

Ethics Interface

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The column is meant to be an educational forum for life care planners. It is not designed to offer an authoritative opinion from the editor or editorial board of the *Journal of Life Care Planning*, the board of the International Academy of Life Care Planners, or the board of its parent organization, the International Association of Rehabilitation Professionals, nor is it designed to represent or replace official opinions from the certifying body or other organizations associated with the practice of life care planning.

Dilemma

I am a life care planner. After a successful settlement, the retaining plaintiff attorney wanted me to issue him an additional bill for “file consultation services” because the settlement exceeded what he anticipated and he wanted to show his appreciation. Am I wrong to accept this type of “bonus?”

Response

It always feels good when your work is appreciated by the referring attorney. However, our ethical standards are clear on this issue: It is wrong to accept this bonus. While it is flattering to have your referral sources acknowledge your work, the gratitude needs to end with verbal or written appreciation, referrals to other attorneys and requests for work on new cases.

Relevant Organizational Standards

From the International Academy of Life Care Planning Standards of Practice (2009)

IV. Standards of Performance

A. Ethical

Ethics refers to a set of principles of “right” conduct, a theory or a system of moral values, or the rules or standards governing the conduct of a person or members of a profession. The primary goal of practice ethics is to protect clients, provide guidelines for practicing professionals, and to enhance the profession as a whole. Within the Life Care Planning industry all practitioners are members of one or more professional disciplines and/or are licensed or certified. It is expected that Life Care Planners follow appropriate relevant ethical guidelines within their areas of professional practice and expertise.

From the Commission on Health Care Certification (2007)

Principle 1—Professional and Legal Standards

ICHCC certificants shall behave in a legal, ethical, and professional manner in the conduct of their profession, maintaining the integrity of the Code of the Professional Ethics and avoiding any behavior that would cause harm to other entities and/or individuals.

Rules of Professional Conduct

R1.4 ICHCC certificants shall not engage in any acts or omission of a dishonest, deceitful, or fraudulent nature in the conduct of their professional activities.

Principle 2—Evaluatee and ICHCC Certificants Relationship

ICHCC Certificants shall respect the integrity and protect the welfare of people and groups with whom they work. The primary obligation of the certificant is to the evaluatee outside of independent medical examinations and independent review of plans in which no physician/patient relationship exists.

Rules of Professional Conduct

R2.4 ICHCC Certificants' primary obligation and responsibility is to the catastrophically or non-catastrophically disabled person for whom assessment, evaluation, medical and vocational and rehabilitation needs are being applied and/or determined.

Principle 5—Public Statements/Fees

ICHCC Certificants shall adhere to professional standards in establishing fees and promoting their services.

Rules of Professional Conduct

R5.1 ICHCC Certificants shall never give nor receive a commission or rebate or any other form of remuneration.

From the Commission for Case Manager Certification Code, Code of Professional Conduct

RPC 1.16—Solicitation

Certificants shall neither solicit nor accept commissions, rebates or any form of remuneration for the referral of clients for professional services or goods.

RPC 1.18—Fees

Certificants shall advise the payer of their fee structure in advance of rendering any services and shall also furnish, upon request, detailed, accurate records of professional activities.

From the CDMS Code of Professional Conduct (2010)

S 24—Fees

Certificants will advise their referral source/payer source of their fee structure in advance of the rendering of any services and will also furnish, upon request, detailed accurate time and expense records. No fee arrangements will be made that could compromise health care for the client.

S 26—Solicitation

Certificants will not reward, pay, or compensate any individual, company or entity for directing or referring clients to the Certificant. Nothing contained herein will preclude Certificants from making reasonable expenditures in entertaining individuals who have referred or may in the future refer clients to the Certificant or from giving gifts of minimal value to such individuals.

From the Commission on Rehabilitation Counselor Certification, *Code of Professional Ethics for Rehabilitation Counselors* (2010)

F.4. Forensic Business Practices, a. Payments And Outcome.

Rehabilitation counselors do not enter into financial commitments that may compromise the quality of their services or otherwise raise questions as to their credibility.

Rehabilitation counselors neither give nor receive commissions, rebates, contingency or referral fees, gifts, or any other form of remuneration when accepting cases or referring evaluatees for professional services. While liens should be avoided, they are sometimes standard practice in particular trial settings. Payment is never contingent on outcome or awards.

H.3. Roles And Relationships With Supervisees Or Trainees, f. Nonprofessional Relationships

Rehabilitation counselor supervisors or educators avoid nonprofessional or ongoing professional relationships with supervisees or trainees in which there is a risk of potential harm to supervisees or trainees or that may compromise the training experience or grades assigned. In addition, rehabilitation counselor supervisors or educators do not accept any form of professional services, fees, commissions, reimbursement, or remuneration from a site for supervisee or trainee placements.

Next Dilemma

I am developing a life care plan for a non-English speaking family. The law firm that hired me sent an interpreter to my evaluation. Much of my assessment is based on the responses of the evaluatee and his family that were then interpreted to me. I worry about accuracy when I have not heard something “first hand.”

A response to the above ethical dilemma will be published in the next issue of the *Journal of Life Care Planning*. The *Journal of Life Care Planning* welcomes the submission of real world ethical dilemmas. Submissions will be altered to promote confidentiality and be kept in strict confidence. Please send submissions via email to nancymitchellot@gmail.com.

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