

Chapter 9 AGENCY CODE OF PROFESSIONAL PRACTICE

IHR has a responsibility to advocate for the clients we serve by promoting a strong ethical practice for each program. IHR will maintain professional standards throughout the agency with consideration to the clients served, agency personnel, stakeholders, and the community.

PERSONAL CONDUCT

Use of Alcohol/Drugs

- 9.01 IHR staff has a responsibility to themselves, the programs, clients, and the community to provide a positive role model regarding their personal use of mood altering drugs. Agency staff shall refrain from possessing or using illicit drugs under any circumstances. When the use of alcohol or any licit psychoactive substance impairs a staff member's personal or professional competence, the affected staff member has a responsibility to seek appropriate assistance to resolve this condition.

- 9.02 IHR staff shall not drink alcoholic beverages during their working hours, which includes lunch for day staff and dinner for evening staff, nor shall they drink alcoholic beverages immediately prior to reporting for work. IHR staff who work emergency on-call shall not drink alcoholic beverages during the time period they are scheduled for on-call duty.

Moral and Legal Standards

- 9.03 Moral and legal standards of behavior for IHR staff are a personal matter, except as such behavior may compromise the reputation and ability of the staff person and the program to serve persons and their families. IHR staff shall avoid behavior that is clearly in violation of community legal standards and be aware of prevailing community standards and the possible impact of their public behavior on their professional reputation of the agency.

Financial Reporting

- 9.04 IHR staff are responsible for being honest in filling out their time sheets, any financial or accounting reports and any records related to billing for their services.

**Personal
Replenishment**

- 9.05 Working daily with individuals and families in emotional crisis can be both physically and emotionally depleting for the staff. The health of both clients and staff hinges on the ability of each worker to seek physical and emotional replenishment outside the work setting. IHR staff are encouraged to develop a network of replenishing relationships and activities that support their overall health and increase their ability to nurturing relationships with clients.

**Outside Relationships
With Co-workers**

- 9.06 In the emotional intensity of our work, it is common to form strong bonds of affection and friendship between staff. Such relationships can serve as an important source of personal and professional support and can enhance our collaborative work with clients. There are, however, times when such intimacy can create problems both for the worker and the agency. IHR staff are discouraged from developing a work dominated social network that fails to provide an adequate time-out experience from the high stress work environment. Staff are also cautioned about the problems that can occur in staff-to-staff intimate relationships. While these latter relationships are not prohibited, problems created by such relationships will be raised as a supervisory issue at any point they impact the effectiveness of team relationships or impair the ability of a staff person to provide high quality client services.

**Personal Fund
Raising**

- 9.07 IHR staff shall not solicit funds on behalf of a personal cause.

Personal Property

- 9.08 IHR staff shall respect and safeguard personal property of the persons served, visitors, and personnel and property owned by the organization.

PROFESSIONAL CONDUCT

Staff

Development

- 9.09 Each IHR staff person has the responsibility for enhancing knowledge and skills that will increase his or her ability to work with IHR clients and their families.

Recognition of

Limitations

- 9.10 IHR staff shall not perform services outside the boundaries of their training and expertise.
- 9.11 IHR staff shall not administer or interpret psychological tests, interpret psychological or psychiatric reports, make psychological or psychiatric diagnoses, administer or recommend medication, or perform any other professional act that goes beyond the boundary of their professional training and experience. The staff are not expected to control violent or aggressive clients, but IHR does request that the employee act first to insure the safety of self and others in the area.

Business

Relationships

- 9.12 Employees are not to accept gifts, gratuities, free trips, personal property or other items of value from an outside person or organization as an inducement to provide services or to enter into a business relationship on behalf of the Agency. It is acceptable to obtain commissions, rebates, and discounts or other benefits that directly benefit the Agency and not the individual employee.

Employees may not enter into a business relationship on behalf of the Agency with a relative or close friend without the specific approval of the Executive Director.

Adherence to Agency Policies

- 9.13 IHR staff shall follow agency policies in the performance of their work responsibilities.

