

## Phoenix Health Programs Code of Ethics

1. I shall give precedence to my professional responsibility over my personal interests and will uphold the dignity and honor of my profession.
2. I will adhere to and follow any laws and regulations that may affect my position and responsibilities at all times.
3. While employed with Phoenix Health Programs, I agree to abstain from using any non-medically prescribed medications and will abstain from using any and all illegal substances. I will serve as a responsible role model for clients, staff, and community.
4. I shall show respect for each client and colleague by maintaining an objective professional relationship at all times. I will not engage in any activity that results in exploitation of a client for personal gain, be it sexual, financial, or social.
5. I will not engage in sexual harassment. Sexual harassment is defined as sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with professional activities or roles, and that either is unwelcome, offensive, or creates a hostile workplace environment. Sexual harassment can consist of a single intense or severe act or multiple persistent or pervasive acts.
6. I shall make every effort to avoid dual relationships with clients that may include, but are not limited to: familial; social; financial; business; or other types of close personal relationships with clients. It is my responsibility to refer the client to another professional, if possible, when a dual relationship exists. When a dual relationship cannot be avoided, I will take appropriate professional precautions to ensure that my judgment is not impaired and no exploitation occurs. I do not accept superiors or subordinates with whom I have administrative, supervisory or evaluative relationships as clients.
7. I shall adhere to a strict policy of non-discrimination. I will deliver services to all clients regardless of race, creed, reproductive status, gender, disability, age, sexual orientation, religious/spiritual beliefs, or economic condition.
8. I will maintain all client information in strict confidentiality unless a client has signed a written consent to release information or I am required by law to release information.
9. I shall respect clients' basic human rights, including their right to make decisions, to participate in their own recovery plans, and to refuse any recovery services I may offer.
10. I shall be aware of my own skills and credential limitations. I will never attempt to provide services outside my area of expertise. I will recognize when it is in the best interest of the client to refer the client to another professional for services needed.
11. I shall accept responsibility for my continuing education and professional development.
12. I shall always show respect for other professionals who may be providing services to a client. I will use appropriate professional practices when expressing agreement or disagreement with another professional.
13. I shall not discuss my opinion of agency policy or management functions with clients.
14. I shall provide an appropriate setting for clinical work to ensure professionalism, and to provide a supportive environment for all clients searching for recovery.
15. I shall not denigrate other professions nor engage in any false or misleading communications about my own or other professionals' abilities, training/experience and ethical conduct.
16. I shall adhere to the Phoenix Health Program's Code of Ethics and the Code of Ethics of any credential or license which I may hold, and shall accept the responsibility to report in writing any violation of the Code of Ethics of these credentialing or licensing boards by any professional holding such credential or license, whether the MCB or the Missouri Division of Professional Registration, Committee for Professional Counselors, or Committee for Social Workers.
17. I shall not engage in personal fundraising of any kind without the prior approval of the Executive Director.
18. I will only bill for services that were provided according to contractual agreement with the payer.
19. I will fairly and accurately represent myself and my capabilities and Phoenix Health Programs and its capabilities to consumers and to the community.
20. I will not take personal responsibility for client's properties nor witness any documents not related to Phoenix Health Programs. Examples include but are not limited to business documents,

contracts, durable power of attorney, advance directives, or wills. Employees who are certified as Notary Publics may witness the aforementioned documents and/or agency contracts for clients, personnel, and other stakeholders in accordance with applicable state laws.

21. I will not use or allow the use of Phoenix Health Programs property or equipment for other than activities approved by the organization. Theft and destruction of property may be addressed through disciplinary action and/or by contacting law enforcement, as appropriate.

I HAVE READ AND WILL ABIDE BY THIS CODE.

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Date

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Signature