

# NATIONAL ACADEMY of CERTIFIED CARE MANAGERS

## Code of Ethics and Standards of Practice



*Striving to certify knowledgeable, experienced,  
and ethical care managers*

*Approved by the NACCM Board of Directors July 9, 2020*

# NACCM Code of Ethics and Standards of Practice

## INTRODUCTION

Certificants (also known as Care Manager Certified or CMC) through the National Academy of Certified Care Managers (NACCM) have varied educational and professional backgrounds with a specialized focus on issues associated with aging and disabilities. Through consultation, assessment, care coordination and advocacy, a CMC works with clients and families to address these challenges.

The Code of Ethics and Standards of Practice were developed to guide the CMC in their daily professional and business practices. The ethical principles at the core of the Code of Ethics are the foundation for the Standards of Practice.

## THE CODE OF ETHICS PROVIDES

### **Accountability to our Clients**

NACCM certificants recognize diversity in our society and embrace a multi-cultural approach to support the worth, dignity, potential, and uniqueness of each client. The Code of Ethics acknowledges the vulnerable population we serve and makes explicit the highest standards of practice.

### **Accountability to the Public**

The Code of Ethics sets a national standard for the professional practice of care management. It defines for the public the ethical responsibilities expected of NACCM's certificants and the organization's role in maintaining the highest standards of practice and promotion of ethical behavior.

### **Education of CMCs**

NACCM recognizes the diversity of the experience and education of its certificants and the needs of certificants for guidance in both their professional and organizational roles, and thus the Code of Ethics was developed to guide certificants in each of these roles. It states the core values and principles to current and future certificants, to the public, and to allied professionals. All certificants of NACCM are expected to understand and behave in a manner that is consistent with the provisions of the Code of Ethics.

### **A Framework for Analyzing & Resolving Ethical Dilemmas**

The Code of Ethics offers a framework for ethical decision-making when conflicts arise in the practice of care management. It assists the CMC in examining the ethical issues present in all aspects of their work by identifying which principles need to be considered. It asks the CMC to be aware of their own biases as they seek to resolve ethical dilemmas.

### **Process for Reviewing Complaints**

NACCM reviews complaints against certificants regarding misconduct based on the criteria listed in the Revocation of Certification as contained in the Handbook for Candidates and CMC Recertification Instructions. NACCM's Code of Ethics and Standards of Practice serve as the basis for assessing and resolving complaints.

## THE CODE: ETHICAL PRINCIPLES AND STANDARDS OF PRACTICE SUPPORTING THESE PRINCIPLES

### **Integrity**

A CMC is honest, diligent, and accountable in the provision of service. A CMC always acts in a manner that is consistent with the professional values stated in this Code.

### **Loyalty and Responsibility**

A CMC is trustworthy and dependable in all aspects of both professional and business relationships. A CMC maintains confidentiality, avoids conflicts of interest, and always pursues the best interest of clients.

### **Promoting Benefit and Avoiding Harm**

A CMC promotes clients' interests, values, and welfare in order to maximize benefits and avoid harm. A CMC is aware of potential conflicts that may arise when balancing the benefits and risks of interventions being considered. A CMC strives to ensure that vulnerable clients' individual choices are maximized to the greatest extent possible.

### **Respect for Clients' Rights and Dignity**

A CMC treats clients with respect, as complete individuals with their own history, narrative, and unique cultural identity. A CMC respects the rights of each client, including the right to privacy, and, for the vulnerable client, strives to balance client autonomy with the need for protection and safety. A CMC exercises care and compassion in planning the care and referral for each client and the family.

### **Justice**

A CMC behaves in a just and fair way in all professional and business relationships. A CMC does not promote or sanction any form of discrimination such as discrimination based on race, ethnicity, gender, religion, sexual orientation, national origin, age, disability, or socioeconomic status.

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## Standard 1 - Identifying the Client

### Standard

The CMC should identify who is the client and who are the members of the client system.

### Rationale

Clients are part of complex systems and their needs must be considered in the context of their relationships.

### Guidelines

- A. The client is the person whose care needs have initiated the referral and should remain the focus of services.
- B. The client may not necessarily be the person who makes the initial contact or the responsible party for payment.
- C. All others affected by or who impact the client's care needs should be considered part of the "client system" and may include:
  1. family members within and outside of the client's household,
  2. formal and informal caregivers,
  3. friends, neighbors, faith communities, local agencies, and service providers,
  4. third parties with fiduciary responsibilities, for example guardians, conservators, trustees, powers of attorney, and health care surrogates,
  5. other professionals, such as health care providers, attorneys, and,
  6. care managers
- D. In the event of conflicting or multiple needs within the client system (for example, two clients), it may not be possible for the CMC to serve each client. The care manager may consider consulting with or bringing in a second care manager.

