

CODE OF ETHICS

Montana Code of Ethical Conduct for Prevention Specialists

Adapted in part from the Prevention Think Tank Code of Ethical Conduct

Preamble

The Montana Prevention Certification Board (referred to herein as "the Board" or "MPCB") provides certification for prevention professionals in Montana to assure competence. MPCB is dedicated to the principle that individuals in the field of substance use disorder prevention and public health services must ensure their behavior meets the highest standards of ethical practice. Therefore, the MPCB adopted this Code of Ethical Conduct, to be applied to all professionals certified by or seeking certification by the Board.

The principles of ethics are models of exemplary professional behavior. These principles of the Montana Code of Ethical Conduct express prevention professionals' recognition of responsibilities to the public, service recipients, and colleagues within and outside of the prevention field. They guide prevention professionals in the performance of their professional responsibilities and express the basic tenets of ethical and professional conduct. The principles call for honorable behavior, even at the sacrifice of personal advantage. These principles should not be regarded as limitations or restrictions, but as standards toward which prevention professionals must constantly strive. Core values and competencies that have emerged with the development of the prevention field guide these principles.

The Board is committed to investigating and sanctioning those who breach this Code. Prevention professionals are, therefore, encouraged to thoroughly familiarize themselves with the Code and guide their behavior accordingly.

Principles

PRINCIPLE 1: NON-DISCRIMINATION

A prevention specialist shall not discriminate against service recipients or colleagues based on any of Montana's legally protected classes which are: age, marital status, disability, race/national origin, color, religion/creed, sex, familial status, political ideas, and vaccination status. A prevention specialist must broaden their understanding and acceptance of cultural and individual differences, and in so doing render services and provide information sensitive to those differences. Prevention specialists must comply with all local, state, and federal laws regarding the accommodation of individuals with disabilities and discrimination against other protected classes not identified above.

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 the cultures within which prevention application occurs. The maintenance of competence requires continual learning and professional improvement throughout one's career.

- A. Professionals must 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 professional to plan and supervise adequately and evaluate to the extent possible any professional activity for which they are responsible.
- C. Prevention professionals must recognize limitations and boundaries of their competence and not use techniques or offer services outside those boundaries, certification, and/or licensure. Prevention professionals are responsible for assessing the adequacy of their competence for the responsibility or task they might potentially assume. All efforts must be made to refer services outside the scope of a prevention specialist's competency to an appropriately qualified professional, a counselor, for example, when such services are requested or occur due to the nature of a presentation or event. In the absence of availability of that appropriate professional, the prevention specialist shall notify the requesting person/organization accordingly.
- D. Ideally prevention specialists should have access to competent senior prevention specialists and/or technical assistance. When this is not possible, prevention specialists should seek peer supervision or mentoring from other competent prevention specialists.
- E. When a prevention specialist has knowledge of unethical conduct or practice on the part of an agency, they have an ethical responsibility to report the conduct or practices to the appropriate chain of command which might include the employing agency, funding agency, regulatory or other appropriate bodies.
- F. When a prevention specialist has knowledge of unethical conduct or practice on the part of another prevention specialist, they have an ethical responsibility to report the occurrence to the MPCB Grievance/Ethics Committee.
- G. A prevention specialist must recognize the effect of the impairment on professional performance and must 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.

PRINCIPLE 3: INTEGRITY

To maintain and broaden public confidence, prevention specialists must perform all responsibilities with the highest sense of integrity. Personal gain and advantage must not

lessen service and the public trust. Integrity can accommodate the inadvertent error and the honest difference of opinion. It cannot accommodate deceit or subordination of principle.

- A. All information must be presented fairly and accurately. Each professional must document and assign credit to all contributing sources used in published material or public statements.
- B. Prevention specialists must 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 must be supportive of assistance or treatment.
- D. Prevention specialists must not be associated directly or indirectly with any service, products, individuals, and organizations in a way that is misleading.
- E. Prevention specialists must demonstrate integrity through dutiful and timely cooperation in all phases of the ethics process proceedings of the MPCB, their certifying authority.
 - 1. Prevention specialists must cooperate with the duly constituted MPCB Grievance/Ethics Committee and promptly supply necessary information unless constrained by the demands of confidentiality.
 - 2. Grounds for discipline include 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. Grounds for discipline also include but are not limited to; the use of threats or harassment against any participant to prevent them from providing evidence in a disciplinary proceeding or any other person to prevent or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed; and/or failing to cooperate with a board investigation in any material respect.
 - 3. Applicants for prevention certification are required to report any previous ethical violations from other disciplines or jurisdictions during the application process. The MPCB Grievance/Ethics Committee is responsible for making a recommendation concerning the application. The applicant is responsible for providing any additional information needed to determine the application.
 - 4. 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.
 - 5. As employees or members of organizations, prevention specialists shall refuse to participate in an employer's practices that are inconsistent with the ethical standards enumerated in this Code.
- F. Prevention specialists shall not engage in conduct that does not meet the generally accepted standards of practice for the prevention profession including but not limited to, incompetence, negligence, or malpractice.

