

CHAPTER FOUR

Standard of Practice: Ethical and Legal

SECTION A: THE COUNSELING RELATIONSHIP

Rehabilitation counselors work in cooperation with their clients to promote client welfare and support them in developing and progressing toward their goals. Rehabilitation counselors understand that trust is the cornerstone of the counseling relationship, and they have the responsibility to respect and safeguard the client's right to privacy and confidentiality. Rehabilitation counselors respect the rights of clients to make their own decisions about matters that affect their own lives. Rehabilitation counselors make reasonable efforts to ensure clients are able to make informed choices about every aspect of the rehabilitation counseling process. Rehabilitation counselors actively attempt to understand the diverse cultural backgrounds of the clients they serve and do not discriminate in their provision of rehabilitation counseling services. Rehabilitation counselors also explore their own cultural identities and how these affect their values and beliefs.

A.1. WELFARE OF THOSE SERVED

- a. **PRIMARY RESPONSIBILITY.** The primary responsibility of rehabilitation counselors is to respect the dignity of clients and to promote their welfare.
- b. **REHABILITATION COUNSELING PLANS.** Rehabilitation counselors and clients work together to develop integrated, individual, mutually agreed-upon, written rehabilitation counseling plans that offer a reasonable promise of success and are consistent with the abilities and circumstances of clients.
- c. **EMPLOYMENT NEEDS.** Rehabilitation counselors work with clients to consider employment consistent with the overall abilities, functional capabilities and limitations, general temperament, interest and aptitude patterns, social skills, education, general qualifications, transferable skills, geographic locations, and other relevant characteristics and needs of clients.
- d. **AVOCATIONAL AND INDEPENDENT LIVING GOALS.** Rehabilitation counselors work with clients to develop a vocational and independent living goals consistent with their abilities, interests, culture, needs, and welfare.
- e. **AUTONOMY.** Rehabilitation counselors respect the rights of clients to make decisions on their own behalf in accordance with their cultural identity and beliefs.

A.2. RESPECTING DIVERSITY

- a. **RESPECTING CULTURE.** Rehabilitation counselors demonstrate respect for the cultural identity of clients in developing and implementing rehabilitation and treatment plans, and providing and adapting interventions.

b. **NONDISCRIMINATION.** Rehabilitation counselors do not condone or engage in the prejudicial treatment of an individual or group based on their actual or perceived membership in a particular group, class, or category.

A.3. CLIENT RIGHTS

a. **PROFESSIONAL DISCLOSURE STATEMENT.** Rehabilitation counselors review with clients, both orally and in writing, the rights and responsibilities of both the rehabilitation counselor and client.

b. **INFORMED CONSENT.** Rehabilitation counselors recognize that clients have the freedom to choose whether to enter into or remain in a professional relationship.

c. **INDIVIDUALIZED APPROACH TO COMMUNICATION.** Rehabilitation counselors communicate information in ways that are both developmentally and culturally appropriate.

d. **INABILITY TO GIVE CONSENT.** When counseling minors or persons who lack the capacity to give voluntary informed consent, rehabilitation counselors seek the assent of clients and include clients in decision-making as appropriate. Rehabilitation counselors recognize the need to balance the: (1) ethical rights of clients to make choices; (2) cognitive or legal capacity of clients to give consent or assent; and (3) legal rights and responsibilities of legal guardians, including parents who are legal guardians, or families (e.g., “next of kin” notification situations) to protect clients and make decisions on their behalf.

e. **SUPPORT NETWORK INVOLVEMENT.** Rehabilitation counselors recognize that support by others may be important to clients. When appropriate and with consent from clients, rehabilitation counselors enlist the support and involvement of others (e.g., religious/spiritual/community leaders, family members, friends, legal guardians).

A.4. AVOIDING VALUE IMPOSITION

Rehabilitation counselors are aware of and avoid imposing their own values, attitudes, beliefs, and behaviors. Rehabilitation counselors respect the diversity of clients and seek training in areas in which they are at risk of imposing their values onto clients, especially when the rehabilitation counselor’s values are inconsistent with the client’s goals or are discriminatory in nature.

A.5. ROLES AND RELATIONSHIPS WITH CLIENTS

a. **SEXUAL OR ROMANTIC RELATIONSHIPS ASSOCIATED WITH CURRENT CLIENTS**

b. **SEXUAL OR ROMANTIC RELATIONSHIPS ASSOCIATED WITH FORMER CLIENTS**

Rehabilitation counselors are prohibited from engaging in electronic and/or in-person sexual or romantic interactions or relationships with former clients, their romantic partners, or their immediate family members for a period of five years following the last professional contact.

