

## **SECTION .0500 - ETHICAL PRINCIPLES OF CONDUCT FOR THE SUBSTANCE ABUSE PROFESSIONAL**

### **21 NCAC 68 .0501 PURPOSE AND SCOPE**

(a) The Board may deem violation of these ethical principles of the Board, malpractice, negligence, incompetence, or engaging in conduct that could result in harm or injury to the public, as stated in G.S. 90-113.44(a)(9).

(b) Ethical principles shall provide a standard for the substance use disorder professional in his or her professional roles, relationships, and responsibilities.

(c) Upon submission of an application for a credential, each applicant shall review the ethical principles in these Rules, and agree to uphold the ethical principles of this Section.

### **21 NCAC 68 .0502 NON-DISCRIMINATION**

The substance use disorder professional shall not discriminate against clients or other professionals based on race, religion, age, sex, handicaps, national ancestry, sexual orientation, or economic condition.

### **21 NCAC 68 .0503 COMPETENCE**

(a) The substance use disorder professional shall employ their knowledge, skill and proficiencies within their scope of practice.

(b) The substance use disorder professional shall respect cultural and ethnic values in order to provide the highest level of care for a client who possesses a diverse or unfamiliar cultural or ethnic background.

(c) The substance use disorder professional shall provide the interpretive services to any client or refer the person for services.

(d) The substance use disorder professional shall assist in eliminating prevention, intervention, treatment, and supervision practices by persons unqualified or unauthorized to practice in the field.

(e) The substance use disorder professional who knows of unethical conduct, as defined by the rules of this Chapter, by a substance use disorder professional shall report such violations to the Board.

(f) The substance use disorder professional shall recognize boundaries and limitations of his or her competencies and not offer services or use techniques outside of his or her professional competencies and scope of practice.

(g) The substance use disorder professional who identifies a need for services outside his or her skill, training or experience shall refer the client to an appropriate professional or shall seek supervision and training to provide the required services for the individual.

(h) The substance use disorder professional shall complete reports and record keeping functions in a manner that supports the client's treatment experience and welfare.

(i) The substance use disorder professional shall recognize the negative impact impairment has on his or her functioning in public and professional performance and shall report the impairment to the Board for investigation and review, which may result in disciplinary or non-disciplinary action.

**21 NCAC 68 .0504                      LEGAL STANDARDS AND ETHICAL STANDARDS**

(a) The substance use disorder professional shall not claim or imply educational, experiential, or professional qualifications or affiliations that the substance use disorder professional does not possess.

(b) The substance use disorder professional shall not use membership on the Board for purposes that are not consistent with the rules of this Chapter. No Board member shall advertise, promise, or provide special treatment to any individual because of membership on the Board or its committees.

(c) The substance use disorder professional shall not lend his or her name to or participate in any professional or business relationship that may knowingly mislead the public.

(d) The substance use disorder professional shall follow all state and federal laws on research with human subjects when he or she engages in such research.

**21 NCAC 68 .0505                      EDUCATION AND TRAINING STANDARDS**

(a) The substance use disorder professional shall be prepared to provide the source for any materials or techniques used when making either public statements or providing education and training.

(b) The substance use disorder professional shall not knowingly make false, deceptive, or fraudulent statements concerning their services, fees, clinical research, or degree of success of their professional services.

**21 NCAC 68 .0506****PUBLICATION CREDIT**

The substance use disorder professional shall assign credit to all who have contributed to the published material and for the work upon which the publication is based.

- (1) The substance use disorder professional shall recognize joint authorship contributions made by several persons to a common project. The author who has made the principal contribution to a publication shall be identified as a first listed.
- (2) The substance use disorder professional shall acknowledge, through specific citations, unpublished, as well as published material, that has influenced the research or writing.
- (3) The substance use disorder professional who compiles and edits for publication the contributions of others shall list oneself as editor, along with the names of those others who have contributed.

