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PROCEDURE

Application

This procedure shall apply to all employees, volunteers and student interns of The Right Door for Hope, Recovery and Wellness.

- 1. Education on Code of Ethics and Reporting Violations
 - 1.1. We have established a reporting procedure for circumstances, in which you believe, or suspect, a violation of this code, laws, regulations or company policies and procedures. Each employee, volunteer, intern and contracted provider has an individual responsibility for reporting any activity by that appears to violate any of the following:
 - 1.1.1. Any law, rule and/or regulation
 - 1.1.2. Accreditation Standards
 - 1.1.3. Standards of Professional Practice/Code of Ethics/Licensing Rules
 - 1.1.4. Federal Healthcare Conditions of Participation
 - 1.1.5. This Code or any Company Policies or Procedures

1.2. Non-retaliation

1.2.1. An employee shall not be disciplined for reporting what they reasonably believe to be a violation of any of the above. If any individual has reported any incident to their appropriate supervisor and feels unsatisfied, that individual may contact The Right Door Compliance Officer or a member of the compliance committee.

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Please see the policy on reporting and non-retaliation.

1.3. Education

- 1.3.1. Employees, volunteers, interns and contracted providers shall be trained on and sign off on agreement to the Code of Ethics at time of new hire orientation.
- 1.3.2. Review and training on the Code of Ethics will occur at least annual by supervisor, team meeting or full staff agency meeting.
- 1.3.3. Stakeholders will have access to the Code of Ethics in organizational pages of the "Guide to Services" handbook, on the website via policy and procedures and upon request.

2. Compliance

- 2.1. Maintain a high standard of personal and professional conduct in capacity or identity as an employee or representative of The Right Door for Hope, Recovery and Wellness.
- 2.2. Act in compliance with and abide by the Code of Ethics and the compliance plan during the entire term of employment or internship.
- 2.3. Report first-hand knowledge of unethical activity to appropriate leadership members. Report any actual or suspected violation of the Compliance Plan, Code of Ethics, The Right Door policies or procedures, contract requirements, state and federal regulations or other conduct that is known or suspected to be illegal.

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- 2.4. Adhere by all federal, state and local laws in regards to the documenting, reporting, and billing of services with federal funds to prevent fraud, waste and abuse.
- 2.5. Abide by procurement laws and regulations to ensure fiscally sound practices.
- 3. Responsibility to Organization/Human Resources
 - 3.1. Work to achieve the organization's mission, vision and values.
 - 3.1.1. Mission: To be the premier behavioral health provider in the service area.
 - 3.1.2. Vision: Our Vision is to be an integral and valued partner in a community committed to the wellness and full participation of its citizens.
 - 3.1.3. Values: We value and pledge to provide quality accessible care, healing, wellness and recovery throughout our service area. We will provide solutions, education and alternatives to give you hope for today, tomorrow and in the future.
 - 3.1.3.1. *Wellness*: We are committed to treating the whole person: body, mind and spirit.
 - 3.1.3.2. <u>Accessibility</u>. We possess a strong sense of urgency and are committed to providing an immediate response to the needs of the community.

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- 3.1.3.3. <u>Best Value</u>: We are committed to providing the highest quality services and programs in the most effective and efficient manner.
- 3.1.3.4. <u>Respect and Dignity in a Culture of Gentleness</u>: Every person shall be treated with respect and dignity in a gentle, welcoming and listening environment.
- 3.1.3.5. <u>Recovery</u>: The Right Door promises to foster recovery by instilling hope, empowering individuals to reach their potential, and providing support and education.
- 3.1.3.6. *Trauma-Informed*: We are committed to being trauma informed and responsive.
- 3.2. Support the integrity and reputation of the organization and represent the organization in a positive manner.
 - 3.2.1.1. Respond responsibly to criticism from those outside the organization.
 - 3.2.1.2. Work to accomplish the organization's goals, performance indicators, quality improvement projects and outcomes.
- 3.3. Respect organizational policies, procedures, practices and decisions, and take initiative toward their improvement when it will better serve the interests of persons served.
- 3.4. Recruit, manage, develop and retain employees who meet the needs of the persons served. Strive to ensure compliance with Equal Employment Opportunity and Workforce Diversity guidelines and encourage hiring of qualified candidates who reflect the diversity of the community and population served.

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- 3.5. Report/document all supports and services correctly to ensure that persons served and payers are billed appropriately and fairly.
- 3.6. Appropriately sign, date, and witness those documents requiring a witness when asked.
- 4. Responsibility to Persons served and Quality Service Delivery
 - 4.1. Primary responsibility is to the persons served.
 - 4.2. Foster every effort to maximize persons served self-determination, strengths, abilities and preferences, including in person-centered planning.
 - 4.3. Assist persons served who are requesting organizational help in obtaining other supports and services if The Right Door for Hope, Recovery and Wellness is unable to serve them.
 - 4.4. Interact "therapeutically" in relationship with the person served.
 - 4.5. Do not give or accept items (money, personal items, cd's, cigarettes, clothes, etc.) from the person served. Abstain from accepting money or gratuities from a person served, external agencies, funders, or other vendors. If a gift is received during service from an external vendor or referral source, the gift will be turned in to the employee's supervisor and considered a donation.
 - 4.6. Personal and Agency Property: The Right Door cannot be responsible for loss of personal property that is damaged or stolen. Employees are responsible for personal property brought to the workplace.

