

Transparency for today's talk

I work for UCEBT as Clinical Director. No known COIs

An hour talk is an overview and insufficient for reaching competency.

This is educational. I'm not providing legal or ethical advice on specific cases (this is not a substitute for obtaining consultation).

I'm a psychologist and most familiar with these codes.

This webinar will be recorded and available online. Contact annive reaphane websers with any tech problems that arise.

Consider closing your email and minimizing alerts.

Learning objectives

01

Understand common therapist processes that interfere with ethical decision making in trauma tx 02

Increase awareness of modern ethical tensions in trauma treatment.

03

Begin to develop an individualized toolkit for support

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An Exercise

When I worry about getting in trouble (fear a negative outcome), I...

- Eat more chips and cookies
- Feel an urge to add to my case notes or call the client and talk to them NOW
- Call consultants and seek reassurance that my decisions were the RIGHT ones
- Feel fear, guilt, and consider backup career options.

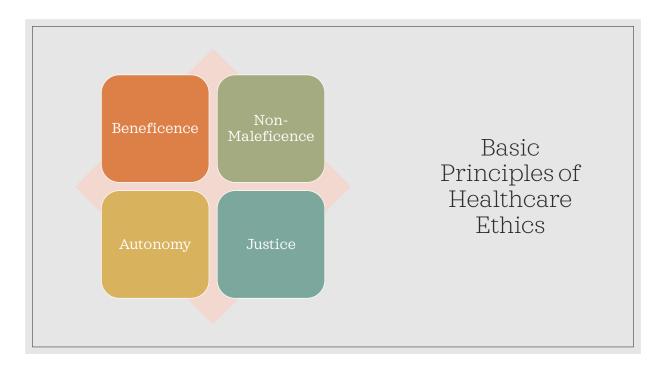
- When I feel competent and effective as a therapist, I...
- Know that few things are an actual emergency
- Understand that I am not responsible to guarantee an outcome but rather meet a standard of care using the info I have at the time
- Remain open to consult feedback and willing to change my plan

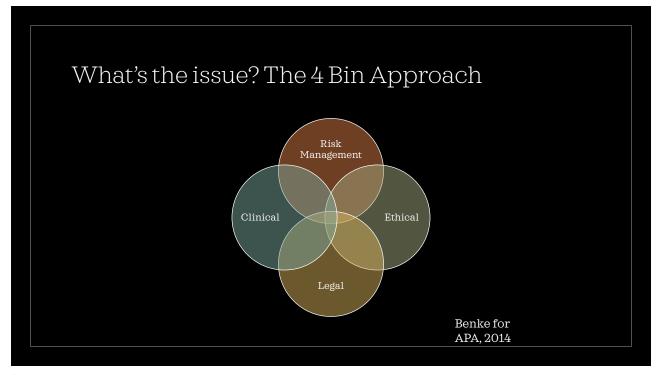
Problematic ethical choices often stem from...

- **Fear** => Centered with perspective taking
- **Ignorance** => Acknowledge uncertainty and know where to access guidance
- Exhaustion => Increased commitment to equipping yourself with the necessary resources
- Rarely, blatant disregard/malice => Remediation/Career change

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Malpractice is a lens...



First, the provider breaches a duty that is owed to his client/patient (Standard of Care).



Second, the breach must cause



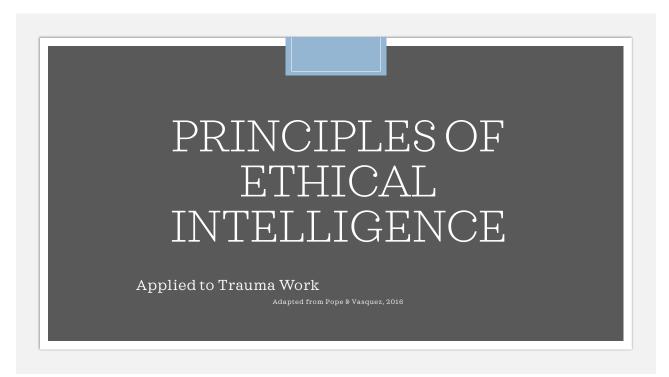
Third, there must be damages that arise as a result of the harm caused by the breach.

Source: Medicalmalpractice.com

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Some reasons that trauma tx is complex

- That new, breakthrough thing
 - MDMA, Ketamine, Brainspotting, Accelerated Resolution Therapy, Emotion Freedom Techniques
- $\circ\,$ Technology: Social media, tele trauma processing
- Increased risk of deterioration (suicide risk, dissociation, self-harm, revictimization)
- · Poverty, discrimination, adversity
- Body-based work/scope of practice
- · Client ambivalence and avoidance
- Relational and attachment problems are the norm
- o Sudden onset: COVID-19 and Psych First Aid



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- 1) Ethical intelligence is an <u>active process</u> of continuous awareness that involves constant questioning and personal responsibility.
- · Case Examples
 - · MAPS
 - EMDR via telepsych
 - Beneficence --- Non-Maleficence



2) Awareness of ethics codes is crucial, but cannot take the place of an active, thoughtful, **creative** approach to our ethical responsibilities.