1. Falsifying, amending, or making incorrect essential entries or failing to make essential entries of services provided.
2. Acting in such a manner as to present a danger to public health or safety, or any participant including, but not limited to, impaired behavior, incompetence, negligence, or malpractice, such as:
 - a. Failing to comply with a term, condition, or limitation on a certification or license.
 - b. 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.
 - c. Administering to oneself any controlled substance not prescribed by a doctor or aiding and abetting another person in the use of any controlled substance not prescribed to that person.
 - d. Using any drug or alcoholic beverage to the extent or in such manner as to be dangerous or injurious to self or others, or to the extent that such use impairs the ability of such person to safely provide professional services.
- G. Prevention specialists shall make financial arrangements for services with service recipients and third-party payers that are reasonably understandable and conform to accepted professional practices. Prevention specialists:
 1. Do not receive commissions, rebates, or other forms of dual reimbursement for training, travel, program participation, etc.
 2. Do not enter into personal financial arrangements with direct program recipients.
 3. Represent facts truthfully to participants and funders.
 4. Do not personally accept a private fee or any other gift or gratuity for professional work.
- H. Prevention specialists uphold the law and have high morals in both professional and personal conduct. Grounds for discipline include, but are not limited to, the conviction of any felony or misdemeanor during the period in which a prevention specialist holds a prevention certification, excluding minor traffic offenses, whether or not the case is pending an appeal.

PRINCIPLE 4: NATURE OF SERVICES

Practices shall not harm service recipients. Services provided by prevention specialists shall be respectful and non-exploitative and in keeping with health equity guiding principles (diversity, equity, inclusion, and cultural competency).

- A. Services must be provided in a way that preserves the protective factors inherent in each culture and individual.
- B. Prevention specialists must use formal and informal structures to receive and incorporate input from service recipients in the development, implementation, and evaluation of prevention services.

- C. Where there is suspicion of abuse or neglect of children or vulnerable adults, the prevention specialist shall report the evidence to the appropriate agency.
- D. Prevention specialists must adhere to the same principles of professionalism outlined in the Prevention Code of Ethics online as they would offline. With this in mind, the following are additional guidelines regarding the use of technology:
 - 1. Prevention specialists must be aware that any information they post on a social networking site may be disseminated (whether intended or not) to a larger audience, and that what they say may be taken out of context or remain publicly available online in perpetuity. When posting content online, they must always remember that they are representing the prevention field, their organization, and their community, and must always act professionally and take caution not to post information that is ambiguous or that could be misconstrued or taken out of context. Prevention specialists who generate and spread erroneous health misinformation or disinformation contrary to the United States Department of Health and Human Services guidelines are risking disciplinary action by MPCB, including the suspension or revocation of their CPS credential. Due to their specialized knowledge and training, prevention specialists possess a certain degree of public trust and therefore have a significant platform in society, whether they recognize it or not. They also have an ethical and professional responsibility to practice prevention in the best interests of the community and must share information that is factual, scientifically grounded and consensus-driven for the betterment of public health. It is recommended that employees not identify themselves as connected to their agency on their personal social media sites and must follow any policy or rule their employer has regarding such identification.
 - 2. Prevention specialists must refer, as appropriate, to an employer's social media or social networking policy for direction on the proper use of social media and social networking about their employment.
- E. Prevention Specialists must be aware of their influential position concerning direct program recipients and avoid exploiting the trust and dependency of such persons. Prevention specialists, therefore, make every effort to avoid dual relationships with prevention participants that could impair professional judgment or increase the risk of exploitation.
 - 1. Soliciting and/or engaging in sexual conduct with direct prevention participants are prohibited.
 - 2. When no other course of action is possible other than assuming a dual role, prevention specialists must not compromise the relationship with or confidentiality of participants.
 - 3. Prevention specialists shall avoid bringing personal issues into the professional relationship. Through an awareness of the impact of stereotyping and

discrimination, the prevention specialist guards the individual rights and personal dignity of participants.

