Ethics In Addiction Treatment

Northeast

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Values In Action

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Audio Options

- Option 1- Use your computer headphones or speakers to listen and your chat function to participate in the discussion.
- Option 2- If you do not have that capability available, you can listen in by calling: 1-800- 882-3610, then the code 8353003#.
- To avoid background noise, please mute your phone. On a regular phone you can do this by dialing 61# to mute your handset; and 60# to un-mute your handset.
- If you want to join the conversation by phone instead of chat, you can use the call-in line as well.

Housekeeping

- Government Performance Results Act (GPRA)
- Knowledge survey (will be emailed to you following the second half of the training)
- Reminders on how to use the webinar technology
- Introductions



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Learning objectives

Participants will be able to:

- Define "Ethics"
- Understand the Role of Professional Association and Agency Codes of Ethics
- Examine the relationship between Ethics and the Law
- Understand and appreciate the importance of Professional Boundaries
- Demonstrate knowledge of federal, state and agency regulations regarding confidentiality

Learning Objective (cont.)

- Identify some important legal considerations that affect clinical practice
- Apply Ethical Standards to Clinical Record Keeping
- Articulate a simple model for making ethical decisions





Introductions

- I will call on those individually who have the voice access to introduce yourself to the group
- Those using the chat function please submit your introduction and we will read it to the group
- Please include:
 - Name
 - Agency
 - Position
 - One thing you want to get out of the training

A voice from the past

Aristotle once asked his students:

"Who should we hold in higher esteem, the person who, with great effort does the right thing or the person for whom doing the right thing comes easily?" What do you think?



A couple of ethical theories

Teleological Ethics

- Ethical Principles are clear, but actions can be relative
- Seeks to maximize the good and minimize the evil
- The end justifies the means
- Can lead to rationalization



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A couple of ethical theories

Deontological Ethics

- Ethical Principles are absolute
- Ultimate Principles
 Determine the rightness or wrongness of an action
- Immediate outcomes are not the determining factor
- Can lead to rigidity



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So, what do we mean by "ethics"

Ethics refers to standards of behavior that tell us how human beings ought to act in their various personal and professional roles.

Markkula Center for Applied Ethics (www.scu.edu)

The Case of the Mall Dentist

- An office worker chipped his tooth at lunchtime on a Friday. The jagged tooth is causing some discomfort. He calls his dentist but is unable to be seen until Monday. He decides to stop at the mall after work and visit the walk-in dental clinic there. The dentist sees him and files down the jagged edge of the chipped tooth. Before sending him on his way, he writes a prescription for percocet, "Just in case you experience any continued pain or discomfort."
- 1. Any ethical issues here?
- 2. If so, how should they be resolved?

Ethics is not the same as:

- Personal Feelings
- Religious beliefs
- Law
- Cultural Norms
- Science

Though all of these things can inform ethical thinking

Another Case: "I Can't Feel Your Pain"

"Gary" is admitted to the emergency room for an accident while driving under the influence. He has broken his leg in three places and shattered his elbow. Not only does he have a blood alcohol level of .15 but he admits to the ER physician that he has been abusing Oxycontin. Since he is going to need surgery he want to make sure he gets enough pain medicine afterwards. He says he may need a higher dose due to his drug abuse.

"...Pain", continued

- 1. Should this information influence the treatment plan?
- 2. Are there any other morally relevant facts the ER doctor and surgeon should consider before the operation?

... more Pain

After the operation the surgeon prescribes an unusually high dose of pain medication. The nurse who is distributing the meds says: "This is ridiculous! No one would need this high of a dose. His pain can't be that bad. I'm uncomfortable giving it to him."

- 1. Any ethical issues here?
- 2. What should the nurse do?

