

NAADAC/NCC AP Code of Ethics: A Living Document



By Mita M. Johnson, EdD, LPC, MAC, SAP, CTHP-II, NAADAC President

Providing services that help individuals, families, communities, and organizations address substance use and addictive behavior disorders is a vital component of healthcare. The continuum of care weaves through prevention-specific activities, treatment, and recovery support services. At the forefront of all services offered to clients and communities is the mandate to “do no harm.” To “do no harm” is meant to encompass a broad range of attitudes, beliefs, and actions. It is important that organizations like NAADAC offer a professional Code of Ethics, which guides service providers in their decision making and activities. The NAADAC/NCC AP Code of Ethics provides members, nonmembers, supervisors, administrators, private and public agencies, state regulatory and grievance boards, licensing bodies, and allied professional organizations with professional, relevant standards of practice that guide addictions-specific and co-occurring-specific work.

The NAADAC/NCC AP Code of Ethics could not possibly cover all professional ethical and unethical activities and scenarios. Instead, the Code promotes ethical decision making, reduces ambiguity, and encourages risk identification and management. It is a living document that is updated as the profession grows and evolves. In 2019, the Chair of the NAADAC Ethics Committee (Mita Johnson, EdD, LPC, MAC, SAP, CTHP-II), the Chair of the NCC AP Ethics Committee (Rose Maire, MAC, LCADC, CCS), the Chair of the NAADAC Bylaws Committee (Ron Chupp, LCSW, LCAC, NCAC II, ICAC II) and the NAADAC Executive Director (Cynthia Moreno Tuohy, BSW, NCAC II, CDC III, SAP) reviewed the Code of Ethics that was most recently revised in 2016. Edits and changes to language – to promote clarity – were made throughout the document. In several places, there were additions made based on input and cases reviewed by the Ethics Committee over the last four years. The updated NAADAC Code of Ethics was approved at the NAADAC Board of Directors Meeting in October 2020 and went into full effect January 1, 2021.

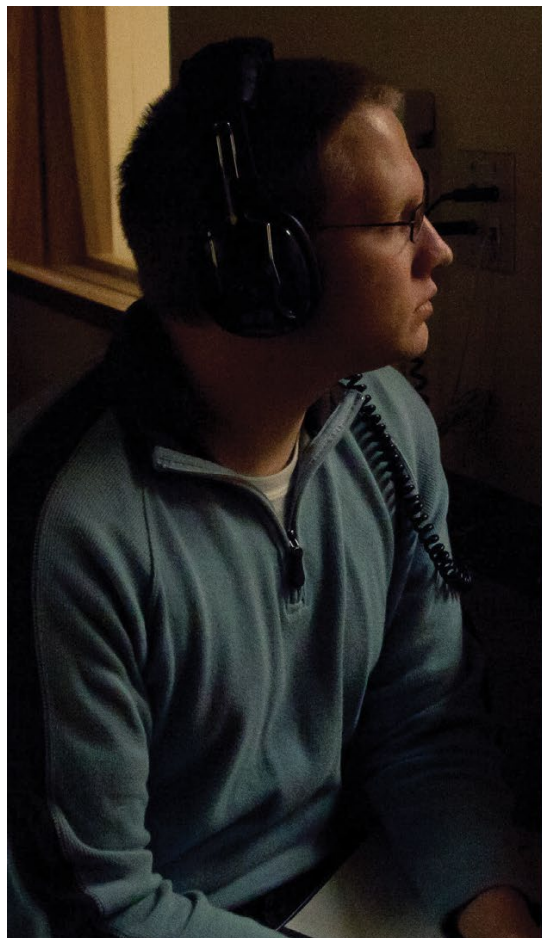
The Ethics Committee would like to highlight here updates that were substantive and necessary to keep pace with the dynamic changes within our profession.

