Ethical Training Scenarios

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Why talk about ethics?

- Rehabilitation Counselors are charged with protecting and serving the public.
- Decisions we make affect the lives of our clients greatly.
- It is a lot of responsibility!
- The code can be a compass for daily decision making in your case management.
- And yes, for the CEU’s!

"Make sure everything is done ethically. Within reason, of course."

Inspiration for today's activities

- The CRCC Desk Reference on Professional Ethics: A Guide for Rehabilitation Counselors.
- Suggested topics from PSRS.
- Our own experience in providing rehabilitation services.

The Game Plan

- Ethical training scenarios.
- Get in to small groups of five to eight people to discuss scenario. Mix it up!
- Use the CRCC Code of Ethics to determine potential ethical dilemmas and code violations.
- We will then reconvene the large groups to share the results of your work!

Scenario I

Cindy was working with her Vocational Rehabilitation Counselor, Spencer. The vocational assessment process was explained in detail to Cindy. She had been off work for six years and had undergone multiple surgeries. She understood that she may not qualify to be retrained, but nonetheless hoped that would happen. She had always wanted to go to college and learn accounting. As it turned out, Cindy was released to the transferable skill of Bank Teller by the treating provider. Spencer wrote a report and submitted it to the insurance company. He sent Cindy a letter explaining that she was employable and that he was closing her file. Cindy was upset because her benefits were being cut off and she did not feel confident in her ability to get back to work.

Discussion Points

Was it proper to close a case without contacting Cindy?

What steps should have been completed?

What about legal representatives not allowing the termination steps?

A.8.a
A.8.c
A.3.a

Scenario II

Josh received a referral from an employer to conduct a Vocational Rehabilitation Evaluation to determine return-to-work options and employability. He contacted the office of the worker's attorney to set up a meeting but they would not agree to a meeting. Later that week, Josh received a copy of a letter from the attorney, to the claim manager stating that the worker is amenable to rehabilitation counseling services but that they were unwilling to work with Josh. The claim manager was supportive of Josh and asked that he send letters to the worker offering his services and provide job leads to the worker. Josh sent letters offering his services and provided job leads for several months but there was no response from the worker. *The worker's benefits were terminated and no vocational services were offered again.*

Discussion Points

1)Who is the client?

2) Was it okay for Josh to continue to send letters and job leads after he was informed that neither the worker nor the attorney wanted to work with him?

3) Did Josh stand the way of the worker receiving rehabilitation counseling services?

A.1.a
A.1.d
A.8.b

Scenario III

Vocational Rehabilitation Counselor Madison was working with her client Stacy who presented with a lumbar strain. Stacy worked as a Winemaker at the time of injury, which is medium level work. The Treating Provider, Matt Johnson, D.C. indicated that his patient Stacy was not released to any work. The claim manager ordered an IME with Orthopedic Surgeon, Jeff Murphy and he stated that the lumbar strain had resolved and that Stacy was able to return to work as a Winemaker. Upon review of the report, Madison considered the two medical opinions and decided that the orthopedic surgeon held more weight due to reputation and extensive education. Contact was made with the worker, a closing meeting was conducted, the rationale for the closure was explained and referrals were made. She wrote a report indicating that Stacy could return to work as a WineMaker and closed the file.

Discussion Points

Is it okay for a rehabilitation counselor to choose the medical opinion she most respected for the foundation of a report? Is that objective?

What if your referral source asked you to write your report based one medical opinion over another?

What about when you are asked in a deposition to consider only one or certain medical opinions in drawing your conclusions?

