



Code of Ethics

INTRODUCTION AND MISSION

The ethical code is designed to assist employees to better serve all residents of our community. It will help achieve the primary goals of NSR which are—rebuilding lives through structure, community, and self-worth.

NSR of Asheville was created in 2006 to address the needs of recovering people in Western North Carolina who needed a safe and supportive environment while embarking on their recovery journeys.

PREAMBLE

NSR of Asheville's primary obligation is to the recovery community in which it serves, defined as individuals that come to live in one of our recovery homes.

The basic objectives of the Code are to: (1) promote public welfare by specifying ethical behavior expected of Extended Care & Sober Living Homes; (2) establish principles that define ethical behavior and best practices of Extended Care & Sober Living Homes; (3) serve as an ethical guide designed to assist staff members and counselors in constructing a professional course of action that best serves those utilizing our services; and, (4) serve as a basis for the processing of alleged Code violations by certified and licensed counselors.

The primary values that serve as a foundation for this Code include a commitment to:

- Respecting human rights and dignity;
- Ensuring the integrity of all professional relationships;
- Acting to alleviate personal distress and suffering;
- Enhancing the quality of professional knowledge to increase professional knowledge and its application to increase personal effectiveness;
- Appreciating the diversity of human experiences and culture; and,
- Advocating for the fair and adequate provision of services.

These values inform principles. They represent an important way of expressing a general ethical commitment that becomes more precisely defined and action-oriented when expressed as a principle. The fundamental spirit of caring and respect with which the Code is written is based upon three basic principles of ethical behavior.

ETHICAL STANDARDS

I. ETHICAL STANDARDS FOR NSR OF ASHEVILLE EMPLOYEES/COUNSELORS

ES1-100 Avoiding Harm and Avoiding Value Imposition

All NSR of Asheville employees acknowledge that the first rule of professional ethical conduct is: *do no harm* to those served.

Avoiding Harm

1-101

NSR employees act to avoid harming clients, trainees, and supervisees and to minimize or to remedy unavoidable or unanticipated harm. Therefore, regardless of how we respond to and challenge harmful attitudes and actions, employees/counselors will express a loving care to any client, service-inquiring person, or anyone encountered in the course of practice, without regard to race, ethnicity, gender, sexual behavior or orientation, socio-economic status, education, denomination, belief system, values, or political affiliation.

1-102 No Harm or Exploitation Allowed

Prohibitively, then, employees/ counselors avoid every manner of harm, exploitation, and unjust discrimination in all client relations. Employees/ counselors are also aware of their psychosocial and spiritual influence and the inherent power imbalance of helping relationships—power dynamics that can harm others even without harmful intent.

1-103 Avoidance of Client Harm, Intended or Not

Employees/counselors strictly avoid all behavior or suggestion of practice that harms or reasonably could harm clients, client families, client social systems and representatives, students, trainees, supervisees, employees, colleagues, and third-party payors and authorizers.

1-104 Managing Client Conflicts

Employees/counselors acknowledge that client conflicts are unavoidable. In fact, conflict and resistance are often a central dynamic of the helping process. We will attempt to resolve all employees/counselor conflicts in the client's best interest. Employees/Counselors tempted to respond in harmful ways to clients shall seek out consultative and restorative help. If self-control is not accomplished—and client harm is not avoided—senior clinicians shall terminate counseling relations and make referral in the client's best interest.

1-105 Action Regarding Clients Harmed by Other Helpers

Employees/ counselors take proper action against the harmful behavior of other counselors and employees. We will act assertively to challenge or expose those who exploit others, and protect clients against harm wherever it is found, taking care to honor and support client decision-making regarding curative action against violators.

1-106 Sexual Misconduct

All forms of sexual misconduct in professional, or lay relationships are unethical. This includes every kind of sexual exploitation, deception, manipulation, abuse, harassment, relations where the sexual involvement is invited, and relations where informed consent presumably exists. Due to the inherent power imbalance of helping relationships.