Taken to the Cleaners

• The horns of a dilemma



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Professional Associations Codes of Ethics

- Most Professional Associations, Licensing and Certification Boards have Codes of Ethics
- They act as a general guide
- They also spell out the mission and values of that profession
- When you "sign on" you agree to be measured against the code
- Sanctions could occur for violations

Agency Codes of Ethics

- Many agencies have their own Codes of Ethics
- They outline employee behavior that will be encouraged as well as behavior that will not be tolerated
- Violations can lead to disciplinary action or termination of employment
- If your agency has such a code, make sure you read it and ask questions
- If your agency doesn't have one, it should

Personal Values/Ethics "Fit"

- When you decide to formally enter a profession, seek a license of certification or work for a specific agency, make sure you "fit"
- If your values do not match the values of an agency, don't accept a job there
- An ethical "hall of famer"

Values Walk "Chat"

- Abortion should be prohibited (except when the mother's life or health may be in danger)
- The death penalty should be a sentencing option for capital crimes
- Needle exchange programs should be funded by the government
- Scientists should be allowed to use live animals for research



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Values Walk "Chat" – continued

- Physician-assisted suicide should be a legal option in cases of terminal illness
- Marijuana should be legalized
- Heroin injection clinics should be established in the US as they are in Canada
- Addicts arrested for a criminal offense should be sent to a treatment program instead of jail

What about the law

- Laws are rules applied to all citizens and held as binding by the state to ensure social order.
- Laws are necessary to avoid chaos in a community and can protect individuals from each other and even the state itself
- Not all laws are ethical, so ethics and the law sometimes conflict

Health care ethics based on the 200 b.c. oath of the Hippocratic school

- Autonomy
- Respect for persons
- Confidentiality
- Truth telling
- Nonmaleficence
- Beneficence

Our patients

- They are not well
- They see us as powerful
- They are vulnerable
- They have rights
- They can improve their lives

Continuum of professional behavior



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Please rejoin us on April 14.



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Maintaining good professional boundaries

- 1. Plan interactions with the goal of meeting the therapeutic needs of the patient.
- 2. Be aware of your own needs, values and attitudes in a professional relationship.
- 3. Dress and speak in a manner appropriate to your professional role.
- 4. Limit self-disclosure. If you do reveal personal information make sure it has therapeutic value for the patient.
- 5. Avoid blurring boundaries by saying or doing things that could be misinterpreted by patients and/or others.
- 6. React to patients' symptomatic behavior in a professional manner. Avoid punitive responses, while holding the patient responsible for his/her words and behavior.
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Maintaining good professional boundaries – *continued*

- 7. Spend the amount of time and effort with each patient that is clinically indicated.
- 8. Apply the structure of the treatment plan. Good treatment plans make for good boundaries.
- 9. Respect patient confidentiality, formally and informally.
- 10. Do not engage in any type of dual relationship with patients, including personal, business, financial, romantic and sexual relationships.
- 11. Discuss any concerns you have about boundary issues with your supervisor early and often.

Case- Confidentiality and the Law

 A court ordered client comes to an appointment after skipping his previous session. His counselor tells him that if he misses another session, she will have to report him to his probation officer. At this, the client becomes extremely agitated. He tells her that if she does report him, it will be the last time she reports anybody. "I know when you get off work", he says, "And I can find out where you live, too." He then storms out of the agency.

Confidentiality... continued

She consults with her supervisor and they decide to call both the probation officer and police immediately. When the police arrive at the agency to interview the counselor, she recounts the incident and says: "I'm really worried that this client will find me and harm me! He's admitted to being violent with his wife, although the authorities are not aware of this, and, in order to get revenge on someone once he cut the break line on their car. Fortunately, the intended victim was not seriously injured in the resulting accident and no one ever found out that my client had done this. I don't want to be his next victim!

Confidentiality... continued

- 1. What are the ethical issues here?
- 2. Has the counselor done the right thing?
- 3. What about the supervisor?

Confidentiality

It's simple:

- The identity of a patient in treatment for drug and alcohol problems must be kept confidential, unless the patient gives informed, written consent to release information.
- This protection begins with the first call to the agency to set up an appointment.