F.1.a
F.2.a

Scenario IV

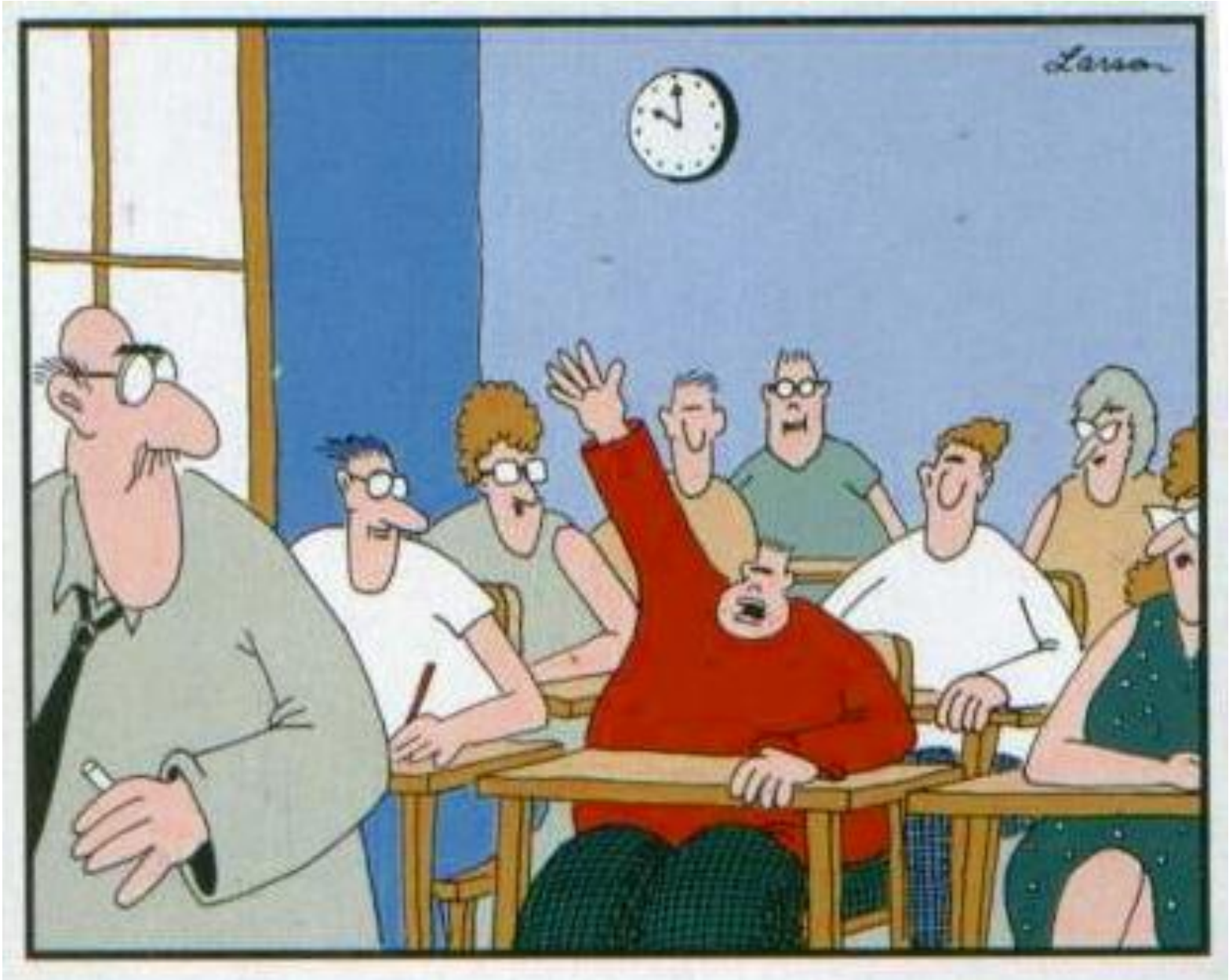
IW reports at intake that they're not working and not able to work. VRC then spots worker through kitchen window at a local restaurant. VRC asks IW about it at next meeting and IW reports they're working under the table at a family member's business. IW says that's the only way they can support their family as TL is insufficient. IW explains that the family member allows them breaks whenever they need it and that's the only reason the work is tolerable. IW states there's technically no record of the employment and begs the VRC not to report to the CM. IW reports that the welfare of their family and home is at stake.

Discussion Points

What is the ethical responsibility of the of the VRC under the Code of Ethics?

What steps should the VRC take?

A.3.a
L.2.c



"Mr. Osborne, may I be excused?
My brain is full."

Thank You!