- F. Prevention specialists make reasonable arrangements for the continuation of prevention services when transitioning to a new position or no longer able to provide that service.
- G. Prevention specialists must obtain written, informed consent from participants and/or parents/guardians for those under the age of 18 before photographing, videotaping, audio recording, or permitting third-party observations.

PRINCIPLE 5: CONFIDENTIALITY

Confidential information acquired during service delivery shall be safeguarded 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 confidentiality regulations relevant to their prevention specialty.

PRINCIPLE 6: ETHICAL OBLIGATIONS FOR COMMUNITY AND SOCIETY

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

Prevention Specialists shall be aware of their local and national regulations regarding lobbying and advocacy, and act within the laws and funding guidelines.

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.

Date

Signature

Printed name: _____

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GRIEVANCE PROCEDURES & ETHICAL VIOLATIONS

MPCB and its Grievance/Ethics Committee take potential violations of the Code of Ethics very seriously. The process for reporting a potential ethical violation is explained below. Please contact the Certification Program Manager Emily.Weiler@mso.umt.edu if you have questions or need to report a potential ethical violation.

Violations of the Code of Ethics

All Montana Prevention Specialists must adhere to the Prevention Code of Ethics. The MPCB Grievance/Ethics Committee (the “Committee”) has the authority to investigate any potential violation. If an applicant or certified prevention specialist is found to have violated any part of the Code of Ethical conduct, the violation will be brought to the attention of the Grievance/Ethics Committee Chairperson, who will notify the Board of Directors. The Grievance/Ethics Committee will consider all ethics violations on a case-by-case basis, with additional input from the applicant in question. The Committee is responsible for determining whether an ethical violation has occurred and issuance of any sanctions.

MPCB recognizes the validity of any ethics violation consequences determined by prevention certification boards from other IC&RC board jurisdictions. By signing the MPCB Code of Ethics, applicants attest to their duty in reporting any violations from any other certifying authority (*Code of Ethics Principle 3: Integrity, Section E, Subsections 3 & 4*).

Grievance Process

The process for investigating a complaint is as follows:

1. Anybody may submit a signed, written complaint (“Complaint”) to the Certification Program Manager or MPCB Grievance/Ethics Committee Chairperson. All supporting documentation and information regarding the specific breach of the Code of Ethics should be submitted with the Complaint.
2. Anonymous complaints are highly discouraged by the MPCB Grievance/Ethics Committee but in limited extenuating circumstances, the Committee may take jurisdiction over an anonymous complaint.
3. The Certification Manager or MPCB Grievance/Ethics Committee Chairperson will submit the Complaint to the Committee.
4. The Committee will determine whether they will take jurisdiction of the Complaint and whether an investigation is warranted.
5. If the Committee determines that the Complaint, taken as true, does not allege a violation of the Code of Ethical Conduct for Prevention Specialists, the matter will be dismissed.

6. If the Committee takes jurisdiction of the Complaint, the Respondent will be notified via writing of the Complaint. The Respondent will receive a copy of the Complaint and any supporting documentation submitted with the Complaint with the notification.
7. The Respondent will be afforded thirty (30) calendar days to provide a written response (“Response”) to the Complaint.
8. The Committee will determine their next course of action based on the Respondent’s submission (or lack thereof).
9. At its discretion, the Committee may appoint a board member to serve as a neutral investigator (“Investigator”) to investigate the Complaint. The Investigator may conduct interviews of witnesses (including the Complainant). After completing their investigation, the Investigator will create an Investigative Report, which outlines the investigative steps taken by the Investigator and has their written findings of fact. The Investigative Report will be submitted to the MPCB and the Respondent.
 - A. Recordings of interviews are not permitted.
10. The Respondent, having an ethical obligation to comply with and participate in MPCB ethics investigations (See *Code of Ethics Principle 3: Integrity, Section E*) must participate meaningfully in investigations, which may include submission to a formal interview if the investigator so requests. Failure to participate in the investigation may be considered a separate violation of the Code of Ethical Conduct for Prevention Specialists.
11. The Committee will not draw an inference about responsibility based solely on a Respondent’s refusal to participate meaningfully in an investigation.
12. The Complaint, Response, documentary evidence, and Investigative Report will be submitted to the Committee for decision on whether an ethics violation was committed. Within thirty (30) calendar days, the Committee will issue a written decision on the matter.
13. If the Committee determines that the Respondent has violated the Code of Ethics or standard of practice, the MPCB Grievance/Ethics Committee may issue sanctions against the Respondent. Sanctions may include:
 - Suspension of an application or certification for up to two years.
 - Permanent revocation of the application or certification.
 - Other sanctions deemed appropriate by the Committee which could include, but are not limited to, private reprimands, public censures, or required trainings.
 - The Respondent will be notified of the MPCB Grievance/Ethics Committee’s decision within ten (10) business days of their decision.

