

A large graphic on the left side of the slide, consisting of two overlapping chevron shapes. The top chevron is yellow and contains the text 'ECHO IDAHO' in white. The bottom chevron is grey and contains the text 'Substance Use in Idaho' in white.

ECHO IDAHO

Substance Use in Idaho

Ethics Under Pressure

8/13/2026

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CEO of The Walker Center

None of the planners or presenters for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



Disclosures

- I do not have any disclosures to acknowledge

Learning Objectives

- Understand how to be ethical in crisis situations
- Understand Code of Ethics and importance of updates
- Learn how to use ethical decision-making model under pressure
- Implement process for using supervision and self care as protective factors

Review

- Person-first language.
- Addiction vs physical dependence.
- Addiction is a treatable chronic medical disease.
- It involves complex interactions between neurobiology, genetics, environment, and life experience.
- It is defined as a “chronic, relapsing disorder characterized by compulsive drug-seeking and use despite adverse consequences”.
- Prevention and treatment approaches are about as successful as methods for other chronic diseases.

Words are Important

Words to Use
Person with a substance use disorder
Person with alcohol use disorder
Substance use disorder
Drug misuse, harmful use
Substance use
Not actively using
Testing positive for substance use
Actively using
Testing positive for substance use
Person in recovery, person in long-term recovery

Words to Avoid
Addict/drug abuser
Alcoholic
Drug problem, drug habit
Drug abuse
Substance abuse
Clean
A clean drug screen
Dirty
A dirty drug screen
Former/reformed addict/alcoholic

Ethical Violations Idaho

Engaging in dual
relationships

Breaching
confidentiality

Unethical billing
practices

Working outside
scope of practice

Sexual
relationships

Client
abandonment

Neglecting to
respond to crisis
calls or visits

Using coercive
treatment
methods – threats
or negative labels

Ethics Pressures

- New laws –pregnancy termination ban
- Artificial Intelligence
- Productivity Pressures



Ethics Updates

Ethical Implications of Pregnancy Termination Ban in Idaho

- Personal ethics vs Professional ethics
- What we can and cannot do/say



Minors: Consent and Confidentiality

Idaho Code 32-1015

- Previously, a minor had confidentiality rights at age 14, after consent of parent/ guardian. Minors were able to consent for services on their own at age 16.
- As of July 1, 2024, all minors under the age of 18 will no longer have confidentiality rights separate from their parent. All minors under 19 years of age will need parental consent to access services.



Implications of Idaho Code 32-1015

- Any biological parents, who's rights have not been terminated, can request and access all records - non redacted.
- Exceptions- if there is a pending legal matter regarding the bio parent and the minor, records can be withheld, only if a letter of confirmation is provided from law enforcement specifically.
- Informed consent must be provided to parents regarding their right to access records.
- This code will be retroactive. All current minor clients will need to be informed as well as their parents. Parents/guardians will need informed consent on this right as well.
- Past minor clients may have their records requested by a parent at any time.

Ethics when Under Pressure

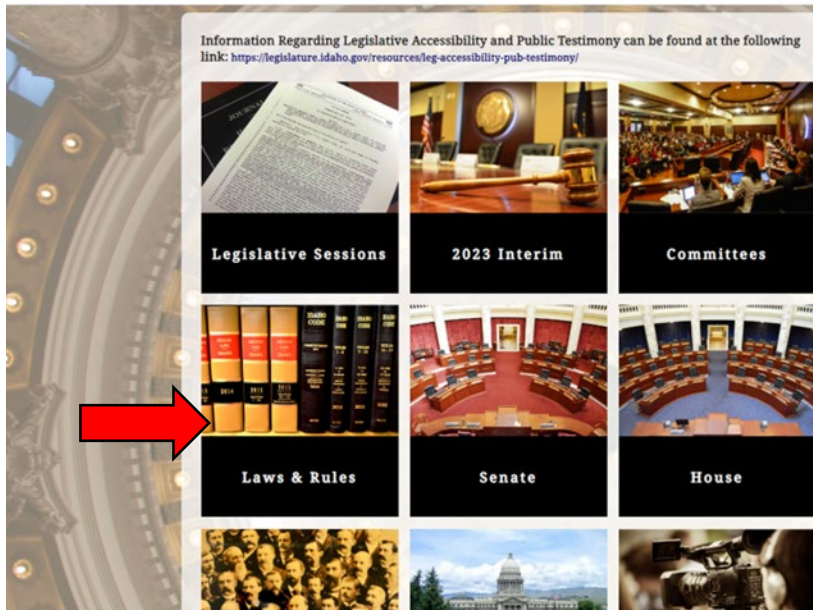
- Medical
- Legal
- Psychiatric
- Family
- Requiring urgent response



Legal Aspect of Ethics



- Decision making models typically references “what does the law indicate”. What does that really mean and do you know how to find it?



https://legislature.idaho.gov/statutesrules/

The official website of the
Idaho Legislature

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TITLE 39	HEALTH AND SAFETY
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TITLE 62	RAILROADS AND OTHER PUBLIC UTILITIES
TITLE 63	REVENUE AND TAXATION
TITLE 64	SALES — [REPEALED]

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Ethical Codes



- Do you know yours?
- NASW – National Association of Social Workers
- ACA – American Counseling Association
- IBADCC – Idaho Board Alcohol Drug Counselor Certification
- NAADAC – National Association for Addiction Professionals

Core Ethical Rules for AI Use



- **Informed Consent:** Counselors must tell clients when and why AI tools (such as automated note-taking or screening chatbots) are used in their care.
- **Confidentiality & Privacy:** Professionals must never input protected health information into non-secure or non-HIPAA-compliant AI platforms.
- **Human Accountability:** Counselors remain fully responsible for clinical output, meaning all AI-generated notes or data must be thoroughly reviewed and edited before final approval.
- **Supervision and Education:** Supervisors and educators must be knowledgeable about any AI tools used by supervisees or students, addressing their safe and equitable integration.
- **Bias Awareness:** Providers must actively evaluate AI systems for cultural bias and discrimination to ensure fair treatment for diverse populations.