**21 NCAC 68 .0507****CLIENT WELFARE**

- (a) The substance use disorder professional shall protect the safety and welfare of the client.
- (b) The substance use disorder professional shall inform clients of the nature and direction of loyalties and responsibilities and keep all parties participating in the client's care informed of these commitments.
- (c) The substance use disorder professional, in the presence of professional conflict, shall be concerned primarily with the welfare of the client.
- (d) The substance use disorder professional shall withdraw services only after giving consideration to all factors in the situation and taking care to minimize adverse actual or possible effects.
- (e) The substance use disorder professional shall, after minimizing any adverse impact, end a counseling or consulting relationship when the professional knows or should know that the client is not benefiting from services.
- (f) The substance use disorder professional who anticipates the cessation or interruption of service to a client shall notify the client and seek the cessation, transfer, referral, or continuation of service in relation to the client's needs and preferences.

(g) The substance use disorder professional shall not use a client in a demonstration that would violate the confidentiality of the client.

(h) The substance use disorder professional shall deliver services in a setting that respects client confidentiality.

(i) The substance use disorder professional shall collaborate with other health care professionals providing treatment or support services to a client.

## **21 NCAC 68 .0508                      CONFIDENTIALITY**

(a) The substance use disorder professional shall protect the privacy of current and former clients and shall not disclose confidential information without prior consent.

(b) The substance use disorder professional shall inform the client and obtain written permission for the use of interview material for training purposes and observation of an interview.

(c) The substance use disorder professional shall make provisions for the maintenance of confidentiality and the ultimate disposition of confidential records.

(d) The substance use disorder professional shall disclose confidential information only in accordance with state confidentiality rules found in 10A NCAC 26B and in 42 CFR Part 2.

(e) With prior written consent the substance use disorder professional shall discuss the information obtained in a clinical or consulting relationship only in a professional setting and only for a professional purpose concerned with the case. Written and oral reports shall present only data germane to the purpose of the evaluation.

(f) The substance use disorder professional shall use material in classroom teaching and writing only when the identity of the person involved is disguised to prevent disclosure or documented permission is given by the party or the information is in the public domain.

(a) The substance use disorder professional shall not enter into a client-professional relationship with members of the professional's immediate family. For the purpose of this Rule "immediate family" means spouse, parent, sibling, child, grandparent, grandchild, stepchild, stepparent, parent-in-law, and child-in-law.

(b) The professional shall avoid dual relationships that could impair professional judgment or increase the risk of exploitation of a client. For the purpose of this Rule "dual relationships" includes relationships in a social media setting where the professional and client have access to privileged information including relationships, photographs, and personal thoughts and opinions of the professional and the client.

(c) Sexual activity or sexual contact of a substance use disorder professional with a client shall be restricted as follows:

- (1) The substance use disorder professional shall not engage in or solicit sexual activity or sexual contact with a current client.
- (2) The substance use disorder professional shall not engage in or solicit sexual activity or sexual contact with a former client for five years after the termination of the counseling or consulting relationship.
- (3) The substance use disorder professional shall not engage in or solicit sexual activity or sexual contact with any client the professional knows to be currently in treatment at their own agency or place of professional employment.
- (4) The substance use disorder professional shall not knowingly engage in or solicit sexual activity or sexual contact with any identified former client of their own agency or place of professional employment for five years after the termination of the counseling or consulting relationship if both the professional was employed at the agency and the former client was a client of the agency during the same time period.
- (5) Because sexual activity with a client is harmful to the client, a substance use disorder professional shall not engage in sexual activities with a former client even after a five-year interval unless the substance use disorder professional who engages in such activity after the five years following cessation or termination of treatment bears the burden of demonstrating that there has been no harm to the client in light of all relevant factors, including the following:
  - (A) the amount of time that has passed since treatment services were terminated;
  - (B) the nature and duration of the treatment services;

- (C) the circumstances of termination;
- (D) the client's personal history;
- (E) the client's current mental status;
- (F) the likelihood of adverse impact on the client and others; and
- (G) any statement made or action taken by the substance use disorder professional during the course of treatment suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client.

(d) The substance use disorder professional shall not misuse their professional relationship for sexual, financial, or any other personal advantage.

#### **21 NCAC 68 .0510 INTERPROFESSIONAL RELATIONSHIPS**

(a) The substance use disorder professional shall treat colleagues with respect, courtesy, and fairness and shall afford the same professional courtesy to other professionals.