## Standard 2 - Promoting Self-Determination

### Standard

CMCs should promote client self-determination as appropriate within the context of their situation.

### Rationale

The CMC has a responsibility to identify and articulate client wishes, values and preferences so that these can be incorporated into the plan of care.

### Guidelines

- A. To the greatest extent possible, the CMC should involve the client in decisions that impact their life.
- B. The CMC encourages the client to express their wishes.
- C. The client's decisional capacity should be evaluated if it is in question.
- D. If the client cannot make an informed decision, the CMC should ensure that decisions are made by the person(s) with the legal authority to do so. Examples of authority include but are not limited to:

1. Guardianship / Conservatorship
2. Health Care Surrogacy / Health Care Proxy / Health Care Power of Attorney
3. Power of Attorney
4. Representative Payee, and
5. Other similar authority

## Standard 3 - Client Confidentiality

### Standard

The CMC should maintain client confidentiality.

### Rationale

The CMC frequently needs to share information with others. The CMC utilizes knowledge of the client's physical and mental status, financial and legal affairs, and family and community supports to achieve maximum well-being for the client. Due diligence must be exercised at all times to protect the confidentiality of this information.

### Guidelines

- A. The CMC should consider all information in client records confidential. This pertains to active and inactive clients as well as closed cases.
- B. The CMC should maintain a valid and current authorization to exchange information.
- C. The CMC and client/client system should discuss the pros and cons of various communication options in order to determine the preferred method for their particular situation.
- D. The CMC should use discretion when sharing client information.
- E. The CMC should take precautions to mitigate the inherent risk of using electronic communications.
- F. The CMC should not disclose identifying information when discussing clients for teaching, training or consultation purposes.
- G. The CMC should explain to the client or designated decision maker that confidentiality may be waived if the CMC believes it is necessary to protect the client from harming self or others.
- H. The CMC has a responsibility to be familiar with, and abide by, all applicable state and federal laws/regulations, as well as agency policies, regarding confidentiality, the client's right to privacy, and electronic communications.
- I. The CMC has a responsibility to abide by laws and regulations regarding the reporting of abuse, neglect and/or exploitation of vulnerable persons.

## Standard 4 - Use of Social Media

### Standard

The CMC should understand the benefits and risks of participating on social media platforms.

### Rationale

Social media offers opportunities for professional networking, profile enhancement, and sharing expertise. However, the use of social media carries the risks of conflict of interest, inappropriate self-disclosure, and the violation of privacy, confidentiality, and professional boundaries.

**Guidelines**

- A. The CMC should differentiate between one's personal and professional presence on social media.
- B. The CMC should be mindful of how one's online presence reflects on one's professional image.
- C. The CMC should bear in mind that any exchange of information may extend beyond the intended circle of contacts.
- D. The CMC should be aware of state laws and regulations regarding social media.

## Standard 5- Recognition of the CMC's Personal Values and Beliefs

**Standard**

The CMC should have a conscious awareness of personal values and beliefs and how these impact their practice.

**Rationale**

Personal awareness is necessary to provide objective professional services.

**Guidelines**

- A. The CMC should be cognizant of their personal and professional value system and beliefs through a continuous process of self-reflection and/or case consultation.
- B. If the client's wishes and preferences conflict with the professional judgment and values of the CMC, this should be acknowledged, and a solution sought.

## Standard 6 - Maintaining Professional Boundaries

**Standard**

The CMC should maintain appropriate boundaries in relationships with clients and/or members of the client system.

**Rationale**

The CMC should be aware of the power of the relationship when working with vulnerable populations who are at risk of exploitation.

**Guidelines**

The CMC should:

- A. Avoid actions that take or appear to take advantage of clients/client systems for personal and/or financial gain.
- B. Consider the risks of entering into a dual relationship in which the CMC's effectiveness or objectivity might be compromised. A dual relationship exists when providers establish multiple roles with clients or client systems, whether professional, personal, or business.
- C. Be mindful of how the giving or receiving of gifts may affect the professional relationship and be sensitive to cultural dynamics related to gifting.
- D. Never engage in sexual behaviors with the client and/or members of the client system.
- E. Seek consultation or supervision when needed.

## Standard 7 - Continuity of Service

### Standard

The CMC should prepare for practice coverage in the event of an absence which may be temporary or permanent.

### Rationale

In any professional environment clients and families rely on the availability of the CMC.