Change of Policies

- 9.14 Where critical of any policy or procedure, IHR staff shall work through established program channels for policy review and revision.

Discrimination

- 9.15 IHR staff shall refuse to participate in practices that result in discrimination based on age, sex, pregnancy, race, color, national origin, religion, disability, sexual orientation, military status, or financial status.

Witnessing of**Documents**

- 9.16 IHR staff has the ability to witness documents such as powers of attorney, guardianships, and advance directives.

**Representation
of Credentials**

- 9.17 IHR staff shall accurately represent their competence, education, training, and experience. A copy of all diplomas, licenses, certifications, etc., shall be provided by all staff for inclusion in his/her personnel file.

Teaching

- 9.18 As teachers, IHR staff shall accurately portray course/workshop/internship content, expectations, and level of IHR supervision of learning and shall also maintain high standards of scholarship and objectivity presenting a broad spectrum of viewpoints.

Publishing

- 9.19 When publishing professional writing or research, IHR staff shall give appropriate credit to the Agency and all persons who contributed to the development of the publication. Major contributions in the development of a written product shall be recognized through joint authorship, with the name of the principal contributor listed first. Minor contributions such as professional critique of a draft article or editing shall be acknowledged in an introductory statement or a footnote.

**Respect for
Proprietary
Products**

- 9.20 All products, instrument, reports, training aids, or other written materials developed on time are the property of IHR. Any staff person wishing to use such materials outside the boundaries of agency must have the approval of his/her supervisor for this use.

Research

- 9.21 All research by IHR staff involving any aspect of services provided through the unit shall have prior approval of the agency

Director and shall be reviewed based on ethics involved in research with human subjects.

Personal

Appearance 9.22 IHR staff shall adhere to a standard of professional dress/appearance that is appropriate to the service unit in which they work and which is appropriate for the daily activity of that unit. Standards of professional dress/appearance shall be developed for each service unit and communicated to staff in writing. Any variations in this standard on a day-to-day basis, due to alterations in the nature of scheduled activities, shall be communicated to staff verbally by the program supervisor.

**Outside Influence
On Professional**

Decisions 9.23 The decisions, recommendations and professional actions of IHR staff can have a profound impact on the lives of others. Staff shall remain cognizant of personal, social, political and financial pressure that might lead them to misuse this influence. The best interests of the client shall be protected.

Secondary

Employment 9.24 All full time IHR staff seeking secondary employment shall have such employment reviewed and approved by the IHR Director. The focus of the review is to assure no conflict of interest between the secondary employment and the employee's IHR role.

9.25 IHR staff who maintain a private counseling practice shall scrupulously avoid potential problems of conflict of interest and avoid potential problems in dual relationships with clients/families/IHR staff.

IHR Staff:

- shall not solicit IHR clients for private practice service.
- shall not utilize the facilities of IHR to see private practice clients.
- shall not charge or accept a private fee for any service provided through IHR.
- shall not use work time for personal calls, paperwork or other activities associated with private practice.
- shall not capitalize on the reputation of IHR in the promotion of their private practice.
- shall not use their IHR affiliate status to see private practice clients who are in the hospital.

- shall not utilize proprietary products and information obtained at IHR for their personal gain in the private practice.

CONDUCT IN CLIENT & FAMILY RELATIONSHIPS

Definition Of Client

- 9.26 IHR recognized that many of the disorders addressed by the agency are chronic and progressive and that many of our clients will go through varying periods of remission and relapse. Given that, clients who have completed a particular service may at a later point in time seek further agency services, all references to “client” in the IHR Code of Professional Practice shall include both former and currently active clients.
- 9.27 IHR is committed to a family centered approach to service delivery. As such, the ethical values set forth in this code shall encompass the family unit or other intimate relationships that the client is involved.

Focus on Health And Improvement

- 9.28 IHR staff shall avoid an over emphasis on dysfunction in their work with clients and families (e.g. inordinate time spent in identifying/labeling/confronting client family weaknesses and defenses) and focus on recognition of patient/family strengths, expressions of positive regard and encouragement.