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- 4.6.1. 4.6.1 The Right Door prohibits any items on the premises or worksite that are sexually suggestive, offensive, or demeaning to specific individuals or groups, along with firearms or weapons.
- 4.6.2. 4.6.2 All personal property may be inspected for purposes of enforcing policies and to protect against theft.
- 4.6.3. 4.6.3 Property owned by The Right Door and personal property of individuals served, visitors, and personnel shall be safeguarded and treated with respect.
- 4.6.4. 4.6.4 Employees may not take advantage of agency property, information or position for personal gain.
- 4.7. Not engage in coercive solicitation of coworkers or individuals served such as seeking donations, encouraging purchases or taking a position on an issue outside the workplace. Employees receiving unwanted solicitations are encouraged to address the issue with their coworker and/or report the matter to their supervisor and/or Compliance Officer.
 - 4.7.1. Employees may share fundraising with other staff members by sending full staff emails or leaving fundraisers in shared employee spaces.
- 4.8. Abstain from intimidating, threatening, harassing, using undue influence, physical force or verbal abuse, or make unwarranted promises of benefits to persons served.
- 4.9. Advocate for the full integration and/or re-integration of persons served into the communities of their choice and promote the value of these individuals in those communities.
- 4.10. Be directed by the knowledge that all individuals have the right to live in a safe and least restrictive environment.

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- 4.11. Never engage in sexual/intimate activities/relationships with the persons served.
- 4.12. The Right Door serves people vulnerable to additional abuse, mistreatment and exploitation. Contact between persons served and staff (volunteers, interns and employees, including peers and recovery coaches) is limited to activities approved to protect all involved. Do not meet persons served outside the parameters of the organization. Do not engage in dual or multiple relationships with a person served or former persons served, in which there is a risk of exploitation or potential harm.
- 4.13. If bound by a professional Code of Ethics (psychiatrists, psychologists, social workers, nurses, licensed and/or certified counselors, attorneys, certified recreational therapists), remain familiar and up to date with, and to adhere to, respective codes.

5. Business Practices

- 5.1. Maintain accurate and complete records, data, and information owned, used, and managed by The Right Door for Hope, Recovery and Wellness.
- 5.2. Maintain books, records, and accounts to accurately and fairly reflect organization standing and activities.
- 5.3. Cooperate fully and appropriately with internal and external audits, investigations, and review.
- 5.4. Abide by fair hiring and staff managed practices in accordance with organization policies, procedures, and state and federal labor laws.

6. Contractual

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- 6.1. Contracts will be executed by the Board of Directors and CEO or designee and the contracting party; each legally qualified to commit the contracting entity to a binding contract.
- 6.2. The contract will clearly establish and address:
 - 6.2.1. The nature of services to be performed.
 - 6.2.2. The period of the agreement.
 - 6.2.3. If applicable, the conditions under which the contract will be reviewed, renewed and/or terminated and venue for addressing perceived breaches of the contract.
 - 6.2.4. The financial arrangements.
 - 6.2.5. Appropriate accounting procedures for revenue and expenditures.
 - 6.2.6. If applicable, Federal and State requirements

7. Confidentiality

- 7.1. Maintain the highest level of confidentiality by not disclosing any information identifying persons served to others, including co-workers, unless:
 - 7.1.1. the person served consents in writing,
 - 7.1.2. or the disclosure is required by a court order,
 - 7.1.3. or the disclosure is made to emergency personnel in an emergency,

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- 7.1.4. or the suspicion of adult or child abuse or neglect,
- 7.1.5. or person served threatens to harm self or others.
- 7.1.6. or the disclosure is to a co-worker who is involved in the care of the person served, supervision is being provided to the case worker or coordination of care is occurring.
- 7.2. Employees will access person served Protected Health Information (PHI) only when access to that information is a necessary part of their job function. Accessing person served PHI for purposes other than to perform functions of your position will result in disciplinary action.
 - 7.2.1. Employees will be assigned roles in the Electronic Health Record appropriate to their job function.
- 7.3. Employees who are or ever were a person served of organization services will not access their PHI without following disclosure policy. All requests to view PHI shall follow the disclosure procedures for accessing ones record as outlined in organization procedure.
- 7.4. If you are aware or become aware of an acquaintance or family member that is served by our organization, you should notify the Compliance Officer.

 We will then prohibit your access to that file.

8. Discrimination

1.1 Not discriminate on the basis of ethnicity, race, color, gender, sexual orientation, sex, gender identity, age, height, weight, religion, national origin, marital status, financial status, political belief, mental or physical ability, or any other preference or personal characteristic, condition or state.

