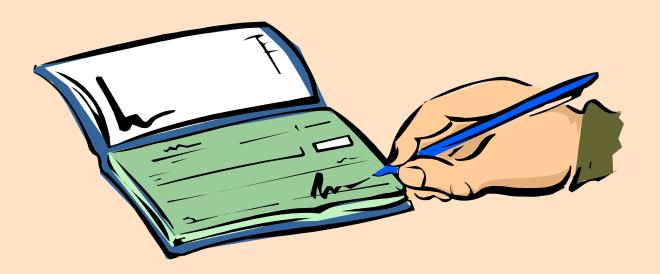
### ETHICS FOR REAL: CASE STUDIES APPLYING THE ASHA CODE OF ETHICS

Board of Ethics ASHA Conference November 2007

#### **Session Goals**

- Review basic ethical concepts.
- Identify common ethical inquiries to the ASHA national office.
- Provide strategies and resources for help with ethical challenges.
- Review the use of and purpose for a code of ethics.
- Introduce a model for ethical decision making.
- Apply this model to scenarios which highlight ethical dilemmas.
  - The School SLP and Medicaid
  - Lonesome Lee Ann/The Rural SLP
  - Jim the Absent SLP
  - Poor Charlotte

# Personal Story



So, is this an example of (an): ethical dilemma?

legal issue?

interpersonal/communication problem?



just one of those things that happens all the time?

#### **Ethics**

- Ethics is the branch of philosophy which involves the study of our actions, values and the rules of conduct by which we live.
- Describes actions not people.

(Scott, 1998)

"Ethics is NOT primarily concerned with getting people to do what they believe to be right, but rather with helping them to decide what is right."

Ethical dilemmas are a common and difficult part of the practice of speech-language pathology and audiology.

## Trends of Ethics Inquiries to ASHA National Office 2001-2006

## Approximately 3,000 ethics inquiries per year



## Most frequently recurring themes of ethics inquiries are dilemmas associated with:

"Employer demands"
Use and supervision of support personnel
Cultural competence
Reimbursement for services
Professional (vs.) business ethics, and
Clinical fellowship supervision

#### "Employer demands"

#### Pressure to:

- provide services without adequate training.
- increase caseload.
- adhere to treatment eligibility criteria or program placement recommendations which may be in conflict with the SLP's clinical judgment.
- use old or poorly maintained equipment/ technology.
- provide services which, in your clinical judgment, are not warranted.

#### Use & Supervision of support personnel

- Inappropriate delegation of responsibilities to support personnel.
- Inadequate documentation of supervision.
- Billing for services by unsupervised students/assistants.
- Inadequate supervision.

#### Reimbursement for services

- Misrepresenting information to obtain reimbursement.
- Billing for services provided by an SLP who is not certified and/or does not receive the necessary supervision.
- (Intentionally) misusing incorrect code numbers or diagnostic labels on billing forms for purpose of qualifying for payment.
- Billing for services not provided or not necessary.

#### Professional versus business ethics

- Solicitation of cases for private practice from your caseload.
- Acceptance of gifts or incentives from manufacturers or other individuals.
- Client abandonment and/or disruption of services.
- Failure to report unethical behavior.
- Misuse of professional credentials.

#### Clinical Fellowship supervision

- Inadequate or inappropriate supervision of clinical fellows.
- Inadequate time to meet supervisory responsibilities.
- Inadequate documentation of supervision and CF's performance.
- Failure to maintain one's own competence.
- Misuse of power over the CF.

#### Cultural competence

- Discrimination in:
  - provision of services, and/or
  - interaction with colleagues and students.
- Lack of competence in the selection, administration and interpretation of diagnostic and/or treatment materials or approaches.

Speech-language pathologists and audiologists are frequently confronted by these and other ethical issues.

#### Where to Look for Help



- **>** ASHA
- State licensure boards
- Colleagues
- **Second Second S**
- Unions

#### **Strategies**

- Advocate for best practices.
- Acquaint your supervisors, administrators, etc. with the Code of Ethics, Issues in Ethics Statements and potential for ethical conflicts.
- Review federal, state and local regulations and requirements
- Create an ethics committee or forum for discussing ethical issues.
- Present in-services on the importance of ethics in your work setting.
- Develop a library of ethics resources.
- Connect the Code of Ethics with your program's mission statement, policies & procedures and performance evaluations.
- Familiarize yourself with the Code of Ethics.

#### The use of and purpose for:

American Speech-Language-

**Hearing Association** 

Code of Ethics



## Professional Codes and guidelines are extremely important

- 1. Provide helpful guidance to members
- Establish and embrace the common, core values reflecting consensus among members.
- 3. Promote public trust by stating what is to be expected of professionals.
- 4. Promote high standards of practice.
- 5. Define acceptable/unacceptable conduct within the profession.

The ASHA Code (ASHA 2003) consists of four Principles of ethics which constitute the moral basis for the code.



Principle I – Responsibilities to persons served professionally.

Principle II – Responsibility for one's professional competence.

Principle III – Responsibility to the public.

Principle IV – Responsibilities involving inter-and intra-professional relationships.