Forbidden sexual activities and deceptions include, but are not limited to, direct sexual touch or contact; seductive sexual speech or non-verbal behavior; solicitation of sexual or romantic relations; erotic contact or behavior as a response to the sexual invitation or seductive behavior of clients; unnecessary questioning and/or excessive probing into the client's sexual history and practices; inappropriate counselor disclosures of client attractiveness, sexual opinions, or sexual humor; advocacy of the healing value of counselor-client sexual relations; secretive sexual communications and anonymous virtual interaction via the Internet or other electronic and informational means; sexual harassment by comments, touch, or promises/threats of special action; and sexual misconduct as defined by all applicable laws, ethics, organizational policies.

1-107 Sexual Relations with Former Clients Forbidden

All sexual relations as defined above with former clients are unethical. Furthermore, we do not terminate and refer clients, even at first contact, in order to pursue sexual or romantic relations.

ES1-200 Client Rights

1-210 Reasonable access to adequate and humane services

Regardless of your race, religion, sex, sexual orientation, ethnicity, age, handicap, or financial status. NSR of Asheville does not discriminate against residents on the basis of color, national origin or marital status. Provision of services within the least restrictive environment possible that preserve personal dignity.

1-211 Communication and information regarding stay

Attention that is considerate and respects your personal value/belief system, by an adequate number of competent staff. Freedom of censorship of mail or phone calls, unless therapeutically contraindicated.

1-212 Assurance of health and safety.

Emergency medical care will be accessed by using 9-11. NSR is not responsible for residents' medical bills if they are hurt or require medical attention while residing in one of our homes. All homes are equipped with naloxone in case of emergency. Naloxone will be available to all residents in case of emergency and not hidden from sight (easily accessible).

1-213 Expression of personal values, belief systems and cultural practices

Residents are open to expression of personal values, belief systems and cultural practices but these beliefs and practices may not harm others or interfere with the planned course of action.

1-214 Discharge Practices

If at any time client's desire to discharge, NSR requests all residents give at least a two weeks' notice to discuss the decision with staff so that appropriate procedures can be followed, and proper safe housing can be secured.

1-215 Complaints

Residents have the right to file a complaint or grievance with NSR of Asheville. Please see the Executive Director for a copy of the form to file with the facility.

ES1-300 Consent & Cultural Sensitivity

1-310 Securing Informed Consent

NSR of Asheville staff secure client consent for all counseling and related services. This includes the audio-taping of client sessions (when counselor training is taking place), the use of supervisory and consultative help, the application of special procedures and evaluations, and the communication of client data with other professionals and institutions.

1-320 Consent for the Structure and Process of Counseling

NSR counselors respect the need for informed consent regarding the structure and process of counseling. Early in counseling, counselor and client should discuss and agree upon these issues: the nature of and course of therapy; client issues and goals; potential problems and reasonable alternatives to counseling; counselor status and credentials; confidentiality and its limits; fees and financial procedures; limitations about time and access to the counselor, including directions in emergency situations; and procedures for resolution of disputes and misunderstandings. If the counselor is supervised, that fact shall be disclosed and the supervisor's name and role indicated to the client.

1-321 Developmental and Cultural Sensitivity

NSR employees/counselors communicate information in ways that are both developmentally and culturally appropriate.

1-322 Documentation of Consent

Employees/counselors will document client consent in writing by professional service contract or consent form.

ES1-400 Confidentiality, Privacy, and Privileged Communication

1-410 Maintaining Resident Confidentiality

Employees maintain resident confidentiality to the fullest extent allowed by law, professional ethics, and organizational rules. Confidential client communications include all verbal, written, telephonic, audio or videotaped, or electronic communications arising within the helping relationship. Apart from the exceptions below, employees/counselors shall not disclose confidential client communications without first discussing the intended disclosure and securing written consent from the client or client representative.

1-411 Discussing the Limits of Confidentiality and Privilege

Clients should be informed about both the counselor's commitment to confidentiality and its limits before engaging in counseling. Employees/counselors avoid stating or implying that confidentiality is guaranteed or absolute. We will discuss the limits of confidentiality and privacy with clients at the outset of admissions.

