

# LSLAP CODE OF CONDUCT AND PRACTICE

By completing an application to be a Law Students' Legal Advice Program ("LSLAP") clinician or volunteer, I agree to abide by LSLAP's policies as expressed in the policy and procedure guide and to act in accordance with Code of Professional Conduct of the Law Society of British Columbia.

I, \_\_\_\_\_ hereby acknowledge that in my position as \_\_\_\_\_ working or volunteering with LSLAP, I have the following duties and obligations:

## 1. Confidentiality

I have an obligation to protect the confidentiality of communications between LSLAP (including volunteers, clinicians, and staff) and the clients. I understand that communications between legal counsel and clients are privileged, and must not be disclosed unless expressly dictated by the client. I understand that when I obtain confidential and privileged information from a client, his/her lawyer, or a member of LSLAP, I owe a duty of confidentiality and loyalty to that client. Accordingly, I agree not to divulge such confidences and information to persons outside LSLAP.

I further understand that any information I share with other LSLAP volunteers, clinicians, and staff will be held in confidence by them and that I also am obliged to protect the confidentiality of information about other clients that I learn indirectly through LSLAP.

## 2. Ethics

My conduct should at all times be characterized by candour and fairness. I understand that I should maintain toward my clients, other lawyers, courts or tribunals a courteous and respectful attitude and insist on similar conduct on the part of clients.

## 3. Duty of care

In addition, I certify that I have read the Clinician Policy and Procedure Guide and other training information distributed by LSLAP and I will seek assistance from the LSLAP Supervising Lawyers on every new file I open, and that I will not provide legal advice except under the specific instruction of the Supervising Lawyers. I further understand that all original confidential documents and all client files must remain at the UBC LSLAP office, unless I have signed out the files in keeping with LSLAP policy.

I acknowledge that I have full responsibility for the safe keeping and return of copies of confidential client information for the files of which I have conduct.

I understand that one of the most important aspects of competent legal work is documenting and storing files in a professional manner. This means that all documents and work done on the file must be documented and stored within the file immediately or as soon as practicable; which means:

- a) After a phone call: document who was on the call, the date and what was discussed;

- b) After speaking to a supervising lawyer: document what was discussed;
- c) After an email is sent/received: print the email and attach it to the file;

I understand that NO letter, legal memo, fax, e-mail or any sort of written document may be sent to a client unless it has been approved by a supervising lawyer.

I agree that I am responsible for upholding the above standards for all files of which I have conduct. I am responsible for ensuring that proper file closing and transfer procedures are followed to ensure continuity of work for clients.

I agree to perform the research necessary on a file, and to actively monitor all relevant limitation dates.

## 4. Conflict of interest

I understand that I cannot act against former LSLAP clients, which means one LSLAP clinician cannot act against a former client of another LSLAP clinician, except with explicit instructions from a Supervising Lawyer. I am responsible for ensuring that conflict checks are completed where necessary, and I will advise a Supervising Lawyer immediately if I identify I possible conflict.

I further understand that I cannot act for both sides of a matter or for co-accuseds in criminal matters, which means, where a client seeks advice from LSLAP and it is discovered that the client's adversary (or co-accused) has already consulted LSLAP, that person must be referred elsewhere.

## 5. Professional conduct

I understand that as an LSLAP clinician or volunteer I have a duty to provide courteous, thorough and prompt service to clients. The quality of service required is service that is competent, timely, conscientious, diligent, efficient and civil.

I understand that I have a duty to uphold the standards and reputation of LSLAP and the legal profession.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Witness: \_\_\_\_\_

Dated this \_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year)