Confidentiality

- 9.29 IHR staff shall strictly adhere to the confidentiality of all client/family communications as such confidentiality standards are set forth in Federal and State statutes and summarized in the IHR Policy and Procedure Manual.
- 9.30 In residential, day treatment, and group settings that involve a high level of inter-action between clients, IHR staff shall be particularly sensitive in avoiding inadvertent disclosure of information about a client to other clients receiving agency services.
- 9.31 IHR staff shall communicate to all clients, at the beginning of the initial interview, both the protections the client is afforded under state and federal confidentiality regulations and the exceptions to those regulations that allow or dictate disclosure on information

about the client without the client's written permission.

9.32 IHR staff shall seek information from clients only after informing the client of the purpose for seeking the information and that information will be used.

9.33 IHR respects the traditions and standards of confidentiality that govern most self help groups. IHR staff who participate in self-help groups shall not disclose back to the agency any information obtained regarding agency clients obtained in the staff member's role as a self-help counselor.

Respect 9.34 IHR staff shall respect the dignity and individuality of each patient/family unrestricted by consideration by age, sex, pregnancy, race, color, national origin, religion, disability, sexual orientation, military status, or financial status.

**Freedom of Religious/
Political Benefit**

9.35 IHR staff shall refrain from imposing their religious or political beliefs on IHR clients/family members, and fellow staff.

Right of Privacy

9.36 IHR staff shall respect the right of privacy of IHR clients. IHR staff working in residential components shall be particularly sensitive to the privacy needs of clients in these modalities. Staff shall knock on doors before entering, avoid unnecessary noise, and respect the client's need for alone time.

Civil Rights 9.37 IHR staff shall strive to provide services in the least restrictive environment that is capable of alleviating the client's symptoms, protecting the client, and where applicable, protecting others.

9.38 HR staff shall avoid any actions that violate or diminish the civil rights of IHR clients.

Client Autonomy

9.39 IHR shall interact with clients according to their maturational level and level of psychological functioning. Staff shall avoid interactions; for example, with higher functioning adult clients that treat the client like a child. Staff shall avoid cultivating dependent relationships with clients that decrease the client's

independence and their responsibility and accountability for their own behavior.

- 9.40 IHR staff shall maintain an objective, non-possessive and professional relationship with the agency clients.

**Experimental
Counseling
Techniques**

- 9.41 IHR staff shall inform their supervisor prior to utilizing new or experimental clinical methods and techniques that are not standard acceptable clinical practice. Where such methods are approved, the informed consent of clients shall be obtained prior to their use.

**Dual
Relationships**

- 9.42 When persons who are a family member or an intimate friend are seen at IHR the staff person affiliated with the client shall not participate, supervise, or be professionally involved in the service process.
- 9.43 IHR staff shall notify their immediate supervisor of any preexisting relationship with a client that could bias the treatment relationship or jeopardize the client/family's feelings or comfort receiving services through IHR.
- 9.44 IHR staff shall identify and report to their supervisor any areas of bias or conflict that would preclude their effective work with an assigned client.
- 9.45 IHR staff shall avoid the development of intimate social relationships with client/families that could jeopardize the ability of the unit to provide effective services currently or (in the event of relapse) in the future.
- 9.46 IHR staff shall not enter into any kind of financial transaction or business relationship outside of the agency with a current client or former client/family member.
- 9.47 IHR staff shall not accept personal gifts from clients or family members.
- 9.48 IHR staff shall not sexually exploit or engage in a sexual relationship with current/former IHR clients/family members.

- 9.49 IHR staff who participate in self help groups for their own personal benefit should seek to clarify communications to current/former clients when a staff member is speaking in a professional role as an IHR staff member and when they are speaking in a nonprofessional role as a fellow member of a self help group.
- 9.50 It is recommended that recovering staff seek to define and distinguish their professional and self help roles as clearly as possible.