1-412 Asserting Confidentiality or Privilege Following Demands for Disclosure

Protecting confidential communications, including the assertion of privilege in the face of legal or court demands, shall be the first response of counselors to demands or requests for client communications and records.

1-413 Disclosure of Confidential Client Communications

Employees/ counselors disclose only that client information they have written permission from the resident to disclose or that which is required by legal or ethical mandates. The employee/counselor shall maintain confidentiality of client information outside the bounds of that narrowly required to fulfill the disclosure and shall limit disclosures only to those people having a direct professional interest in the case. In the face of a subpoena, counselors shall neither deny nor immediately comply with disclosure demands, but will assert privilege in order to give the client time to consult with a lawyer to direct disclosures.

1-414 Protecting Persons from Deadly Harm: The Rule of Mandatory Disclosure

Employees/ counselors accept the limits of confidentiality when human life is imperiled or abused. We will take appropriate action, including necessary disclosures of confidential information, to protect life in the face of client threats of suicide, homicide, and/or the abuse of children, elders, and dependent persons.

1-415 The Duty to Protect Others

The duty to take protective action is triggered when the employee/counselor (1) has reasonable suspicion, as stated in your state statute, that a minor child (under 18 years), elder person (65 years and older), or dependent adult (regardless of age) has been harmed by the client; or (2) has direct client admissions of serious and imminent suicidal threats; or (3) has direct client admissions of harmful acts or threatened action that is serious, imminent, and attainable against a clearly identified third person or group of persons.

1-416 Guidelines to Ethical Disclosure and Protective Action

Action to protect life shall be that which is reasonably necessary to stop or forestall deadly or harmful action in the present situation. This could involve hospitalizing the client, intensifying clinical intervention to the degree necessary to reasonably protect against harmful action, consultation and referral with other professionals, or disclosure of harm or threats to law enforcement, protective services, identifiable third-persons, and/or family members able to help with protective action.

1-417 Special Guidelines When Violence is Threatened Against Others

Action to protect third persons from client violence may involve or, in states that have a third-person protection (*Tarasoff*) duty, require disclosure of imminent harm to the intended victim, to their family or close friends, and to law enforcement. When child abuse or elder abuse or abuse of dependent adults exists, as defined by state law, employees/counselors shall report to child or elder protective services, or to any designated agency established for protective services. We shall also attempt to defuse the situation and/or take preventive action by whatever means are available and appropriate.

When residents threaten serious and imminent homicide or violence against an identifiable third-person, we shall inform appropriate law enforcement, and/or medical-crisis personnel, and the at-risk person or close family member of the threat, except when precluded by compelling circumstances or by state law.

1-418 Disclosures in Cases of Third-party Payment and Managed Care

NSR of Asheville does not accept third-party payment for Sober Living but does for Intensive Outpatient Services (IOP). We are cautious about demands for confidential client information that exceed the need for validation of services rendered or continued care. We do not disclose or submit session notes and details of client admissions solely on demand of third-party payors. We will narrowly disclose information that the client has given written authorization only after we have discussed and are assured that the client understands the full implications of authorizations signed or contemplated to sign.

1-419 Disclosures for Supervision, Consultation, Teaching, and Publication

Counselors under supervision will disclose who their supervisors are and explain their role in the helping profession. We will adequately disguise client identifiers by various means when presenting cases in group or in public forums. We will not presume that disguise alone is sufficient client protection, but will consider seeking client authorization when client identity is hard to conceal.

1-420 Maintaining Privacy and Preserving Written Records

NSR preserves, stores, and transfers written records of client communications in a way that protects client confidentiality and privacy rights. This requires, at minimum, keeping files in locked storage with access given only to those persons with a direct professional interest in the materials.

1-421 Maintaining Privacy in Electronic Databases

We take special precautions to protect client privacy rights with records stored and transferred by electronic means. This requires, at minimum, use of password entry into all electronic client files and/or coded files that do not use client names or easy identifiers. Client information transferred electronically—FAX, e-mail, or other computerized network transfer—shall be done only after the counselor determines that the process of transmission and reception of data is reasonably protected from interception and unauthorized disclosures.

