

Prevention Code of Ethical Conduct

Preamble

Ethics are legal guidelines for professional behavior that are developed to protect the profession, the professional, and the client and society. The following principles have been adopted by MCBAP and are based upon the Substance Abuse and Mental Health Services Administration (SAMHSA) Prevention Think Tank and the International Certification & Reciprocity Consortium (IC&RC) Prevention Committee recommended Prevention Code of Ethical Conduct. The following principles express prevention specialists' recognition of responsibilities to the public, to service recipients, and to colleagues within and outside of the prevention field. They guide prevention specialists' in the performance of their professional responsibilities and express the basic tenets of ethical and professional conduct expected under the MCBAP credential.

Principles

Principle 1: Non-discrimination.

A prevention specialist shall not discriminate against service recipients or colleagues based on race, religion, national origin, sex, age, sexual orientation, gender identity, economic condition, disability (i.e. physical, mental, medical, etc.) marital status, political beliefs, or HIV/AIDS status.

- A. A prevention specialist should render services and provide information sensitive to cultural and individual differences.
- B. Prevention specialists shall comply with all local, state and Federal laws regarding the accommodation of individuals with disabilities.

Principle 2: Competency

Prevention specialists shall master their prevention specialty's body of knowledge and skill competencies, strive continually to improve personal proficiency and quality of service delivery, and discharge professional responsibility to the best of their ability. Competence includes a synthesis of education and experience combined with an understanding of culturally appropriate application.¹ The maintenance of competence requires continual learning and professional improvement throughout one's career.

- A. Prevention specialists shall be diligent in discharging responsibilities. Diligence imposes the responsibility to render services carefully and promptly, to be thorough, and to observe applicable technical and ethical standards.
- B. Due care requires a prevention specialist to plan and supervise adequately and evaluate to the extent possible any professional activity for which he or she is responsible.
- C. A prevention specialist shall must recognize their own limitations and boundaries of competency and encourage others to maintain the same standard when offering services. When asked to perform such services, a prevention specialist shall refer to an appropriately qualified professional.
- D. When a prevention specialist has knowledge of unethical conduct or practice on the part of an agency or prevention specialist, he or she shall report the conduct or practices to the appropriate bodies.
- E. A prevention specialist should recognize the effect of impairment on professional performance and shall be willing to seek appropriate professional assistance for any form of substance misuse, psychological impairment, emotional distress, or any other physical related adversity that interferes with their professional functioning.

¹ Incompetency includes, but is not limited to, a substantial lack of knowledge or ability to discharge professional obligations within the scope of the prevention profession, or a substantial deviation from the standards of skill ordinarily possessed and applied by professional peers acting in the same or similar circumstances.

Principle 3: Integrity.

Prevention specialists uphold the law and have high morals in both professional and personal conduct. To maintain and broaden public confidence, prevention specialists shall perform all responsibilities with the highest sense of truthfulness, decency, fairness, and good character. Personal gain or advantage shall not subordinate service and the public trust.

- A. All information shall be presented fairly and accurately. Each professional shall document and assign credit to all contributing sources used in published material or public statements.
- B. Prevention specialists shall not misrepresent either directly or by implication professional qualifications or affiliations.
- C. Where there is evidence of impairment in a colleague or a service recipient, a prevention specialist shall be supportive of assistance or treatment.
- D. Prevention specialists shall not be associated directly or indirectly with any service, products, individuals, and organizations in a way that is misleading.
- E. Prevention specialists shall demonstrate integrity through dutiful cooperation in the ethics process of their certifying authority.²
- F. Prevention specialists shall not engage in conduct which does not meet the generally accepted standards of practice for the prevention profession including, but not limited to, incompetence, negligence or malpractice.³
- G. Prevention specialists make fair financial arrangements for services with service recipients and third-party payers that are in advance, reasonable, and conform to accepted professional practices. Program advertisements/flyers shall identify if fees apply to the service.
- H. The use of copyrighted materials without first receiving author approval is against the law and in violation of professional ethics.

² Applicants for prevention certification are required to report any previous ethical violations from other disciplines or jurisdictions during the application process. The Ethics Committee is responsible for making a recommendation concerning the application. The applicant is responsible for providing any additional information needed to make a determination on the application. If a prevention specialist is cited for an ethical violation from another discipline or jurisdiction, they must immediately report the violation to their certifying authority. If a superior suggests or directs deviation from this Code, a prevention specialist should express the importance of maintaining adherence to the Code as certification depends on it. Grounds for discipline including failing to cooperate with an investigation by interfering with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representatives; by use of threats or harassment against any participant to prevent them from providing evidence in a disciplinary proceeding or any person to prevent or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed; failing to cooperate in an investigation in any respect.

³ Examples include acting in such a manner as to present a danger to public health or safety, or to any participant including, but not limited to, impaired behavior, incompetence, negligence or malpractice; Failing to comply with a term, condition or limitation on a certification or license; Suspension, revocation, probation or other restrictions on any professional certification or licensure imposed by any state or jurisdiction, unless such action has been satisfied and/or reversed; administering to oneself any controlled substance not prescribed by a doctor or aiding and abetting another person in this behavior; using alcohol, tobacco, and/or other drugs while providing professional services.

Principle 4: Nature of Services.

Practices shall do no harm to service recipients. Services provided by prevention specialists shall be respectful and non-exploitive

- A. Services shall be provided in a way which preserves the protective factors inherent in each culture and individual.
- B. When a dual relationship cannot be avoided, prevention specialists take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs. Examples of such dual relationships include, but are not limited to, business or close personal relationships with direct prevention recipients and/or their family members.
- C. Prevention specialists shall use formal and informal structures to receive and incorporate input from service recipients in the development, implementation and evaluation of prevention services.
- D. If not a mandated reporter, where there is suspicion of abuse of children or vulnerable adults, the prevention specialist shall report the evidence to the appropriate agency and follow up to ensure that appropriate action has been taken.
- E. Prevention specialists shall adhere to the same principles of professionalism outlined in the Prevention Code of Ethics online, e.g. social media, as they would offline.
- F. Prevention specialists shall be respectful of other’s privacy and before photographing, videotaping, audio recording, shall obtain written consent from participants and/or parents/guardians to maintain transparency.
- G. Verbal consent from a participant should be obtained prior to third-party observation.

Principle 5: Confidentiality.

Confidential information acquired during service delivery shall be safe guarded from disclosure, including – but not limited to – verbal disclosure, unsecured maintenance of records, or recording of an activity or presentation without appropriate releases. Prevention specialists are responsible for knowing and following the confidentiality regulations relevant to their prevention specialty.

Principle 6: Ethical Obligations for Community and Society.

Prevention specialists should be proactive on public policy and legislative issues. The public welfare and the individual’s right to services and personal wellness shall guide the efforts of prevention specialists to educate the general public and policy makers. Prevention specialists should adopt a personal and professional stance that promotes health.

I have read and understand the *Prevention Code of Ethical Conduct*. I will, to the best of my ability, adhere to and honor this Code in my professional and personal dealings.

Printed Name

Signature

Date