Verbal/Physical Abuse/Neglect

- 9.51 IHR staff shall not verbally or physically abuse patients/family members. Staff shall not exploit, humiliate, neglect, or retaliate against clients or family members.

Civil/Criminal Proceedings

- 9.52 IHR staff shall recognize the potentially profound impact they can have on the lives of clients through participation in civil and criminal proceedings and shall utilize program supervisors to make sure that the nature and extent of testimony is both legal (re: confidentiality statutes) and in the best interest of the client.

Clients Unresponsive To Treatment

- 9.53 When a client is not benefiting from treatment at IHR in spite of supervisory review, changes in treatment plan, etc., staff have the responsibility to terminate the client and seek alternative treatment resources that may prove more successful in affecting behavior change in the patient where such resources exist. Prior to such termination, the staff member shall make sure the referral process is complete and that a reasonable termination process has been provided between the client and IHR.

Referrals

- 9.54 IHR staff shall not deny a client access to services based on the client's inability to pay for services.

Client Resources

- 9.55 IHR staff shall maximize resources available to clients/families through the use of other community health and social services.

Family

Involvement 9.56 IHR staff shall encourage the involvement of family and significant others in the treatment of clients, when clinically appropriate.

Charting 9.57 IHR staff shall respect the privacy of clients/family members by using discretion in their documentation in the client record. Information of a personal nature or information that could later be harmful to the client, if not directly pertinent to the care of the client, should not be charted in the clinical record. Particular care will be taken in the disclosure of forensic reports beyond the boundaries of the purpose for which the report was prepared.

Research

Disclosure 9.58 Any IHR staff member participating in an approved research project shall inform the participant (clients/family members) of all features of the research that might influence the willingness to participate and to explain all other aspects of the research about which the participant requires. All IHR staff shall adhere to IHR policy on research protocol, to include the informed consent of any client participating in a research study.

CONDUCT IN STAFF RELATIONSHIPS

Respect 9.59 Relationships between IHR staff should be characterized by mutual respect and an appreciation for the wide variation in professional and life experience of our team members. The primary values in the relationship between IHR shall be the value of mutual considerations and respect and the value of direct communication.

Support of Collaborative Decision-Making

9.60 IHR staff shall work to support, not subvert, decisions made in collaboration with other program staff.

Positive Work Environment

9.61 Each IHR staff member shall contribute to a supportive work environment by working to maintain a positive attitude and by supporting the professional development of other team/staff members.

Harassment 9.62 IHR staff shall respect the rights of co-workers to work in a psychologically safe environment, free from sexual, political, or

other forms of harassment. Staff should report any incidents of harassment to supervisory staff or the Director of the agency.

Hiring Former

Clients

9.63 IHR recognizes that situations arise in which a person who has previously received Agency services may be later hired into an entry level staff position, e.g. the Recovering alcoholic hired as a detox technician. To protect the privacy and Confidentiality of such individuals, the person's clinical record of his/her previous

IHR services shall be removed from the clinical record files and maintained in the Director's office.

Allegations of

Ethical Misconduct

9.64 IHR staff who hear, through their professional and social interactions outside the agency, allegations of breaches of ethical and professional conduct by another IHR staff person shall have the responsibility to:

9.64.1 communicate this information back to the person about whom the allegations were made.

9.64.2 communicate the allegation to one's supervisor.

Confronting Behavior

That Violates the

Standards in this Code

9.65 If staff are aware of behavior of another staff member that violates the standards set forth in this code, such behavior should be brought to the attention of IHR's supervisory staff. Policy shall be clear that there will be no repercussions when reporting an unethical act. Each allegations shall be carefully considered and a formal decision regarding the issue shall be made in a written report within thirty days

Conflict

Resolution

9.66 IHR staff have the responsibility to resolve any areas of interpersonal conflict that interferes with collaborative functioning or service delivery to clients. Where the conflict cannot be resolved by the parties involved, it shall be the responsibility of both parties to involve the supervisor(s) in working out the problem.

