

ICAADA Member Code of Ethics

The ICAADA Member Code of Ethics outlines basic values and principles of ICAADA members, both regular and student membership practice. This Code serves as a guide for responsibility and ethical standards for ICAADA professionals.

ICAADA Member professionals have a responsibility provide effective, and ethical, services to person with substance use issues.

ICAADA Member professionals shall not perform services outside of the boundaries and scope of their expertise, shall be aware of the limits of their training and capabilities, and shall collaborate with other professionals to best meet the needs of the populations served. ICAADA Member professionals shall always preserve an objective and ethical relationship with the individual(s) served as part of the services they provide. This includes reporting any ethical misconduct to the respected person's credentialing/licensing body immediately. Any credential, or membership awarded, does not condone, endorse, suggest, or intent that a shall serve independently without appropriate supervision.

A. Professional Services

As a ICAADA Membership professional, I will:

1. Ensure the safety and welfare of the person served and keep the best interest of the person served as a priority of the relationship. This is done through treating the person with respect, dignity, compassion, and empathy.
2. Inform each person served about the services they will be provided and ensure they are provided with relevant documentation that is presented in a method and language they will comprehend. Provide explanation of said documentation, including their rights and responsibilities as a participant in said services.
3. Provide clear explanations of the relationship between myself and person served, including the limits of the relationship, confidentiality expectations and the limits of that confidentiality expectations.
4. Ensure the services provided are not discriminatory against any populations, or persons served, based upon ethnicity, race, color, religious or spiritual belief, gender identity, sexual orientation, mental or physical ability, or any other category that may separate them from my personal beliefs.
5. Charge each person served in accordance with agency policy and accurately charge based upon services rendered. This includes keeping accurate records of these services, including date and times of service delivery.

B. Professional Conduct

As an ICAADA Member professional, I will:

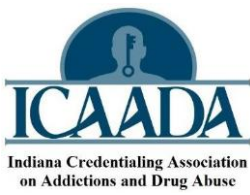
1. Accurately identify my qualifications, expertise, and certifications to all whom I serve and to the public.
2. Conduct myself in accordance with the ICAADA Member Code of Ethics.
3. Make public statements or comments that are true and reflect current and accurate information.

4. Not misuse any substances that may affect my ability and capacity to perform my duties as an ICAADA Member or ICAADA credentialed professional.
5. Recognize personal issues, behaviors, or conditions that may impact my performance as an ICAADA Member.
6. Respect and acknowledge the professional efforts and contributions of others and not declare or imply credit as my own. If involved in research, I shall give credit to those who contribute to the research.
7. Maintain required documentation for all consultative sessions, and client records, as required by the agency through which I am employed or the Federal requirements making certain that records are documented honestly and stored securely. Agency disposal of records policies shall be adhered to.
8. Protect the privacy and confidentiality of persons served in adherence with Federal Confidentiality, HIPAA laws, local jurisdiction and state laws and regulations. This includes electronic privacy standards (Social Media, Texting, Video Conferencing etc.)
9. Use client contact information in accordance with agency policy and applicable federal confidentiality laws, including HIPAA.
10. Ensure all services provided are within my scope of practice, educational qualifications, and competency and are evidence-based, person-centered and outcome driven.
11. Further my educational knowledge related to the person served and the practices of my profession. This includes, identifying areas of educational growth and completing education to improve those areas.
12. Report any personal, agency, or other professional ethical misconduct in accordance with agency policy and licensing/credentialing body protocol.
13. Not commit a criminal offense. I understand if I am charged for a criminal offense, the ICAADA Ethics Committee reserves the right, with full ICAADA board approval, to take immediate disciplinary action up to and including suspension of my credential. It is my duty to notify ICAADA immediately if I am charged with a criminal offense.

C. Conflict of Interest

As an ICAADA Member professional, I will:

1. Reveal any perceived conflict of interest immediately to any organization I represent and remove myself from the professional relationship as required.
2. Disclose any existing or pre-existing professional, social, or business relationships with person(s) supervised and/or populations served. I shall determine, in consultation with my organization, whether existing or pre-existing relationships interfere with my ability to provide supervision of peer recovery support professionals or services person(s) served.
3. Ensure that I am not romantically, sexually, or socially involved with person served, their close family and/or friends. I will immediately report any perceived boundary violations to my agency. In instances where I may have a current, or previous, relationship with a person who enters services at my agency, I will immediately disclose this to agency leadership.



4. Seek consultation when unsure of any current, previous, or perceived conflict of interest to the services provided.

If at any point I feel I am unable to meet any of these requirements, I will immediately cease performance as an ICAADA Member professional and seek professional assistance. Failure to abide by this code of ethics may result in disciplinary action, up to, and including, suspension or termination of my credential.

I hereby attest that I have read, understand, and will adhere to the ICAADA Member Code of Ethics, as described above; and including, a subsequent change to the code of ethics that is duly approved by the ICAADA Board of Directors at a regularly scheduled Board Meeting. It is my responsibility to remain current and comply with the code of ethics for this and other credentials awarded by ICAADA throughout the life of the credential.

Printed Name: _____

Signature: _____

Date: _____