- **I-5 (Diversity):** Addiction professionals shall respect the diversity of clients and provide culturally responsive and culturally sensitive services to all clients.
- **I-40 (Gifts):** *Added* - Providers shall obtain supervision or consultation prior to deciding whether or not to accept or decline a gift and shall document the recommendations.
- **II-11 (Multidisciplinary Care):** *Added* - The client shall have the right to ask who the members of the team are and what information is being shared.
- **II-24 (Multidisciplinary Consultation):** Addiction professionals shall not release confidential information to external professionals, which shall include, but shall not be limited to physicians, probation and parole officers, and psychiatrists without first obtaining written consent to release information.
- **III-9 (Credentials):** *Added* - Providers shall claim and present only those specialized certifications received from a qualified certifying body. Providers shall accurately represent the accreditation status of a specific institution of higher learning or certifying body.
- **III-28 (Qualified):** Addiction professionals shall work to promote the practice of addiction counseling by qualified persons and shall only employ individuals who have the appropriate and requisite education, training, licensure and/or certification, and supervised experience.
- **III-29 (Advocacy):** Addiction professionals shall be aware of society’s prejudice and stigma towards people with substance use disorders, and shall willingly engage in the legislative process, educational institutions, and public forums to educate people about addictive disorders, and shall advocate for opportunities and choices for our clients. Providers shall advocate for their clients as needed.

- **III-40 (Termination):** *Added* - Addiction professionals or agencies shall develop policies regarding continuation of services upon the incapacitation, termination, retirement or death of the provider.
- **V-12 (Security):** *Added* - Providers shall give credit to the developer and/or publisher of the test or assessment.
- **VI-I (Introduction):** Addictions professionals are witnessing an expansion of available technologies that offer opportunities for electronic and distance delivery of care, billing services and client record storage, transfer and maintenance. Providers shall be current on related technologies and understand their application. Providers shall consider the potential benefits and risks for harm to clients in exposure to specific technologies or in having confidential information stored and/or transmitted electronically. Examples of potential benefits of using e-delivery for counseling services shall include but shall not be limited to: (a) reducing geographical barriers, (b) provision of services to those with physical or psychological disorders, and (c) working with individuals and families who would not take advantage of traditional services. Examples of potential limitations of using e-delivery for counseling services shall include but shall not be limited to: (a) concerns about maintaining confidentiality, (b) challenges associated with developing a therapeutic alliance, (c) inability to assess nonverbal communication, (d) determining and resolving practice

and licensure jurisdiction concerns, and (e) assessment and provision of emergency services.

- **VI-2 (Competency):** *Added* - Providers shall be trained and current in their knowledge of e-therapy technologies and techniques.
- **VI-3 (Informed Consent):** *Added* - Providers shall have the client/supervisee attest to their understanding of the parameters covered by the Electronic/Technology Informed Consent by signing the Electronic/Technology Informed Consent. Providers who obtain initial Consent by verbal attestation shall follow up in a timely manner with a written, signed, and dated, document.
- **VI-4 (Informed Consent):** Addiction professionals shall execute thorough e-therapy informed consent prior to starting technology-based services. A technology-based informed consent discussion shall include, but shall not be limited to:
 - contact information of the client, counselor/provider and supervisor;
 - e-therapy is not always an appropriate substitute or replacement for face-to-face counseling;
 - all of the procedures that apply to delivery of in-person services shall apply to the e-delivery of services;
 - duty to warn and mandatory reporting laws that shall apply to all counseling services, including e-therapy;



EASTERN ILLINOIS UNIVERSITY™

MASTER OF SCIENCE IN
**CLINICAL MENTAL
 HEALTH COUNSELING**
 AT EASTERN ILLINOIS UNIVERSITY

- PRACTICAL EXPERIENCE
- OUTSTANDING FACULTY
- LICENSURE
- FIRST CHOICE GRADUATE PROGRAM
- FUNDING OPPORTUNITIES

+ **DEPARTMENT OF COUNSELING
 AND HIGHER EDUCATION**
 DR. RICHARD ROBERTS, PROFESSOR
 AND DEPARTMENT CHAIR
 217-581-2400
 CHE@EIU.EDU