ES1-500 Agency Rules & Procedures

1-510 Fees and Financial Relationship

NSR set fees for services that are fair and reasonable, according to the services contracted at the time of move-in. We avoid all deception, confusion, and misrepresentation about fees and in our financial relationships with clients and client systems. NSR does not accept any monetary kickbacks from any of its referrals. This practice is both unethical and illegal and is in direct violation of client rights.

1-511 Disclosure of Fees and Payment History

Fee schedules and rules for payment shall be outlined clearly for client review at the outset of move-in. We will provide clients or their representatives with a full and accurate account of previous and current charges upon request.

1-512 Scholarships

Whenever possible NSR will offer scholarships to those in need of services.

1-513 Avoiding Self-serving Financial Relations

NSR avoids financial practices that result or appear to result in greedy and self-serving outcomes. We do not select clients or prolong therapy based on their ability to pay high fees, nor do we quickly terminate counseling with low-fee clients. When making referrals, we do not divide fees with other professionals nor accept or give anything of value for making the referral. We do not exaggerate problems nor refer exclusively for specialized services to get clients into special programs or institutions in which we have a proprietary interest.

1-514 Records Maintenance and Ownership

Records of professional activities will be created, maintained, stored, and disposed of in accordance with the law and the ethical duties of the counselor, especially maintaining client confidentiality. Ordinarily, client records belong to the employing organization or to the therapist in a private or group practice. However, in view of the expanding right of client record access and the ethic of continuity of care, clients' records should follow the client as requested or implicated by providers.

1-515 Continuity of Care and Service Interruption

NSR maintains continuity of care for all residents. Care is taken to refer clients and network to provide emergency services when faced with relapse.

1-516 Ethical Termination of Residency

Discussion and action toward termination and/or referral is indicated when (1) resident goals have been achieved; (2) when the resident no longer wants or does not return to NSR; or (3) when the resident is no longer benefiting from NSR. NSR prepares residents with discussing discharge plans and further care if needed.

ES1-600 Ethical Relations in the Professional Workplace

1-610 Honorable Relations Between Professional and Community Colleagues

NSR respect's professional colleagues, both within and outside the community. We strive to understand and, wherever able, respect differing approaches to counseling and services. We strive to maintain collaborative and constructive relations with other professionals serving our client, in the client's best interest.

1-611 Solicitation of Clients Under Another's Care

NSR does not solicit residents nor do we knowingly offer professional services to those under the care of another mental health professional or treatment center, except with that provider's knowledge, or when someone is in crisis.

1-612 Maintaining Honor Toward Others When in Conflict

Any action to challenge or confront the wrongdoing of other service providers will be done with accuracy, humility, and protecting the dignity and reputation of others. Behavior that slanders, libels, or gossips about colleagues, or uncritically accepts these things from others about other service providers, will be strictly avoided.

1-613 Maintaining Honorable Professional and Employment Relations

Employees of NSR of Asheville create and preserve honorable relations in the professional workplace. We maintain the utmost honesty, respect, and integrity in all employment and collegial relations. We shall contract relations that balance the best interests of clients, colleagues, and our organization, and will honor all contractual obligations, even if it is costly for us to do so. We will avoid all actions and appearances of greed, fraud, manipulation, and self-serving action in all collegial and employment relations, and will disclose and discuss all reasonably foreseen problems to our colleagues before they enter into relations with us.

1-614 Toward Clear Role Boundaries and Work Definitions

All professional/employment relations should be mutually understood and described in sufficient detail by work agreement. Administrators and staff should reasonably understand (1) required work behavior, expectations, and limits; (2) lines of authority and responsibility; (3) bases for and boundaries of accountability; and (4) procedures for voicing and curing disagreements and substandard work performance.

1-615 Employers Avoid Discrimination and Promote Meritoriously

NSR hires, evaluates, and promote staff meritoriously—based on staff training, experience, credentials, competence, responsibility, integrity, and ethical excellence. We do not discriminate in hiring or promotion practices on the basis of age, race, ethnicity, gender, disability, medical status, socioeconomic status, or special relationship with employer or other staff.