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- 1.2 Employees will not discriminate based on financial status because:
 - an individual is unable to pay; or
 - payment for those services would be made under Medicare,
 Medicaid, or the Children's Health Insurance Program (CHIP)

9. Competency

- 9.1. Employees shall accurately represent their education, training, experience, and competencies as they relate to profession or scope of practice.
- 9.2. Diagnose, treat, or advise on problems within the boundaries and scope of any recognized competency.
- 9.3. Take responsibility for enhancing professional knowledge, skills, and abilities, and actively improve competency through documented staff development plan.
- 9.4. Abstain from use of legal or illegal drugs that impair ability to provide competent, safe and effective care.

10. Conflict of Interest

- 10.1. Comply with organization policies and procedures regarding conflict of interest.
- 10.2. Avoid and abstain from activities or decisions that constitute a conflict of interest.

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- 10.3. Avoid using professional relationship with person served to further your own interests.
- 10.4. Avoid relationships with persons served that could impair professional judgment or exploit their trust and vulnerability.
- 10.5. Employees who are certified as Notary Publics may witness documents such as Power of Attorney, guardianship, advance directives and/or organization contracts for clients, personnel, and other stakeholders in accordance with applicable state laws. The person who witnesses a document should be neutral and have no financial or other interest involved.

11. Colleagues

- 11.1. Treat all colleagues and community partners with respect, fairness, courtesy and good faith.
- 11.2. Participate in peer-review activities in a responsible, equitable manner.
- 11.3. Avoid engagement in any form of harassment or discrimination.

12. Marketing

- 12.1. Abide by organization policy and procedure on marketing by getting any created marketing or advertising material approved by the CEO or designee.
- 12.2. Avoid false marketing through unverified claims and exaggeration.
- 12.3. Ensure any photographs used of persons served have an accompanied organization release for use of photographs in marketing materials.

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- 12.4. Follow organization policy and procedure on social media, including never disclosing persons served information on social media channels without explicit permission and release from persons served.
- 13. Peer Support Specialists Specific Code of Ethics
 - 13.1. In addition to the above, organization peer supports will abide by the Michigan
 - 13.2. Peer Support Specialist Code of Ethics. The following Code of Ethics will guide Michigan Certified Peer Support Specialists in their various roles, relationships, and levels of responsibility in which they professionally perform.
 - 13.3. Certified Peer Support Specialists will maintain high standards of professional conduct in a manner that fosters hope and recovery while practicing self-care.
 - 13.4. Certified Peer Support Specialists will advocate and support for the full integration of individuals into the communities of their choice.
 - 13.5. Certified Peer Support Specialists will improve their knowledge and skills through ongoing education and share that knowledge with colleagues and individuals they serve.
 - 13.6. Certified Peer Support Specialists will value diversity, equity and inclusion and will not practice, condone, facilitate, or collaborate in any form of discrimination based on ethnicity, race, sex, sexual orientation, gender identity, age, religion, national origin, marital status, political belief, disability, or any other preference or personal characteristic, condition, or state.

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- 13.7. Certified Peer Support Specialists will respect the privacy of those they serve and will abide by State and Federal privacy and confidentiality laws.
- 13.8. Certified Peer Support Specialists will inform supervisor(s) or other members of the treatment team/agency immediately of any reported or suspected intent of serious harm to self or others or abuse from caregivers with those they serve.
- 13.9. Certified Peer Support Specialists will respect the rights and dignity of those they serve and shall not force any values or beliefs onto the person engaging in services.
- 13.10. Certified Peer Support Specialists will not pursue or engage in sexual or intimate relationships through the use of technology or in-person with individuals they serve, their relatives or others with whom they maintain a close personal relationship with.
- 13.11. Certified Peer Support Specialists will avoid relationships that conflict or create risk of harm in the best interest of individuals they serve. When dual relationships are unavoidable, it is the responsibility of the Certified Peer Support Specialist to seek supervisory consultation.
- 13.12. Certified Peer Support Specialists will not give, lend, borrow and/or accept gifts, of significant value, including financial transactions, from persons they serve.
- 13.13. Certified Peer Support Specialists will conduct themselves in a manner that fosters their own recovery and recognize the many ways in which they may influence peers and others in the community, as they serve as a role model.

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- 13.14. Certified Peer Support Specialists will share relevant parts of their recovery story to provide hope at a time when it is beneficial to the person served.
- 13.15. Certified Peer Support Specialists will provide strength-based services acknowledging that every person has skills, gifts, and talents they can use to better their lives.
- 13.16. Certified Peer Support Specialists will provide support for those they serve through all stages of recovery.

References:

- Michigan Certified Peer Support Specialist Code of Ethics 2022
- CARF ASPIRE to Excellence STANDARDS LEADERSHIP

Kerry L Possehn, Chief Executive Director	Date	