

CAS CODE OF ETHICS AND CONDUCT



**American Academy
of Health Care Providers**
I N T H E
Addictive Disorders

CERTIFIED ADDICTION SPECIALIST (CAS)

Since Hippocrates wrote his oath more than 2000 years ago, health care providers have sought to establish standards for ethical and competent medical and psychological treatment. The American Academy itself was created to establish such a standard in the field of addiction treatment, which it succeeded in doing with the creation of the Certified Addiction Specialist (C.A.S.) credential.

The Academy's membership is comprised of clinicians from a variety of disciplines and treatment modalities who include nurses, physicians, psychologists, psychiatrists, social workers, forensic counselors and counselors, unified in their commitment to providing the highest quality of health care to individuals suffering from addiction. Our diverse membership is also unified in their recognition of the ethical standards and considerations that are specific to this field.

This code is meant to provide only a very general outline of the principles for those health care providers specifically treating the addictions and is **in no way** exhaustive of the ethical responsibilities of our membership. Since our members come from a variety of disciplines and may carry multiple credentials, the principles set forth here should not be viewed in any way as supervening or abrogating other ethical codes to which our members might be bound. On the contrary, the Academy's code is meant to supplement or compliment other standards, both legal and ethical, while setting forth a code of conduct that addresses the issues that are unique to working with individuals with addictions. This code is also meant to serve notice to the public as to the standards of health care and treatment that they can expect from Academy members.

Academy members are bound by the Academy's ethical code and will be held to the letter and spirit of this code. The membership of those violating this code will be subject to inquiry and review, resulting in possible suspension or revocation of the credential. By signing this Code of Ethics/Code of Conduct you agree to cooperate with any complaint and/or disciplinary investigation unless such disclosure of information would violate the confidentiality requirements of Subpart 2, Title 42, Code of Federal Regulations.

PRINCIPLES OF CONDUCT

I. Competence

Academy members must recognize both the strengths and limitations in their ability to treat addictions. They continually seek to stay abreast of innovations in the understanding and treatment of addiction. They also only treat addictions about which they are knowledgeable and capable of treating. As a corollary to this, they only offer treatment services which are within their realm of competence and said competence is determined on the basis of their education, clinical supervision, and experience.

II. Maintenance of Competence

Because of the continual changes in the field of addiction treatment, Academy members maintain awareness of research findings and changes in treatment techniques and approaches, which is necessary to maintain their competence in this field.

III. Nondiscrimination

In their work in the addictions, members of the Academy do not discriminate against their clients or co-workers on the basis of race, gender, religion, sexual orientation, age, disability, ethnicity, socio-economic status, or national origin. They also do not unfairly discriminate on the basis of addiction or the medical complications of addiction. While alcoholism and drug addiction are recognized by the federal government to be disabilities and individuals suffering from such addictions are protected from discrimination under the Federal Rehabilitation Act, Academy members do not restrict their nondiscrimination practices to these individuals, but extend them to all people suffering from addiction, recognizing that all such addictions are debilitating.

a) Academy members are knowledgeable about the unique or special issues that face the individuals that they are treating both on the basis of their individual situations and on the basis of the addiction from which they suffer.

b) Academy members are able to recognize instances in which individual differences between themselves and their client affect their ability to provide the highest quality health care. In such cases, Academy members take the necessary steps to become competent in these areas or they make referrals to agencies or individuals who can best address their client's needs.

c) Academy members recognize those personal issues and conflicts that might affect their ability to provide their clients with the best possible health care. In such instances, they will refer the patient to someone better able to deal with him/her, or will refrain from treating the patient until the Academy member has adequately resolved these issues.

d) Academy members recognize that there are individuals who suffer from multiple addictions. In such cases, Academy members will only treat the addictions that they are competent to treat. With regard to the other addictions, they will either take the steps necessary to become competent in these areas or will make referrals to agencies or individuals who can best address them.

e) Academy members recognize that many clients suffering from an addiction suffer from other mental disorders as well. Academy members treat only the problems that they are competent to treat. In complicated cases in which several disorders must be treated simultaneously, Academy members will seek the requisite support and consultation and, if this is not available, will refer the client to the appropriate agency or clinician.

f) Academy members recognize that many clients seeking treatment for addiction may also suffer from medical complications and/or viral infections, e.g., HIV, TB or hepatitis, that eventuate from their addiction. In such cases, Academy members will treat only the aspects of the illness that they are competent to treat. If they are not competent to work with such clients, they will either take the necessary steps to become competent, or they will consult with others and make referrals to the agencies or individuals that can best address the client's needs.

IV. Harassment

Academy members do not engage in any type of harassment, sexual or otherwise, in the work place.

a) The Academy considers sexual harassment to be any activity that demeans or creates a hostile environment for an individual through sexual behavior or language. This includes unwelcome or unwanted advances of a sexual nature, verbal and nonverbal behavior of a sexual nature that would be deemed inappropriate by a reasonable person, and soliciting sex within the context of one's professional responsibilities.

b) Academy members do not engage in any other forms of harassment in the work place. This includes verbal abuse, physical abuse, sexual harassment, threats, or any other activities that involve the exploitation or denigration of others, or, otherwise create a hostile work environment for others.

c) Academy members do not engage in sexual conduct with clients, their family members, or other persons who are significant to them.

V. Conflicts of Interest

Academy members are familiar and adhere to the laws concerning their responsibilities and they are able to anticipate those responsibilities that might potentially conflict with their role as health care provider. Members will not engage in social or business relationships for personal gain with clients, their family members, or other persons who are significant to them.

VI. Confidentiality

Academy members respect the patient-client confidentiality agreement. Because of the potential limitations on confidentiality (as suggested in Principle V), Academy members are careful to apprise their clients of the limits of confidentiality. All Academy members will protect client rights to confidentiality in accordance with Part 2, Title 42, Code of Federal Regulations. These regulations are available at ecfr.gpoaccess.gov/cgi/

VII. Clients Receiving Services Elsewhere

Individuals being treated for an addiction often receive health services from other sites. In considering whether to treat such individuals, Academy members consult these other services to determine whether the client is best served in this manner. Academy members also anticipate and attempt to resolve potential conflicts that might arise from this arrangement.

VIII. Making Referrals

In making referrals, Academy members consider the best possible placement for their clients. Such referrals are always based on the best interests of the client and **never** on the financial interests of the clinician. Academy members attempt to familiarize themselves with a particular treatment site before making a referral to that site.

IX. Assessment Tools

Academy members are careful to use current assessment tools which are compatible with contemporary theories of addiction.

X. Relapse

Academy members include relapse prevention as part of their treatment approach.

XI. Impaired Professionals

As a corollary to Principle I, Academy members who develop their own addiction difficulties will refrain from providing treatment until such time as they are able to provide competent treatment. Members are prohibited from providing counseling services, attending any program services or activities, or being present on program premises while under the influence of any amount of alcohol or illicit drugs (with the exception of the legitimate use of prescription drugs and over-the-counter drugs used in the dosage described in the packaging).

I agree to be bound by and to comply with the Code of Ethics and Conduct as set forth by the American Academy of Health Care Providers in the Addictive Disorders.

Signature

Name (printed)

Date: _____