eiu.edu/counseling/clinical.php

- confidential and privacy rules and laws, and exceptions to those rules and laws;
 - issues related to security and privacy of information, and potential for hacking or other unauthorized viewing;
 - access to counseling services and to technology assistance to use e-therapy;
 - benefits and limitations of engaging in the use of distance counseling, technology, and/or social media;
 - potential misunderstandings due to limited visual and auditory cues;
 - potential for confusion often present in e-delivery of services;
 - response time to asynchronous communication (emails, texts, chats, etc.);
 - possibility of technology failure and alternate methods of service delivery;
 - emergency protocols to follow;
 - procedures for when the counselor is not available;
 - consideration of time zone differences;
 - policy regarding recording of sessions by either party;
 - cultural and/or language differences that may affect delivery of services;
 - possible denial of insurance benefits; and
 - social media policy.
- **VI-13 (Boundaries):** *Added* - Providers shall be aware of the unique risks for boundary crossings associated with the e-delivery of services.
 - **VII-4 (Informed Consent):** *Added* - The Supervision Contract shall include, but shall not be limited to the following items:
 - Definition of clinical supervision
 - Scope of practice of the clinical supervisor
 - Format and scheduling of supervision
 - Confidentiality of client information
 - Methods of supervision (approaches used)
 - Types (individual, group, in-person observation, e-supervision, audio and video tapes)
 - Expectations and responsibilities of each person
 - Accountability and evaluation
 - Documentation and file audits
 - Fees and no-show policies
 - Conflict resolution
 - Client notification – supervisee shall inform clients that they are in supervision and the parameters of supervision
 - Duration and termination of the supervisory relationship
 - All parties shall adhere to all applicable regulatory and state and Federal rules and laws
 - All parties shall adhere to NAADAC Code of Ethics
 - Expectations regarding liability insurance
 - Notification of expectation regarding a clinical emergency or duty to warn event with a client
 - Notification of expectation regarding a grievance, sanction, or lawsuit filed against the supervisee
 - **VII-13 (Assessment):** Clinical Supervisors shall take reasonable measures to ensure the proper use of assessment techniques by persons under their supervision.
 - **VII-17 (Disclosures):** *Added* - Supervisees shall only make disclosures to a client for the benefit of the client and their work, and disclosures shall not be made to benefit the supervisee.

- **VIII-11 (Violations with Harm):** Addiction professionals shall report unethical conduct or unprofessional modes of practice of which they become aware where the potential for harm exists, or actual harm has occurred, to the appropriate certifying or licensing authorities, state or federal regulatory bodies, and NAADAC. Providers shall obtain supervision/consultation prior to filing a complaint, and document recommendations and the decision regarding filing or not filing a complaint.

To download, read, and keep for ongoing reference the January 1, 2021 Revised NAADAC/NCC AP Code of Ethics can be found at <https://www.naadac.org/code-of-ethics>.



Mita M. Johnson, EdD, LPC, LMFT, LAC, MAC, SAP, CTHP-II, has been practicing in the world of mental health, marriage and family, and addictions counseling for the past 30 years. She earned her Doctorate in Counselor Education and Supervision degree and is a core faculty member in the School of Counseling program at Walden University. In addition, she has a thriving private practice where she provides clinical supervision, counseling services to our military, and addiction-specific training and education. She has been providing telebehavioral health services to individuals and groups for several years and is a board certified telehealth practitioner. She is involved in regulatory and credentialing activities in Colorado and regional workforce recruitment and retention initiatives. Her areas of specialization include pharmacology, co-occurring disorders, ethics, culturally-responsive care, and clinical supervision. She has been an active member of NAADAC for over 15 years, has served as the Ethics Chair, and began her term as NAADAC's President in October 2020.

U.S. DOT SAP TRAINING



A Live Virtual Experience | March 22 - 23, 2021

Become a U.S. Department of Transportation (DOT) Substance Abuse Professional (SAP) with NAADAC!

Join NAADAC for a live two-day virtual U.S. DOT SAP Qualification/Requalification Course on Monday, March 22 - Tuesday, March 23! **Earn 12 CEs!**



TRAINER

Mita M. Johnson, EdD, LPC, MAC, SAP, CTHP-II, NAADAC President

Why become an SAP?

- Generate additional income;
- Expand your private practice;
- Qualify for new employment opportunities through companies that have SAP staff positions; and
- Join an exclusive marketplace where only a limited amount of SAPs are available!

Learn more and register at www.naadac.org/sap.