

2017 CRCC Code of Ethics Top Ten Changes & CDMS Comparison

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2017 Prominent Code Changes

- * **Values & Termination/Referral:** *Enhanced guidance regarding obligation to avoid values imposition; i.e., values issues in termination & referral. (A.4 & A.8.b)*
- * A.4: Rehabilitation Counselors are aware of & avoid imposing their own values, attitudes, beliefs, & behaviors.
- * A.8.b: Rehabilitation Counselors refrain from referring prospective & current clients based solely on personally held values, attitudes, beliefs, & behaviors.

2017 Prominent Code Changes

- * **Technology:** *Recognizes how technology is integrated in every aspect of practice; provides greater clarity for informed consent & disclosure in distance counseling; addresses required practices in use of social media. (Section J and throughout the Code)*
- * **Section J Introduction:** *Rehabilitation Counselors recognize that service provision is not limited to in-person, face-to-face interactions. They understand the legal & ethical implications of using social media when interacting with clients.*

2017 Prominent Code Changes

- * **Personal Virtual Relationships:** *Prohibits engaging in personal virtual relationships with current clients through platforms such as social media. (A.5.f)*
- * A.5.f: Rehabilitation Counselors are prohibited from engaging in personal virtual relationships with current clients.

2017 Prominent Code Changes

- * **Roles & Responsibilities:** *Provides additional guidance regarding service provision with previous sexual or romantic partners, friends, & family members; also enhanced guidance regarding extending professional boundaries. (A.5.d, A.5.e, A.5.g, & A.5.h)*
- * **A.5.d:** Rehabilitation Counselors are prohibited from engaging in the provision of rehabilitation counseling services with persons with whom they have had a previous electronic and/or in-person sexual or romantic interaction or relationship.

2017 Prominent Code Changes

- * **Roles & Responsibilities:** *Continued*
- * A.5.e: Rehabilitation Counselors are prohibited from engaging in provision of rehabilitation counseling services with friends or family members with whom they may have an inability to remain objective.
- * A.5.g: Rehabilitation Counselors consider the risks and benefits of extending the boundaries of their professional relationships with current or former clients, their romantic partners, or their family members to include interactions not typical of professional rehabilitation counselor-client relationships. Informed consent, consultation, & supervision. Time limited.

2017 Prominent Code Changes

- * **Roles & Responsibilities:** *Continued*
- * A.5.h: If expanding boundaries, Rehabilitation Counselors must officially document , prior to the interaction (when feasible) the rationale for such interaction, the potential benefit, & anticipated consequences for the client or former client and other individuals significantly involved with the client or former client.

2017 Prominent Code Changes

- * **Outcome Based Payments & Liens:** *Includes guidance for acceptable practices; reinforces payment for services based on an outcome of a case of award is not acceptable. (K.3.d & F.4.a)*
- * K.3.d: Liens & payments based on outcomes are acceptable when it is standard practice within a particular setting. In a forensic setting, payment for services is never contingent on an outcome of a case or award.
- * F.4.a: Forensic rehabilitation counselors do not enter into financial agreements that may compromise the quality of their services or raise questions about their credibility.

2017 Prominent Code Changes

- * **Assessments, Evaluation & Tests/Instruments:** *Consistency in use of terms applied throughout the section, terms defined in Section G & Glossary.*
- * Section covers informed consent, release of assessment or evaluation information, proper diagnosis of mental disorders, competence to use and interpret tests/instruments, test/instrument selection, test/instrument administration conditions, test/instrument scoring & interpretation, test/instrument security, obsolete tests/instruments & outdated results, & test/instrument construction.

2017 Prominent Code Changes

- * **Role Changes In Forensic Setting:** *Provides cautions as well as clear guidance when changing roles, including the requirement to complete a new professional disclosure form. (F.1.c)*
- * F.1.c: Careful evaluation and documentation of the risks and benefits to evaluatees is required before initiating role changes. Discussion of the implications of the role change with the evaluatee, including possible risks & benefits, is required.

2017 Prominent Role Changes

- * **Self Reporting:** *New standard requiring notification to CRCC when certified rehabilitation counselors are sanctioned for violations of other ethical codes, violated laws related to rehabilitation counseling, or are convicted of offenses that constitute violations of the code. (L.2.e)*
- * L.2.e: Rehabilitation Counselors shall immediately notify CRCC when sanctioned of violations of ethical codes by any applicable counselor licensure, certification, or registry boards; other mental health bodies; voluntary national certification boards; or professional associations with which they are affiliated.

2017 Prominent Code Changes

- * **Section Introductions:** *Added to provide context for the Enforceable Standards within the section; introductions are aspirational – not enforceable.*

2017 Prominent Code Changes

- * **Preamble:** *Enhanced to reinforce that Enforceable Standards are not to be interpreted in isolation; actions of Rehabilitation Counselors should be consistent with the spirit, as well as the letter of the Enforceable Standards.*

2017 CRCC COE Supportive Sources

- * **Contemporary Decision Making Models:** *Extracted from the CRCC Desk Reference and available at:*
- * *<https://www.crc certification.com/decision-making-models>*
- * **Updated Professional Disclosure & Release Forms:**
Available at: <https://www.crc certification.com/disclosure-and-release-forms>
- * *Release of information & release for information are now one form.*

CDMS Comparison

- * **RPC 2.03.e Technology:** It is recommended that certificants utilize the most recent security available for all technology used to protect a client's confidential health and personal information. (CRCC: Technology)
- * **RPC 2.01 Dual Relationships:** All dual relationships must be disclosed. Dual relationships, other than payor/client, include, amongst others listed, close personal relationships with individual clients. (CRCC: Personal Virtual Relationships)

CDMS Comparison

- * **RPC 1.14 Conflict of Interest:** Certificants shall fully disclose actual or potential conflict of interests to all affected parties. Shall refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests could reasonably be expected to (1) impair their objectivity, competence, or effectiveness in performing their functions as disability managers or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation. (CRCC: Roles & Relationships)

CDMS Comparison

- * **RPC 1.14 Conflict of interest:** See previous slide.
(CRCC: Outcome Based Payments & Liens)
- * **RPC 1.18 Fees:** Certifcants shall advise payor of their fee structure in advance of rendering any services & also furnish, upon request, detailed & accurate records of professional activities. (CRCC: Outcome Based Payments & Liens)
- * **CRCC Assessment, Evaluation & Tests/Instruments:**
No comparative CDMS RPC language found.

CDMS Comparison

- * **CRCC Role Changes In Forensic Setting:** No comparative CDMS RPC language found.
- * **CRCC Self Reporting:** No comparative CDMS RPC language found.
- * **CDMS Principles:** As stated in CDMS Preamble, Principles are fundamental assumptions to guide professional conduct. They are aspirational in nature to guide and inspire the professional toward the “very highest ethical standards of the profession.” (CRCC Section Introductions)

CDMS Comparison

- * **CDMS Preamble:** Very detailed statement regarding objective of the Code, principles/fundamental assumptions, Rules of Professional Conduct, five principles of ethical behavior, primary obligation of the certificant, and the expectation/commitment of all disability managers to uphold the profession's values and to act ethically.
- * (CRCC Preamble was enhanced to reinforce that enforceable standards are not to be interpreted in isolation. Behavior should be consistent with the spirit and letter of the enforceable standards.)