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# Ethics Interface

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This column is the collaborative effort of Nancy Mitchell, Mary Barros-Bailey, Sherry Latham, Ann Neulicht, and Bobbi Dominick. The author is grateful for their editorial support, wisdom, and collective experience.

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 was hired to develop a life care plan by a defense attorney. When I arrived at the evaluee's home the plaintiff life care planner was present to monitor the evaluation. I had no previous knowledge this would occur. The opposing expert introduced me as "the enemy." Is this an ethical violation?

**Response**

While the plaintiff's introduction may have been an attempt to lighten the mood, it may have had unintended negative consequences for you and your work on the case. Even if it was meant in jest, the statement is not objective, and can be seen as harassing and disparaging because it characterizes you based on who hired you, not your work product. This is a violation of our ethical standards.

It is important to try to determine the intent in the moment. It may be important to have a private conversation with the other expert to clarify your roles and expectations. Inform your retaining attorney of the incident. An ethical complaint to the individual's certifying body may also be warranted. Should this happen again, it may be necessary to terminate the evaluation, then follow through with the retaining attorney and certifying body.

**Relevant Organizational Standards**

From the International Academy of Life Care Planning Standards of Practice (2015)

**III. STANDARDS OF PERFORMANCE**

2. STANDARD: The life care planner shall practice in an ethical manner and follow the Code of Ethics of his or her respective professions, roles, certifications and credentials.

MEASUREMENT CRITERIA:

a. Follows the Code of Ethics for his or her profession.

7. STANDARD: The life care planner seeks collaboration when possible.

MEASUREMENT CRITERIA:

a. Fosters positive relationships with all parties.

8. STANDARD: The life care planner facilitates understanding of the life care planning process.

MEASUREMENT CRITERIA:

b. Provides information about the life care planning process to involved parties to elicit cooperative participation.

From the International Commission on Health Care Certification (2015)

Principle 1 - Professional and Legal Standards

ICHCC Certificants shall behave in 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 which would cause harm to other entities and/or individuals.

Rules of Professional Conduct:

R 1.4 ICHCC Certificants shall not engage in any acts or omission of a dishonest, deceitful, or fraudulent nature in the conduct of their professional activities.

R 1.6 ICHCC Certificants shall not advocate, sanction, participate in, and cause to be accomplished, otherwise carry out through another, or condone any act, which the ICHCC Certificants are prohibited from performing by the Code of Professional Ethics.

Principle 2: Evaluee 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 evaluee outside of independent medical examinations and independent review of plans in which no physician/patient relationship exists.

Rules of Professional Conduct:

R2.3 ICHCC Certificants are obligated to clarify the nature of their relationship to all involved parties when providing services at the request of a third party. Similarly, and as expected, ICHCC Certificants have an obligation to provide unbiased, objective opinions regarding the evaluation results or care planning service regardless of referral source. ICHCC Certificants will clearly define through written or oral means, the limits of their relationship, particularly in the areas of informed consent and legally privileged communications to all involved individuals.

Principle 4

Professional Relationships

ICHCC Certificants shall act with integrity in their

relationships with colleagues, other organizations, agencies, institutions, referral sources and other professions as to facilitate the contributions of all specialists.

R4.5 ICHCC Certificants shall not discuss with evaluee and/or referral source reputations and/or competency of colleagues in a disparaging manner, nor will they provide judgments to the evaluees regarding quality and appropriateness of treatment they may have received from other professionals.

From the Commission for Case Manager Certification Code of Professional Conduct for Case Managers for Standards, Rules, Procedures, and Penalties (2015)

PRINCIPLES

Principle 4: Certificants will act with integrity in dealing with other professionals to facilitate their clients' achieving maximum benefits.

SCOPE OF PRACTICE FOR CASE MANAGERS

I. Underlying Values

Recognition of the dignity, worth and rights of all people.

Section 3 – Case Manager/Client Relationships

S 13 - Objectivity

Certificants will maintain objectivity in their professional relationships and will not impose their values on their clients.

From the CDMS Code of Professional Conduct (2015)

PRINCIPLES

Principle 4: Certificants will act with integrity in dealing with other professionals.

Principle 7: Certificants shall obey all laws and regulations, avoiding any contact or activity that could harm others.

Rules of Professional Conduct

Section 1: Relationship with all Parties

RPC 1.08: Certificants will maintain objectivity in their professional relationships and shall not impose their values on their clients.

RPC 1.09: Certificants shall be accurate, honest, unbiased, and timely in the reporting of their professional activities to appropriate third parties.

From the Commission on Rehabilitation Counselor Certification, Code of Professional Ethics for Rehabilitation Counselors (2017)

D.5. RESPONSIBILITY TO THE PUBLIC AND OTHER PROFESSIONALS

a. HARASSMENT. Rehabilitation counselors do not condone or participate in any form of harassment, including sexual harassment.

b. REPORTS TO THIRD PARTIES. Rehabilitation counselors are accurate, honest, and objective in reporting their professional activities and judgments to authorized third parties (e.g., courts, health insurance companies, recipients of evaluation reports).

g. VERACITY. Rehabilitation counselors do not engage in any act or omission of a dishonest, deceitful, or fraudulent nature in the conduct of their professional activities.

h. DISPARAGING REMARKS. Rehabilitation counselors do not disparage individuals or groups of individuals.

F.2. FORENSIC COMPETENCY AND CONDUCT

a. OBJECTIVITY. Forensic rehabilitation counselors are aware of the standards governing their roles in performing forensic services. Forensic rehabilitation counselors are aware of the occasionally competing demands placed upon them by these standards and the requirements of the legal system. They attempt to resolve these conflicts by making known their commitment to this Code and taking steps to resolve conflicts in a responsible manner.

h. REVIEW/CRITIQUE OF OPPOSING WORK PRODUCT. When evaluating or commenting upon the work or qualifications of other professionals involved in legal proceedings, forensic rehabilitation counselors seek to represent their differences of opinion in a professional and respectful tone and base their opinions on an objective examination of the data, theories, standards, and opinions of the other experts or professionals.

From the American Association of Nurse Life Care Planners- Code of Ethics 2015

ANA's Code of Ethics with Interpretive Statement affirms that all nurses have an ethical obligation to practice with integrity, competency and accountability. The AANLCP® Code of

Ethics and Conduct was created by a group of nurse life care planners as a guide to core values and obligations of nurse life care planning.

3. The nurse life care planner incorporates high standards of professional conduct through the continuum of then nurse life care planning services.

- The nurse life care planner demonstrates honesty, integrity, responsibility, accountability, timeliness and respect for human dignity.
- The nurse life care planner will not knowingly engage in unethical or unlawful activities nor will they knowingly misrepresent their background or credentials, or promote personal interests for personal gain.
- The nurse life care planner remains objective and does not impose individual values on others.

5. The nurse life care planner assumes responsibility and accountability for all actions, opinions, recommendations, and commitments.

- The nurse life care planner assumes accountability for his/her life care plan, as well as their actions, opinions and decisions.
- The nurse life care planner relies upon his/her specialized education, body of knowledge, level of

competence and experience when accepting and completing an assignment.

- The nurse life care planner's professional services are delivered in a competent, concise and timely manner.

6. The Nurse Life Care Planner provides professional services with objectivity.

- The nurse life care planner demonstrates critical thinking in decisions, recommendations and opinions.
- All functions of the nurse life care planner are void of personal opinion, prejudice and conflict of interest or any such other consideration that could interfere with or influence objectivity, performance or outcome.

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