## A code of ethics does not make a person ethical nor is it the mechanism by which we solve ethical problems.

(English, 2001)

- Most Codes are broadly written. It is sometimes difficult to apply general rules to specific cases.
- Ethical questions are complex and may not be completely addressed by a code of ethics.
- An ethical code may conflict with institutional policies and practices.
- We may be required to practice within a framework of numerous codes of conduct.

(Huffman 2003)

# Ethical decision-making involves a commitment to applying the ethics code to construct rather than simply to discover solutions to ethical quandaries.



(Chabon & Ulrich, 2006)



## The decision-making process begins with the question,

"Am I facing an ethical dilemma?"

If the situation is one in which personal and professional integrity are being challenged, the answer will likely be 'Yes.'

## Once it is established that an ethical dilemma exists, the questions addressed include:

"What possible courses of action are permissible, impermissible or necessary?"

and

"What are the effects (benefits and burdens) of each action?"

(Chabon & Morris, 2006)

Obligatory – must always be done, regardless of the circumstances

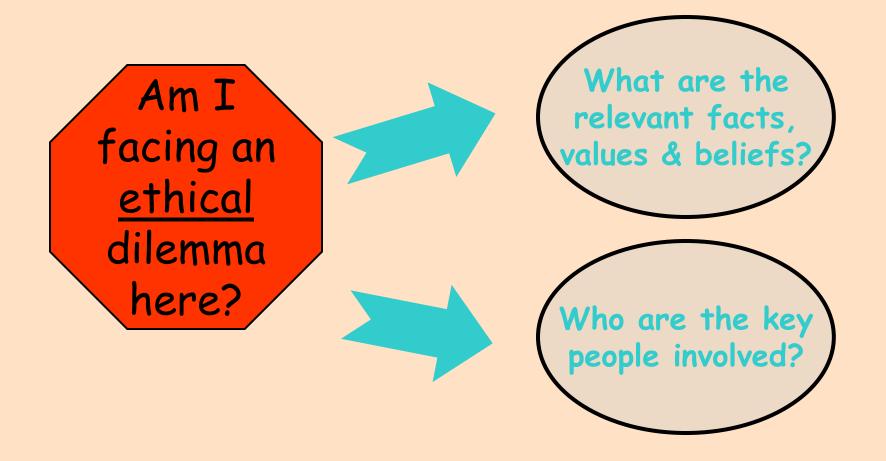
Impermissible – must never be done, under any circumstance

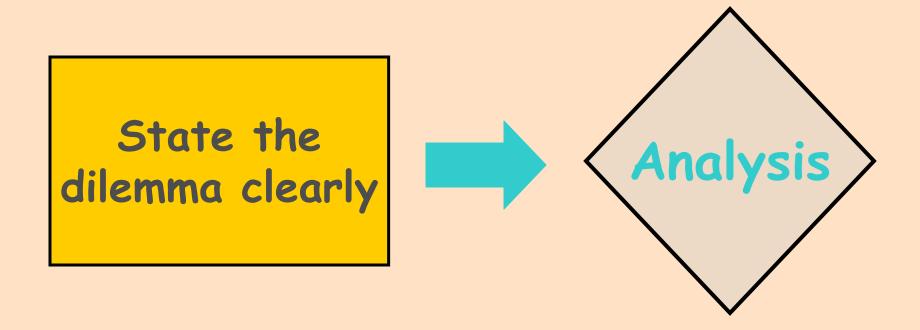
Permissible – can either be done or, not done – it is good either way

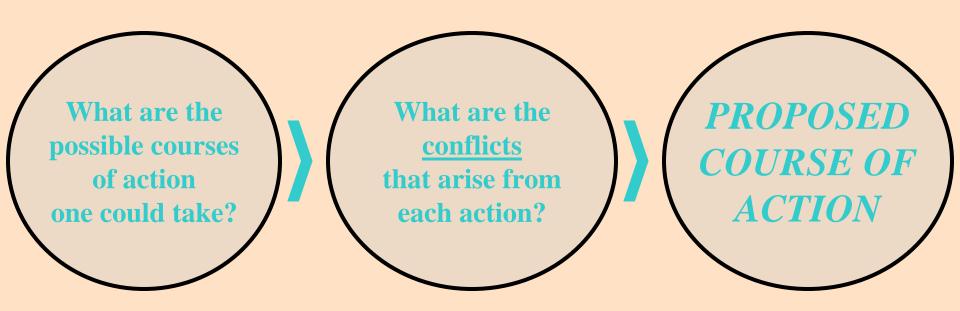
The final step in the process is to determine whether the proposed course of action leads to consensus. If consensus has been achieved, deliberation may be complete. If it has not been, the information which influenced the decision is re-assessed and other solutions or interpretations proposed.

The proposed course of action is examined in relation to personal interests, social roles and expectations and the ensuing obligations that accompany these roles.

A model that considers professional norms and ethical principles, as well as clients' and clinicians' cultural heritages and the influence of diverse values, can provide a framework to address ethical questions and lead to confident resolutions and good professional practices.







#### Evaluate:

- 1) Ethical Principles
- 2) Code of Ethics
- 3) Social Roles
- 4) Self-Interests



Does your proposed course of action lead to CONSENSUS?

If YES – then proceed ...

