidence-based foundation on which the AC has been designed,
B.5.2.3 - documenting the AC design process and the final AC Administration Manual and AC Technical Manual,

**B.5.3 - acknowledge own AC skill level**
B.5.3.1 - by being open and honest about AC skill level and contracting or consulting other more experienced AC practitioners when necessary to assure that the proper skill sets are available in the AC application,
**B.5.4 - ensure competent AC staff**

**B.5.4.1** - by ensuring that all AC staff are competent for their specific AC roles and duties as assessors, role-players, AC administrators, feedback givers and data management staff,

**B.5.4.2** - by providing initial and ongoing training and oversight to all AC staff to work on a specific AC,

**B.5.5 - ensure continual AC related development**

**B.5.5.1** - by regularly attending AC-related professional training and attending AC conferences to uphold AC competence,

**B.5.5.2** - by accepting the ethical obligation to stay abreast of the relevant scientific and professional practice literature and to update professional practices as needed, based on that literature,

**B.5.5.3** - by adhering to the best AC practices such as those set-out in the current *Best Practice Guidelines for the Use of the Assessment Centre Method in South Africa*, and the *Guidelines and Ethical Considerations for Assessment Center Operations* 10.

**B.5.5.4** - by accepting the professional responsibility to reflect on their overall AC practices, to learn from mistakes, to capitalise on strengths to improve the AC ‘s future success and to adapt future ACs accordingly.

**B.6 Principle 6: Professional Accountability**

**Values Statements:**

The AC practitioner accepts overall professional accountability for all AC related activities under their control. This encompasses the duty to act in a professional manner, to be aware of applicable legal issues as they apply to AC work, to avoid conflicts of interest and to put the interests of clients ahead of own interests. It includes taking responsibility for actions and decisions, having high moral standards, being trustworthy, showing professional conduct and integrity and being able to remain professional despite undue pressure.

**Ethical Standards:**

In adhering to the principle of professional accountability in the AC, AC practitioners will

**B.6.1 - maintain professional standards**

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10 Guidelines and Ethical Considerations for Assessment Center Operations, 2015
B.6.1.1 - by always exercising appropriate levels of care, diligence and skill,

B.6.2 - accept accountability
B.6.2.1- by being answerable for AC related actions and decisions,

B.6.3 - maintain professional conduct and integrity
B.6.3.1- by behaving professionally and with integrity at all times during the entire AC process even when experiencing pressures from the client or any other stakeholder,

B.6.4 - respect AC governance
B.6.4.1 - by adhering to the appropriate processes for making and implementing decisions about all aspects of an AC from the contracting phase to project closure,

B.6.5 - comply with AC design and implementation
B.6.5.1 - by following due-diligence in AC design and implementation even when pressured by stakeholders to take unscientific or unprofessional short-cuts,

B.6.6 - maintain AC standardisation
B.6.6.1 - by addressing any reasonable exceptions to standardization in a manner consistent with professional standards and knowledge,

B.6.7 - protect AC use
B.6.7.1 - by taking reasonable pro-active action to ensure the objective and appropriate application of AC results by all stakeholders,

B.6.8 - control AC data management
B.6.8.1 - by applying appropriate AC data management practices for the safekeeping of AC material and results,

B.6.9 - ensure proper protection of intellectual property
B.6.9.1 - by only using AC material for which they hold the intellectual property rights, or have obtained documented permission to use.
REFERENCES

https://www.cpa.ca/docs/File/Ethics/CPA_Code_2017_4thEd.pdf. Downloaded 17 February 2018 at 17:00


SOUTH AFRICAN ACTS APPLICABLE ON ASSESSMENT CENTRES

• Constitution of South Africa (Act 108 of 1996)
• Promotion of Equality and Prevention of Unfair Discrimination (Act 4 of 2000)
• Employment Equity Act (Act 55 of 1998)
• Health Professions Act (Act 56 of 1974), as Amended 29 of 2007
• Protection of Personal Information Act (PoPI)(Act 4 of 2013)
• Promotion of Access to Personal Information Act (PAPIA)(Act 2 of 2007)
• Consumer Protection Act (Act 68 of 2008)