Confidentiality

It's complex:

- Types of consent: what information can you release and to whom can you release it
- Managed Care
- Medical emergencies
- Subpoena's
- Court Orders
- Duty to Warn

Record Keeping Follies

You have been seeing a client for the past 6 months. You are 3 months behind in your documentation in the chart. The supervisor has announced that the funding agency is coming in for an audit on Monday and she hopes everyone's charts are in order.

Follies... Continued

You come in on the weekend to update your chart. You know the client is scheduled every Thursday at 3 pm and you know, in general what you have been working on in treatment. You kind of remember that he missed a session or two during those 3 months, but you can't remember which dates. So you decide to write a note for every Thursday he could have attended.

Record Keeping- The Purpose

- Communicate patient progress in treatment
- Can improve patient care by helping the clinician think logically about a case
- Reflects the competence of the caregiver
- Helps funding groups verify that the treatment they are paying for is actually occurring
- Serves as a legal record of treatment activities

Record Keeping- The Ethics

- Do required documentation in a timely fashion
- Insure that the documentation is individualized and distinguishes one patient from another.
- Make sure that documentation records the treatment event accurately in terms of time and content, but be concise and discreet.
- Treatment plans should relate to assessment information, progress notes should relate to treatment plans.

Record Keeping (continued)

• Avoid "pretending" to keep a record (for example, backdating, guessing, etc)

Making good ethical decisions

- Learn to recognize ethical issues
- Gather as many facts as you can
- Evaluate your options
- Consult appropriately
- Make a decision
- Test it
- Act
- Reflect and learn

-Markkula Center for Applied Ethics



Stop Look Listen Decide Act

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ETHICS TRAINING CASE STUDIES-

Case 1 - You are a drug and alcohol therapist at a local agency. This agency does not prohibit its therapists from having their own private practices on their own time. But it does have a rule that prohibits an agency therapist from seeing former clients of the agency in their own practices for at least a year after their discharge.

Case 1 continued - You have been carefully recording the names and addresses of the clients you see at the agency. When they have been discharged from the agency for one year, you send them a letter reminding them that you were their therapist at the agency, wishing them well but letting them know that you are in private practice and that they should feel free to contact you if they are experiencing any problems currently.

Case 3 - You and a colleague both run therapy groups at the agency from 7 to 9 once a week. Lately, you have been hearing his group break up at 8:30. At first you just thought they were on break, but then you began to notice that, when your group broke up at 9, nobody else was around. You look at some billing slips and note that your colleague is marking down 2 hours for his group.

Case 4 - The secretary at your agency has worked there for many years and is liked by all the staff. She is a widow with adult children who lives alone. A young man has been coming in for counseling for about six months. His father (who is divorced) drives him to his counseling sessions and waits in the reception area to take him home after the session. He and the secretary have had many conversations over the months. It is clear that the secretary enjoys these "visits" and other staff members have even taken to kidding her about her "boyfriend".

Case 4 continued - Their conversations are friendly, but not personal and certainly don't touch on any clinical information. One day, several weeks after the young man has attended his last treatment session, the secretary receives a phone call at work from the father. He suggests that he would like to meet her for coffee after work sometime, and that he misses their conversations. She is clearly interested, but a little taken aback, so she tells him she will call him back. She hangs up, comes back to your office and asks you what she should do.

Resources

- The Book of Ethics- Expert Guidance for Professionals Who Treat Addiction, Edited by Geppert and Roberts, Hazelden, 2008
- Confidentiality and Communication- A Guide to the Federal Drug and Alcohol Confidentiality Law and HIPAA, Legal Action Center, 2006
- Motivational Interviewing- Preparing People For Change, Miller and Rollnick, The Guilford Press, 2002, Chapter 12, "Ethical Considerations"
- Markkula Center for Applied Ethics, scu.edu/ethics

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