Dimensions for Ethical Decision-Making in Dual Relationships (Gottlieb, 1986)

Low Power	Mid-Range Power	High Power
Little or no personal relationship or Persons consider each other peers (may include elements of influence).	Clear power differential present but relationship is circumscribed.	
Brief Duration	Intermediate Duration	Long Duration
Single or few contacts over short period of time.	Regular contact over a limited period of time.	Continuous or episodic contactor over a long period of time.
Specific Termination	Uncertain Termination	Indefinite Termination
Relationship is limited by time externally imposed or by prior agreement of parties who are unlikely to see each other again.	completed but further contact is	No agreement regarding when or if termination is to take place.

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3) Awareness of laws is crucial, but <u>legal</u> standards should not be confused with ethical responsibilities.

Common Legal Issues

- Billing
- Practice across jurisdictions
 - Telepsych, supervision, mandated reporting
- Amending/omitting records
- Domestic violence treatment and reporting

Domestic Violence Example

4) The overwhelming majority of therapists are conscientious, dedicated, caring individuals, committed to ethical behavior. <u>But none of us are infallible.</u>

E.g. Google Review

Sustainability and burnout:

- "I don't know how I got here."
- · Being compassionate to your future self

Reporting Impaired Providers

• Remediation process

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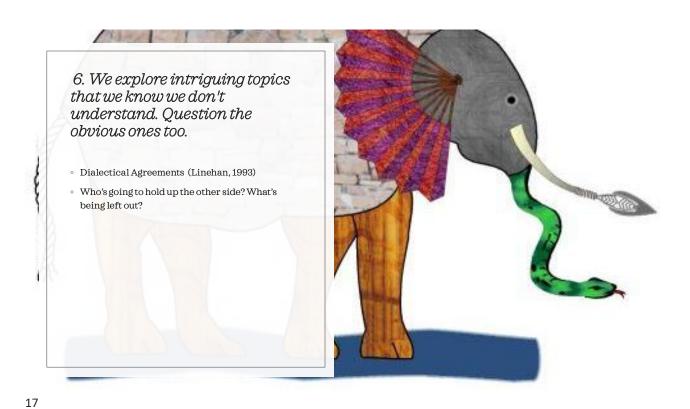
5) It's easier to question the ethics of others than to question what we believe and do.

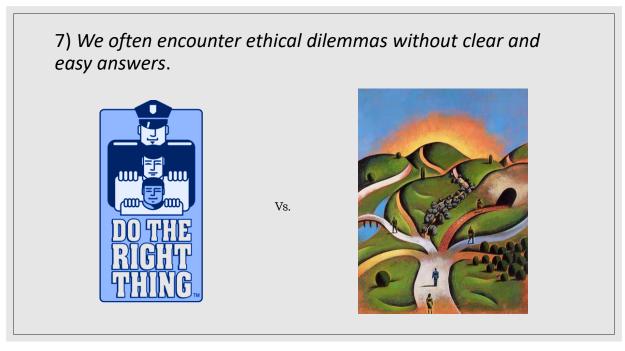
SOCIAL MEDIA EXAMPLE

- 。 Sally Jane, MSW (@Sally Jane MSW)
 - Hey Everyone. I lost one of my dear clients today after she died by suicide. She struggled bravely with terrible child abuse memories for years and was making so much progress in our treatment. She leaves behind two beautiful children. I am beyond heartbroken. I welcome your supportive comments and encourage you to retweet this to share these resources: 1-800-273-TALK, UNI Crisis line 587-3000



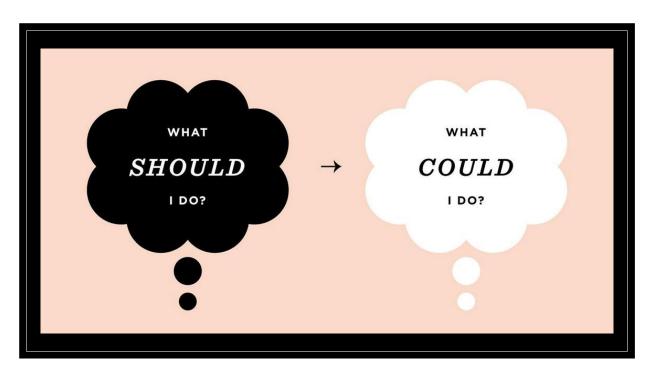
TO





8) We and our clients do not live in a vacuum.





Resources



Knowledge:

www.kspope.com

- Utah DOPL
- Standing at the Edge (Halifax)
- Counseling Ethics for the 21st Century: A Case-Based Guide to Virtuous Practice (Cohen)



Core Contacts

- Liability Insurance (risk management)
- -DOPL, Attny (Legal)
- A supervisor or trusted colleague (clinical)
- Your professional organization (e.g. UPA, NASW, etc. for ethical)
- Moral support (friend, mentor)

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References

- https://dopl.utah.gov/index.html
- $\circ~$ Gottlieb, M. C. (1994). Ethical decision making, boundaries, and treatment effectiveness: A reprise. Ethics & behavior, 4(3), 287-293.
- $\circ \ \ Halifax, J. (2018). \textit{Standing at the edge: Finding freedom where fear and courage meet.} \ Flatiron \ Books.$
- $\circ \ \ Linehan, M.\,M.\,(1993). \textit{Cognitive-behavioral treatment of borderline personality disorder}. \textit{Guilford Publications}.$
- $\circ \ \ Pope, K. \, S., \& \, Vasquez, M. \, J. \, T. \, (2011). \, Ethics in psychotherapy and counseling: A practical guide (4th ed.). \, John Wiley \, \& \, Sons \, Inc. \, <u>https://doi.org/10.1002/9781118001875</u>$