### Guidelines

- A. Agencies should have plans in place to address circumstances that may interrupt delivery of services such as:
  1. Anticipated absences including vacation, scheduled leave, or change in employment status.
  2. Unanticipated absences including personal medical situations, family emergencies, disability, or death.
- B. In the event of any interruption, the CMC or a designated person should communicate the plan for continuity of services to the client/client system.

## Standard 8 -Termination of Service

### Standard

Termination of the Professional relationship should be handled in a professional and ethical manner with consideration given to the unique circumstances and situation of the client/client system.

### Rationale

Relationships between the CMC and clients are terminated for a variety of reasons. The termination process may pose emotional or practical challenges for the client, the client system, and/or the CMC.

### Guidelines

- A. When there is a termination for any reason, the needs of the client are central to the process. The CMC should be sensitive to the impact of the termination and take reasonable steps to facilitate client access to needed support and services
- B. The client should be notified in writing of alternative services when a CMC
  1. Retires or changes jobs.
  2. Moves out of the area.
  3. Closes or sells their practice.
  4. Recognizes the client requires different expertise.
- C. Termination ideally should occur with the agreement of the client or decision maker. There are circumstances, however, when service may ethically be terminated without that agreement. Examples may include, but are not limited to:
  1. The CMC becomes ill or incapacitated.
  2. The client violates a contractual agreement.
  3. The client files a lawsuit and/or an official complaint against the CMC
  4. The CMC has a reasonable concern their safety may be at risk.

5. The client and/or client system is verbally abusive or making unreasonable demands.
- D. In complex situations, the CMC is encouraged to seek appropriate consultation and guidance regarding legal and/or clinical issues.

## **Standard 9 - Definition of Role**

### **Standard**

The CMC should clearly define the agency purpose and their role and scope of practice to clients and others involved with the client system.

### **Rationale**

All CMC's are professionals within varying working environments with diverse educational backgrounds and skill sets. Therefore, each CMC should define the scope of practice and the particular roles they will accept in assisting clients and those involved in the client's care.

### **Guidelines**

- A. The CMC should provide a clear, comprehensive explanation of their role and responsibilities to clients and the client system.
- B. The CMC should accept only those roles and responsibilities for which they have the skills, knowledge, and training. CMC should recommend consultations with other experts as needed.

## **Standard 10 - Plan of Care**

### **Standard**

The CMC strives to provide quality care using a person-centered care plan developed in consultation with the client and/or client system.

### **Rationale**

The care plan guides the actions and defines the role of the CMC.

### **Guidelines**

The care plan should:

- A. be a result of collaboration between the CMC and the client and/or client system.
- B. be based on an individualized assessment.
- C. address the needs, values, and preferences of the client and/or the client system.
- D. be consistent with the client's circumstances.
- E. be responsive to changing needs and circumstances and revised when indicated.
- F. address the client's potential needs during natural disasters and other emergencies.
- G. be reviewed with the client and/or responsible party and documented in the client record.

## **Standard 11 - Client Records**

### **Standard**

The CMC should maintain client records.

**Rationale**

The purpose of the client record is to facilitate the delivery and continuity of services provided to the client and/or client system.

**Guidelines**

- A. The CMC should accurately document interventions and the client's response.
- B. Client records (including digital communication) should be protected and stored securely.
- C. Following the termination of services, the CMC should retain records to allow for future access. Record retention periods may be dictated by statutes and/or licensing requirements. Where there is no specific statute, common practice is to retain records for at least seven years post termination.
- D. The CMC may consider consulting with legal counsel if they have questions regarding the release of records.

## Standard 12 - Educating Clients Regarding Engaging Caregiving Services

**Standard**

The CMC should assist clients and/or the client system to make informed decisions about caregiver services.

**Rationale**

The CMC serves clients and/or the client system by informing them of the range of available caregiver services and the implications of each option.

**Guidelines**

- A. The CMC should be aware of various caregiver options within the client's community.
- B. The CMC should be aware that there are laws regarding employment practices.

## Standard 13 - Undertaking Decision-Making Authority

**Standard**

The CMC who accepts decision-making authority on behalf of a client should do so only as a last resort and with extreme caution. Decision-making authority may include, but is not limited to, healthcare decisions and financial management. The CMC should act only within their areas of expertise and avoid any activities that might suggest a conflict of interest.

**Rationale**

When a CMC becomes a decision-maker, their role changes from one of advisor to responsible party.