APPEALS PROCESS

The Respondent has the right to appeal the MPCB Grievance/Ethics Committee’s decision. MPCB will provide Respondents with an opportunity to appeal any disciplinary decision and request a formal review of their case if they are dissatisfied with the MPCB Grievance/Ethics Committee’s decision only for the reasons stated below. The MPCB Grievance/Ethics

Committee Chairperson shall maintain documentation of grievances and appeals. Respondent may appeal the decision on the following basis only:

1. errors in the procedural process which affected the outcome;
2. conflict of interest or bias by Committee members or the Investigator that affected the outcome in the matter;
3. the veracity of witnesses; and
4. new evidence that was not reasonably available when the Committee's decision was made and which would affect the outcome in the matter.

To appeal the decision, the Respondent must submit a written notice of appeal to the MPCB Executive Committee (EC) within twenty-one (21) business days of receiving notification of the MPCB Grievance/Ethics Committee's decision. The written appeal shall clearly indicate the Respondent's intent to appeal, reasons for the appeal, and additional information the Respondent believes to be relevant to the case.

A Respondent may also request a hearing on appeal. In order to request a hearing, the Respondent must explain why a hearing is needed, identify the issues to be resolved at a hearing, list names of prospective witnesses, and identify documentation and other evidence to be introduced at the hearing before the Board.

The EC shall consider an appeal following the receipt of the written notice of appeal. Executive Committee meetings are held at the discretion of the president and fall under the category of "Special Meetings" in the Bylaws. At its discretion, the EC may schedule an appeal hearing before the review of a written appeal. The EC has sole discretion to determine what witnesses, if any, may be presented at the hearing. The EC's review of an appeal shall be the final decision regarding sanctions.

VOLUNTARY RESOLUTION PROCESS

At the discretion of the MPCB Grievance/Ethics Committee, the Voluntary Resolution Process is available to resolve a Complaint.

At any point during the Grievance and Appeals process, the MPCB Grievance/Ethics Committee, through an appointed member of the MPCB Grievance/Ethics Committee ("Voluntary Resolution Officer"), may reach out to the Respondent to determine if they would like to utilize the Voluntary Resolution Process. The Voluntary Resolution Process is facilitated by the Voluntary Resolution Officer.

If the Respondent agrees, the Respondent and the Voluntary Resolution Officer will engage in confidential discussions regarding the Complaint and how to best resolve the Complaint. While the Voluntary Resolution Process is underway, the Grievance and/or Appeals Process will be held in abeyance.

If agreement on resolution of the Complaint is reached, the Respondent and Voluntary Resolution Officer will sign a Voluntary Resolution Agreement, which dismisses the Complaint. The Voluntary Resolution Officer has the full authority of MPCB Grievance/Ethics Committee to sign a Voluntary Resolution Agreement on behalf of the MPCB Grievance/Ethics Committee. The MPCB Grievance/Ethics Committee will monitor compliance with the Voluntary Resolution Agreement.

At any time prior to signing a Voluntary Resolution Agreement, the Voluntary Resolution Officer may terminate the Voluntary Resolution Process and resume the Grievance and/or Appeals Process. If the Voluntary Resolution Process terminates without a signed Voluntary Resolution Agreement, the Respondent will be notified of the next steps of the Grievance and/or Appeals process, including, when applicable, any revised upcoming dates or deadlines.

The Voluntary Resolution Officer will not participate in any decisions of the MPCB Grievance/Ethics Committee regarding Complaints which the Voluntary Resolution Officer facilitated through the Voluntary Resolution Process.