Even after five years, rehabilitation counselors give careful consideration to the potential for sexual or romantic relationships to cause harm to former clients. In cases of potential exploitation and/or harm, rehabilitation counselors avoid entering into such interactions or relationships.

c. **SERVICE PROVISION WITH FRIENDS AND FAMILY MEMBERS.** Rehabilitation counselors are prohibited from engaging in the provision of rehabilitation counseling services with friends or family members with whom they may have an inability to remain objective.

d. **ACCEPTING GIFTS.** Rehabilitation counselors understand the challenges of accepting gifts from clients and recognize that in some cultures, small gifts are a token of respect and gratitude. When determining whether to accept gifts from clients, rehabilitation counselors take into account the cultural or community practice, therapeutic relationship, the monetary value of gifts, the client's motivation for giving gifts, and the motivation of the rehabilitation counselor for accepting or declining gifts.

A.6. TERMINATION AND REFERRAL

a. **COMPETENCE WITHIN TERMINATION AND REFERRAL.** If rehabilitation counselors determine they lack the competence to be of professional assistance to clients, they avoid entering or continuing professional relationships.

b. **APPROPRIATE TERMINATION AND REFERRAL.** Rehabilitation counselors terminate counseling relationships when it becomes reasonably apparent that clients no longer need assistance, are not likely to benefit, or are being harmed by continued services. Rehabilitation counselors may terminate services when in jeopardy of harm by clients or other persons with whom clients have a relationship. Rehabilitation counselors may terminate services: (1) if a client is determined no longer eligible for services; (2) when agreed-upon time limits are reached; or (3) when clients or funding sources do not pay agreed-upon fees or will not pay for further services.

c. **APPROPRIATE TRANSFER OF SERVICES.** When rehabilitation counselors transfer or refer clients to other practitioners, they make reasonable efforts to ensure that appropriate counseling, services, and administrative processes are completed in a timely manner and that appropriate information and records are communicated and/or transferred to the referral source to facilitate a smooth transition.

SECTION B: CONFIDENTIALITY, PRIVILEGED COMMUNICATION, AND PRIVACY

Rehabilitation counselors recognize that trust is the cornerstone of the counseling relationship. Rehabilitation counselors aspire to earn the trust of current and prospective clients by creating an

ongoing partnership, establishing and upholding appropriate boundaries, and maintaining confidentiality. Rehabilitation counselors communicate the legal and ethical parameters of confidentiality to their clients in a culturally competent manner.

B.1. RESPECTING CLIENT RIGHTS

a. RESPECT FOR PRIVACY

b. PERMISSION TO RECORD

c. PERMISSION TO OBSERVE

d. CULTURAL DIVERSITY CONSIDERATIONS. Rehabilitation counselors work to develop and maintain awareness of the cultural meanings of confidentiality and privacy.

e. RESPECT FOR CONFIDENTIALITY. Rehabilitation counselors do not share confidential information without consent from clients or without sound legal or ethical justification.

Rehabilitation counselors do not release confidential records without a signed authorization to release information, except allowed by law or required by court order.

f. CONFIDENTIAL SETTINGS. Rehabilitation counselors are attentive to the type of service they are providing and whether confidential information is typically discussed. If confidential information is likely to be discussed, rehabilitation counselors choose settings in which they can reasonably ensure the privacy of clients. Prior to providing services in community or other settings where confidentiality cannot be maintained, rehabilitation counselors discuss with clients the risk to maintaining confidentiality.

B.2. CASE CONSULTATION

a. DISCLOSURE OF CONFIDENTIAL INFORMATION. When consulting with colleagues, rehabilitation counselors do not disclose confidential information that reasonably could lead to the identification of clients or other persons or organizations with whom they have a confidential relationship, unless they have obtained the prior written consent of the persons or organizations or when the disclosure cannot be avoided. They disclose information only to the extent necessary to achieve the purpose of the consultation.

b. RESPECT FOR PRIVACY. Rehabilitation counselors share information in a consulting relationship for professional purposes only with persons directly involved with the case. Written and oral reports presented by rehabilitation counselors contain only data germane to the purpose of the consultation, and every effort is made to protect the identity of clients and to avoid undue invasion of privacy.

c. CONFIDENTIALITY IN CONSULTATION. Rehabilitation counselors seeking consultation obtain agreement among the parties involved concerning each individual's right to

confidentiality, the obligation of each individual to preserve confidential information, and the limits of confidentiality of information shared by others.