**Direct
Communication**

9.67 IHR staff shall utilize direct communication with other staff and avoid gossip, rumor, and other forms of indirect communication that could be injurious to others.

**Behavior
Compromising
Quality of
Care**

9.68 If any IHR staff member feels there is unethical behavior or behavior compromising the quality of patient care on the part of program supervisory/management staff, that is not responsive to internal feedback, the staff person should utilize the Agency's open door policy by taking information of such behavior to the Agency Director.

**Respect for
Program**

Assignments 9.69 IHR staff shall respect and support the service delivery system by:

- assuring timely and adequate clinical/medical information through the documentation of all significant events and client interactions in the client record.
- supporting clinical decisions and recommendations of the staff in interactions with clients.
- coordinating all service delivery through the program staff members assigned to the client.
- utilizing supervisory supports to resolve any conflict within primary service delivery staff that could undermine quality service delivery.

CONDUCT IN PROFESSIONAL PEER/AGENCY RELATIONSHIPS

Multiple Service

Involvement 9.70 IHR staff shall not knowingly accept treatment a client who is receiving other services related to their presenting problem, except by agreement and coordination with the other professionals/agencies.

Solicitation

Of Clients 9.71 IHR staff shall not knowingly solicit clients actively enrolled with other professionals/agencies.

**Relations with
Other**

- Professionals** 9.72 Relationships between IHR staff and other professionals in the community should be characterized by mutual respect and an appreciation for the wide variation in professional training and life experience of professionals in the human service work.
- 9.73 IHR staff shall respect the right of others to hold professional beliefs and opinions different from their own and shall use appropriate means and channels to express judgment on the actions and opinions of other professionals.
- 9.74 IHR staff shall serve as an advocate for the client when the client seems to be at risk based on the action or inaction of other professionals or agencies.

**Collaboration
Rather than
Competition**

- 9.75 IHR staff shall, through their interactions with public and professional groups, support the development of a full continuum of prevention and treatment services within the community.
- 9.76 Given limited resources, it is often impossible for IHR to address all of the needs and problems of clients seeking services at the agency. IHR staff is encouraged to utilize the whole spectrum of community health and human service agencies in addressing the needs of our clients.

CONDUCT RELATED TO PUBLIC SAFETY

Physical/

- Sexual Abuse** 9.77 IHR staff shall convey all client reports of physical or sexual abuse (either as perpetrator or victim) to their immediate supervisor and make a report to the DCFS hotline (1-800-25ABUSE).

**Threats of
Physical**

- Violence** 9.78 IHR staff shall report all threats of physical violence to themselves or others to their immediate supervisor when the response to such behavior is not outlined in the client treatment plan.

Public

Statements 9.79 All communications with the media, including requests for interviews, who to contact after hours and the use of press releases, must be approved by the Executive Director. IHR staff are urged to use great care when their professional opinions are solicited, e.g. media interviews or statements provided in a public forum, e.g. speaking engagement. Such opinions should strive toward the greatest objectivity recognizing the tentative basis of knowledge in our field and making note of alternative views to the stated opinion. Staff should make explicit any difference between their own opinions and philosophy and policies of IHR. IHR staff should provide sufficient information such statements that potential service consumers can make an informed choice or opinion on the topic being addressed.

Lending Name**For Product**

Promotion 9.80 IHR staff shall lend their name to the promotion of services or products only if said promotions are stated professionally and factually and/or all claims regarding the product can be supported by scientifically acceptable evidence. Such promotions should not list the staff members affiliation with IHR without prior administrative approval.

Involvement in**Civil/Criminal**

Proceedings 9.81 When testifying in court, preparing reports for use in pending civil or criminal proceedings, or for reports for administrative hearings, IHR staff shall exercise the highest level of objectivity and caution in expressing opinions related to a client's prognosis. Staff with any concerns regarding their role in such proceedings should involve supervisory staff to help formulate a reasonable and professional response.

Threats to

Public Safety 9.82 IHR staff shall bring to the attention of IHR management any conditions that threaten the safety of IHR clients, family members, or staff.