(b) The substance use disorder professional shall not offer professional services to a client in counseling or consulting with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professional.

(c) The substance use disorder professional shall cooperate with the committees of the board and supply requested information unless prohibited by law.

#### **21 NCAC 68 .0511 REMUNERATION**

(a) The substance use disorder professional shall establish financial arrangements to protect against fraud and deceptive business practices in professional practice and in accord with the best interests of the client or person served, the professional, and of the profession.

(b) The substance use disorder professional shall not send or receive any commission, rebate, or any other form of remuneration for referral of a client or a person served for professional services.

(c) The substance use disorder professional shall not accept a private fee or any other gift or gratuity having a cumulative value of twenty-five dollars (\$25.00) or more for professional work with a person who is receiving such services with the professional or through the professional's institution or agency.

(d) The substance use disorder professional shall make available written policies and procedures available to their clients or persons serviced. The substance use disorder professional shall present referral options to the client or person served if available.

(e) A substance use disorder professional shall not use their employer's organization to solicit clients or persons served for one's private practice without written authorization from the employer.

## **21 NCAC 68 .0512                      RESPONSIBILITIES OF SUPERVISOR AND SUPERVISEE**

(a) A professional who has received a credential from the Board and who is serving as a clinical or practice supervisor shall:

- (1) be aware of their position with respect to supervisees and therefore not exploit the trust and reliance of such persons;
- (2) avoid dual relationships that could impair professional judgment, increase the risk of exploitation, or cause harm to the supervisee. To implement this standard the supervisor shall not:
  - (A) instruct or supervise a person with whom the supervisor has participated in a sexual activity; a person living in the supervisor's household; or an immediate family member. For the purpose of this Rule, "immediate family member" means spouse, parent, sibling, child, grandparent, grandchild, stepchild, stepparent, parent-in-law, and child-in-law;
  - (B) provide therapy or therapeutic counseling services to supervisees; or
  - (C) solicit or engage in sexual activity or contact with supervisees during the period of supervision.
- (3) trained in and knowledgeable about supervision methods and techniques;
- (4) supervise or consult only within their knowledge, training, and competency; and
- (5) guide their supervisee to perform services in accordance with the ethical principles of this Chapter. As authorized by the supervisee's employer, the supervisor shall assign to their supervisees only those tasks or duties that these individuals can be expected to perform, based on the supervisee's education, experience, or training, either independently or with the level of supervision being provided;
- (6) withhold confidential information provided by a supervisee except:

- (A) as mandated by law;
  - (B) to prevent harm to a client or other person involved with the supervision;
  - (C) in educational or training settings where there are multiple supervisors, and then only to other supervisors who share responsibility for the performance or training of the supervisee; or
  - (D) if consent is obtained.
- (7) establish and facilitate a process for providing evaluation of performance and feedback to a supervisee. To implement this process the supervisee shall be informed of the timing of evaluations, methods, and levels of competency expected. Supervision documentation shall be signed by the supervisor and supervisee and include the date, time, duration, method, and topic of the supervision session;
- (8) withhold endorsement of supervisees for credentialing, employment, or completion of an academic training program if they believe the supervisees are not qualified for the endorsement. A supervisor shall develop a plan to assist a supervisee who is not qualified for endorsement to become qualified;
- (9) make financial arrangements for any remuneration with supervisees and organizations only if these arrangements are in writing. All fees shall be disclosed to the supervisee prior to the beginning of supervision; and
- (10) review documentation of previously supervised work experience, provided by the supervisee, for the purpose of credentialing by the Board. The supervisor may verify these hours to the Board if the supervisor deems that the supervision was performed and may include these verified hours in their evaluation to the Board.

(b) The supervisor of record shall provide notice to the office of the Board within 30 days from the date of the last session of clinical supervision that supervision has terminated. Upon receipt of this notice, the Board shall notify the supervisee that they have 30 days to obtain a supervisor to retain the current credential. The supervisee shall add a new supervisor or otherwise update their supervision contract signed and dated by the supervisor and supervisee on file with the Board.