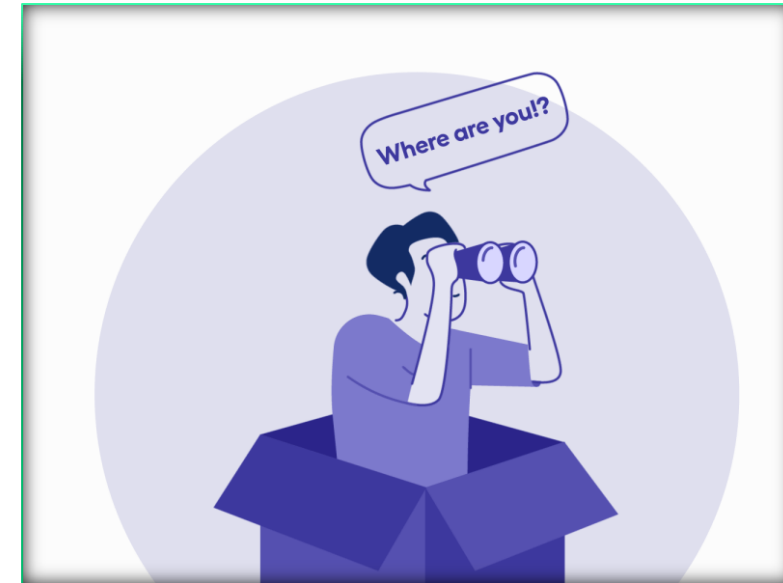


Use of Supervision

- Barrier #1: Are you comfortable with your supervisor?
- Barrier #2: If you are a private counselor or LCPC/LCSW- do you and how do you obtain supervision/consultation?
- Be proactive:
 - Advocate for scheduled supervision time
 - Inquire about communication methods when unscheduled supervision is needed
 - Inquire about who to contact if your assigned supervisor is not available

When Your Supervisor Is Not Available

- Suicide risk screenings
- Law enforcement wants to serve a warrant or guardian ad litem requests records
- Feeling threatened or uncomfortable with a client
- Client displays aggression, threat of violence, psychosis, or mental health crisis



Making Sound Decisions When Lacking Access to Supervisor



Ethical decision-making model



De-escalation skills



Focus is keeping yourself and clients safe



Document attempts to consult

Boundaries

Enable your clients to feel **SAFE** and promote **TRUST** by showing clearly what the purpose of the relationship is, and what the client can expect from you.

Provide the framework for the therapeutic relationship:

- session length, gifts, fees, confidentiality, between-session contact, social media policy and duration or number of sessions, self-disclosure, touch and practitioner competence. (Many of these set by organization/agency).

It is the practitioner's responsibility to hold the boundaries and to ensure clarity for clients.

Define clearly in writing, set and reiterate boundaries, have proactive conversations.



Working with Legal Entities

- Challenges
- How much to share and how much to protect?
- Boundaries within working relationships to preserve the therapeutic relationship and avoid harm to the client
- Are allowing consequences of client behavior a harm to the client? How do you know?

Family Emergency/ Unexpected Leave of Absence



- No one plans to have a family or personal emergency. How can we be prepared?
- Having a contingency plan in place to prepare for life to occur and challenges to happen.
 - HR- password and log in information.
 - Informed consent that in the event of an emergency that another clinician will contact your clients.
 - Another key ethical reason to keep documentation up to date.

Ethical Decision Making without one or more components available in the time of need

In what way can the following be faulty when attempting to follow an ethical decision-making model?

- Define the problem (*is the problem(s) clear?*)
- Apply Code of Ethics (*you have this memorized right?*)
- Apply the law (*consider your exposure to and knowledge of this area*)
- Apply moral principles personally, professionally, societally (*Are these always congruent?*)
- Determine potential action and consequences
- Evaluate these outcome options
- Consult
- Implement
- Analyze results

- Black and white ethics can feel less “slippery”. What about the gray?
- How do you move forward if you are choosing one of two options. One would violate your code of ethics, and one would violate Idaho Statute/ law



Colleagues Integral Supportive Role to one Another

- Having the client in the highest regard means we must have each other's back as colleagues. This does not mean unconditionally loyalty. It means unconditional transparency and communication.
- When or how is this a barrier?



Suicide Risk Screening Processes

When client retracts their
statement of concern?



When the risk feels
unclear to you?



When the client refuses
recommendation

Counter Transference

- The clients you look forward to and the clients you dread
- How you speak about clients will translate to how you treat the client. Be aware of your words and tone.
- Seek supervision to clarify internal barriers and external intervention options.

Taking Good Care VS “Taking Over” for Clients

- Professional Codependency- when our caretaking results in overprotection of a client.



What are Your Warning Signs of being “Tapped out”

- What is the ethical fade?
- What are your signs of withdrawing within your role, going rogue, or experiencing burnout?
- What can you or do you implement to create a pause for reflection and implement supervision and supports.

Me realizing halfway through a conversation that I've been oversharing information...



Self-Disclosure

- Is what you want to share of use to your client (how do you know?)
- When sharing keep it brief and monitor client response and feedback
- Return discussion back to client
- Are you in emotional control of what you are sharing?
- Avoid sharing anything that is currently “bleeding”.
- Do not expect any particular reaction from your sharing
- What level of disclosure is comfortable to you?

Thank You

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Session Resources

- Session resources coming soon!



Check back after the session for resources that were referenced in the presentation or session chat and patient case recommendations.