1-616 Employees Serve with Integrity and Dedication

Employees serve with dedication, diligence, and honesty, maintaining high professional and ethical standards. We do not abuse our employment positions, nor presume excessive demands or rights against an employer.

II. ADVOCACY AND ACCESSIBILITY

ES2 – Advocacy and Accessibility

2-101 Attitudinal Barriers

In direct service with residents, NSR address attitudinal barriers, including stereotyping and discrimination toward individuals with disabilities.

2-102 Advocacy

NSR provides residents with appropriate information to facilitate their self-advocacy actions whenever possible. We work with residents to help them understand their rights and responsibilities, speak for themselves, make decisions, and contribute to society. When appropriate and with the consent of clients, we act as advocates on behalf of clients at the local, regional, and/or national levels.

2-103 Advocacy In Own Agency And With Cooperating Agencies

NSR advocates for residents that can't advocate for themselves to ensure effective service delivery.

2-104 Advocacy And Confidentiality

NSR obtains the consent of residents prior to engaging in advocacy efforts on behalf of specific, identifiable clients to improve the provision of services and to work toward removal of systemic barriers or obstacles that inhibit access, growth, and development of clients.

2-105 Areas Of Knowledge And Competency

NSR employees are knowledgeable about presenting substance use and mental health issues. Counselors obtain sufficient training in these systems in order to advocate effectively for clients/ and or to facilitate self- advocacy of clients in these areas.

2-106 Accessibility

NSR provides necessary accommodations, including physically and programmatically accessible facilities and services to all residents.

2-107 Referral Accessibility

Prior to acceptance to our program, we make sure the referrant is appropriate for our program. We do not accept applicants who are out of our professional scope or competency and we do not discriminate based on age, color, age, color, race, national origin, ethnicity, gender, gender identity, religion/spirituality, sexual orientation, marital status/partnership culture, disability, language preference, socioeconomic status, or any basis proscribed by law.

ES2 – Professional Responsibility

3-101 Professional Competence

NSR's staff and counselors practice only within boundaries of their competence, based on their education, training, supervised experience, professional credentials, and appropriate professional experience. NSR staff do not misrepresent their role or competence to residents.

3-102 Monitor Effectiveness

NSR staff continually monitor their effectiveness as professionals and take steps to improve when necessary. We take reasonable steps to seek peer supervision as needed to evaluate efficacy as supporters of all residents.

3-103 Continuing Education

NSR staff recognize the need for continuing education to acquire and maintain a reasonable level of awareness of current scientific and professional information in their fields of activity. We take steps to maintain competence in the skills we use, are open to new procedures, and keep current with the diverse populations and specific populations with whom we work.

III. STANDARDS & EXEMPTIONS FOR LAY HELPERS AND OTHER EMPLOYEES

ES3-100 Definitions and Roles of Lay Helpers

Lay helpers or non-credentialed staff have a significant role in NSR of Asheville's community. They are not professional clinicians, but may work as salaried staff or as volunteers in designated helping roles. These helpers often function in one-to-one helping roles and are increasingly involved in developing and leading our recovery community.

ES3-200 Rules of Ethics Code Application and Exemption

3-210 General Rule of Ethical Code Application and Exemption

Lay helpers shall honor the Code in its entirety, except for those code sections (1) not applicable due to their manifestly professional. Anyone claiming exemption to the Code has the burden of proving it, and the duty to draw that exemption as narrowly as possible, honoring all other Code requirements.

3-211 Lay Helping Under Supervision of a Licensed Professional

Lay helpers only counsel under the supervision of the Executive Director or Supervisor. Lay helpers seek out and secure supervision with professional clinicians. Independent, unsupervised, and solo practice by lay and unlicensed helpers and shall be avoided due to its excessive risk for legal, ethical, spiritual, interpersonal, and ecclesiastical trouble.

3- 212 Aiding and Abetting Unauthorized Practice.

Professional counselors do not aid and abet the practice of unlicensed, untrained, unqualified, or unethical counseling or lay helping by anyone. In counseling situations requiring help clearly beyond the scope, training, experience, or license required of the helper, supervising clinicians will require and assist appropriate consultation and/or referral.