SECTION C: PROFESSIONAL RESPONSIBILITY

Rehabilitation counselors aspire to open, honest, and accurate communication in dealing with other professionals and the public. Rehabilitation counselors facilitate access to rehabilitation counseling services, practice in a nondiscriminatory manner within the boundaries of professional and personal competence, and have a responsibility to abide by the Code.

Rehabilitation counselors actively participate in professional associations and organizations that foster the development and improvement of the profession in order to improve the quality of life for individuals with disabilities. Rehabilitation counselors have a responsibility to the public to engage in practices that are based on accepted research methodologies and evidence-based practices. Rehabilitation counselors are encouraged to contribute to society by devoting a portion of their professional activity to services for which there is little or no financial return (pro bono publico). In addition, rehabilitation counselors engage in self-care activities to maintain and promote their own emotional, physical, mental, and spiritual well-being to best meet their professional responsibilities. They advocate for hiring practices that promote the hiring of certified rehabilitation counselors.

C.1. PROFESSIONAL COMPETENCE

a. **BOUNDARIES OF COMPETENCE.** Rehabilitation counselors practice only within the boundaries of their competence, based on their education, training, supervised experience, professional credentials, and appropriate professional experience. Rehabilitation counselors do not misrepresent their competence to clients or others.

b. **NEW SPECIALTY AREAS OF PRACTICE.** Rehabilitation counselors transitioning into specialty areas requiring new core competencies begin practicing only after having obtained appropriate consultation, education, training, and/or supervised experience. While developing skills in new specialty areas, rehabilitation counselors make reasonable efforts to ensure the competence of their work and to protect clients from possible harm.

c. **AVOIDING HARM.** Rehabilitation counselors act to avoid harming clients, students, employees, supervisees, and research participants and to minimize or to remedy unavoidable or unanticipated harm.

d. **MONITORING EFFECTIVENESS.** Rehabilitation counselors continually monitor their effectiveness as professionals and, when necessary, take steps to improve performance through supervision, consultation, peer supervision, or input from other sources.

e. **CONTINUING EDUCATION.** Rehabilitation counselors 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. They maintain their competence in the skills they use, are open to new procedures, and keep current with professional and community resources for diverse and specific populations with which they work.

C.2. CULTURAL COMPETENCE/DIVERSITY

a. **CULTURAL COMPETENCY.** Rehabilitation counselors develop and maintain knowledge, personal awareness, sensitivity, and skills and demonstrate a disposition reflective of a culturally competent rehabilitation counselor working with diverse client populations.

b. **INTERVENTIONS.** Rehabilitation counselors develop and adapt interventions and services to incorporate consideration of cultural perspectives of clients and recognition of barriers external to clients that may interfere with achieving effective rehabilitation outcomes.

c. **NONDISCRIMINATION.** Rehabilitation counselors do not condone or engage in the prejudicial treatment of an individual or group based on their actual or perceived membership in a particular group, class, or category.

C.3. PROFESSIONAL CREDENTIALS

a. **ACCURATE REPRESENTATION.** Rehabilitation counselors accurately represent the accreditations of their academic programs and accurately describe their continuing education and specialized training.

b. **CREDENTIALS.** Rehabilitation counselors claim only licenses or certifications that are current and in good standing.

c. **EDUCATIONAL DEGREES.** Rehabilitation counselors clearly differentiate between earned and honorary degrees.

C.4. SCIENTIFIC BASES FOR INTERVENTIONS

a. **ACCEPTABLE TECHNIQUES/PROCEDURES/MODALITIES.** Rehabilitation counselors use techniques/procedures/modalities that are grounded in theory and/or have an empirical or scientific foundation.

b. **HARMFUL PRACTICES.** Rehabilitation counselors do not use techniques/procedures/modalities when evidence suggests the likelihood of harm, even if such services are requested.

c. **CREDIBLE RESOURCES.** Rehabilitation counselors make reasonable efforts to ensure the resources used or accessed in rehabilitation counseling are credible and valid (e.g., Internet sites, mobile applications, books).