**Guidelines**

- A. The CMC should know and comply with relevant State and Federal laws and statutes.
- B. The CMC should have legal documentation of the authority granted.
- C. The CMC who becomes a decision-maker should review the National Guardianship Association Standards of Practice (see [www.guardianship.org/documents/Standards\\_of\\_Practice.pdf](http://www.guardianship.org/documents/Standards_of_Practice.pdf))

- D. In accepting the role of decision-maker for the client, the CMC has the responsibility to represent the client’s wishes to the greatest extent possible and guard against making decisions based on the CMC’s own values (see Standard “Promoting Self Determination”).
- E. The CMC should avoid, where possible, self-payment. If the CMC has no alternative than to assist the client to pay for care management services, it is recommended that a third party provide oversight for these transactions.
- F. Documentation of all actions should be maintained and made available to authorized parties.
- G. Examples of authority include but are not limited to:
  - 1. Guardianship / Conservatorship
  - 2. Health Care Surrogacy / Health Care Proxy / Health Care Power of Attorney
  - 3. Power of Attorney
  - 4. Representative Payee, and
  - 5. Other similar authority

## **Standard 14 - Working with Clients under Court Jurisdiction**

### **Standard**

When working with Guardians, Conservators and/or in a court appointed capacity, the CMC is obligated to operate within the court system while adhering to NACCM’s Standards and Ethics.

### **Rationale**

Providing services to clients under court jurisdiction adds a layer of complexity since each of the stakeholders have their own professional or personal perspectives. The client and/or client system may also feel a loss of control as the court is the final decision-making authority.

### **Guidelines**

- A. The client is the person whom the court has determined to be in need of protection.
- B. The client system may include but is not limited to:
  - 1. Judge and/or Court Representative,
  - 2. Guardians or Conservators,
  - 3. Attorneys and/or guardians ad litem,
  - 4. Family or informal support system,
  - 5. Healthcare Providers,
  - 6. Adult Protective Services
- C. The CMC should strive to understand and articulate their roles and responsibilities and clarify expectations within the context of the legal and client systems while continuing to follow the NACCM’s Standards of Practice and Code of Ethics.
- D. The CMC should communicate frequently and clearly with the legal decision maker(s) and strive to advocate for the vulnerable person
- E. The CMC should collaborate with the legal decision maker(s) to identify and address potential challenges to service. In consultation with the legal decision maker(s), the CMC should reach out to client system if/when appropriate.

- F. If the situation becomes untenable the CMC should notify the legal decision maker of intent to terminate.

## **Standard 15 - Continuing Education**

### **Standard**

The CMC should participate in continuing education programs for professional growth and continued certification.

### **Rationale**

Participation in relevant continuing education programs is required for a CMC to remain current in best practices and to maintain a base of professional knowledge and skills in order to practice in a proficient and ethical manner. Recertification requires continuing education throughout the certification period.

### **Guidelines**

- A. Continuing education requires a CMC to assume responsibility for their own professional development.
- B. Continuing education hours can be obtained either as a participant or a presenter of a program meeting NACCM criteria.

## **Standard 16 – Supervision / Consultation**

### **Standard**

The CMC should utilize supervision / consultation on an ongoing basis.

### **Rationale**

Supervision /consultation enhance professional practice. NACCM views supervision as an ongoing process of consultation for the purpose of maintaining and improving one’s care management skills.

### **Guidelines**

- A. Professional supervision / consultation may be conducted by professional peers, mentors, or supervisors in formal and/or informal arrangements.
- B. Supervision / consultation benefit the CMC by providing guidance and support in dealing with challenges such as:
  - 1. Care Plan development
  - 2. Developing Clinical Skills
  - 3. working with complex situations.
  - 4. managing client/client system crises.
  - 5. identifying and resolving ethical dilemmas.
  - 6. developing cultural responsiveness and humility.

## **Standard 17 - Transparency**

### **Standard**

The CMC should provide clarity and accuracy in all communications, including advertising and financial disclosures.

**Rationale**

The CMC clarifies expectations, establishes integrity, and avoids the possibility of a conflict of interest through clear communication about their expertise and scope of practice, billing practices, and financial relationships.

**Guidelines**

- A. When services are billed on a fee-for-service basis, the CMC should clearly explain, verbally and in writing, the terms and conditions of services to the responsible party. This should include fee structures, billing practices, and payment terms.
- B. Information about the CMC's agency's funding sources, contractual relationships, and other business associations should be made available.
- C. The CMC should act with transparency and maintain a position of objectivity when making recommendations for services, disclosing any relationships with recommended entities and providing alternatives as appropriate, to avoid the possibility of a conflict of interest.
- D. Statements in advertising and marketing materials regarding the CMC's qualifications, credentials, expertise, or agency business practices should be current, accurate, and not misleading.