Kansas Department for Aging and Disability Services CSP Commission
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Rules of Conduct for Case Managers
Serving People With Developmental Disabilities

Purpose

The purpose of this document is to guide and inform case managers supporting people with developmental disabilities, and the people they support, as to the expectations and principles which will be required for Targeted Case Management practice and which may be helpful to developmental disability system participants to address specific circumstances.

Targeted Case Management Definition
Case management consists of services which help beneficiaries gain access to needed medical, social, educational, and other services. “Targeted” case management services are those aimed specifically at special groups of enrollees such as those with Intellectual/developmental disabilities or chronic mental illness. Targeted Case Management consists of four components:
Assessment
Development of a Plan of Care
Referral and related activities
Monitoring and Follow-Up

Rules of Conduct

➤ The TCM shall not falsify documents.
➤ The TCM will not violate the State and Federal regulations and policies.
➤ The TCM shall promote the well-being of consumers.
➤ The TCM shall respect and promote the right of consumers in their efforts to identify and clarify their goals.
➤ TCMs may limit consumers’ right to self-determination when, in the TCMs professional judgment, consumers’ actions or potential actions pose a serious, foreseeable, and or imminent risk to themselves or others.
➤ The TCM should be alert to and avoid any conflicts of interest that interfere with the exercise of professional discretion and impartial judgment. In some cases, protecting the consumers’ interests may require termination of the professional relationship with proper referral of the consumer.
➤ The TCM should not engage in multiple relationships with consumers or former consumer the TCM should take steps to protect the consumer and are responsible for setting clear, appropriate and culturally sensitive boundaries.
➤ When the TCM provides services to two or more people who have a relationship with each other (for example, couples, family members), TCM should clarify with all parties which individuals will be considered clients and the nature of case managers’ professional obligations to the various individuals who are receiving services.
TCMs who anticipate a conflict of interest among the individuals receiving services or who anticipate having to perform in potentially conflicting roles should clarify their role with the parties involved and take appropriate action to minimize any conflict of interest.

The TCM should under no circumstances engage in sexual activities or sexual contact with current or former clients or clients’ families.

The TCM should not engage in physical contact with consumers when there is a possibility of psychological harm to the consumer as a result of the contact (such as cradling or caressing clients). TCMs who engage in appropriate physical contact with the clients are responsible for setting clear, appropriate, and culturally sensitive boundaries that govern such physical contact.

The TCM should not sexually harass clients. Sexual harassment includes unwelcome and unwarranted sexual advances, requests for sexual favors, and other verbal or physical conduct.

The TCM should not use derogatory language in their written or verbal communications to or about consumers. TCMs should use accurate and respectful language in all communications to and about clients.

TCMs should treat colleagues with respect and should represent accurately and fairly the qualifications, views, and obligations of colleagues.

TCMs who are members of an interdisciplinary team should participate in and contribute to decisions that affect the well-being of clients by drawing on the perspectives, values, and experiences of the profession. Professional and ethical obligations of the interdisciplinary team as a whole and of its individual members should be clearly established.

TCMs should refer clients to other professionals when the other professionals’ specialized knowledge or expertise is needed to serve clients fully or when the TCM believes they are not being effective or making reasonable progress with clients and that additional service is required.

TCM should not allow their own personal problems, psychosocial distress, legal problems, substance abuse, or mental health difficulties to interfere with their professional judgment and performance or to jeopardize the best interests of people for whom they have a professional responsibility.

The TCM is responsible for maintaining knowledge and updates of laws, regulations and/or policies.

The TCM shall promote the consumer self-care management.

The TCM shall facilitate informed choice, consent and decision making.

The TCM shall conduct the statewide needs assessment per policy.

The TCM will not abuse substances under any circumstances.

The TCM shall not give or receive gifts that may impair partial judgment or might lead to exploitation.

The TCM shall not consume the consumer’s food or drink.

The TCM shall not use the consumer’s telephone.

The TCM shall not discuss one's personal problems, religious or political beliefs with the consumer.

The TCM shall not accept gifts or tips from the consumer or their caregiver;
Principles of Practice

These principles are based upon core values of Targeted Case Management. They set forth standards for all Targeted Case Managers in the practice of their profession.

1. **Service**

The primary goal of Targeted Case Managers is to support people with developmental disabilities, in conjunction with their chosen support network, to identify, select, obtain, coordinate and utilize both paid services and natural supports that may be available to enhance the person’s independence, productivity and integration, consistent with their lifestyle preferences and needs. Targeted Case Managers make extraordinary efforts to ensure the highest level of access to and responsiveness to valid, informed choice-making by the people they serve.

2. **Individual Rights and Dignity**

Case Managers understand, promote and support the people they serve in understanding, receiving education about, and exercising all of their individual rights; they recognize at all times and in all settings that people with developmental disabilities are entitled to the same dignity and respect as all other persons, regardless of their individual disabilities or support needs.

3. **Importance of Interdependent Relationships**

Targeted Case Managers understand, promote and support the people they serve in understanding and cultivating interdependent, mutually valued human relationships with others; they assist people they serve in understanding and accessing enriching friendships, intimate relationships and natural supports. Targeted Case Managers make extraordinary efforts to ensure that the people they serve are supported in increasing their independence and decreasing their dependence upon paid supports.

4. **Importance of Collaboration**

Targeted Case Managers understand and promote collaboration between all participants in the developmental disabilities service system, and in related systems or communities. Targeted Case Managers make extraordinary efforts to ensure that times of transition for the people they serve are marked by extensive, mutually agreed upon, and enhancing information sharing, and that every necessary decision is made by the person in a free, voluntary and fully informed manner.

5. **Resource Stewardship**
Targeted Case Managers understand and support the people they serve to understand that public resources for paid supports are limited and in some situations limiting; they actively research and support the people they serve in obtaining and utilizing generic and natural supports; they recognize their role in the service system as being in part responsible to manage public resources in efficient ways; they deliver and bill for services in accordance with the rules and practices which govern reimbursement. Targeted Case Managers make extraordinary efforts to ensure that the people they serve are empowered to explore and access supports they need to lead enriched, interdependent, healthy, safe and choice-driven lives with an effective combination of paid and unpaid supports.

6. **Integrity**

Targeted Case Managers conduct all of their professional work in a trustworthy manner; they maintain awareness of the standards, rules, regulations and reimbursement structures which govern their profession, and follow them. Targeted Case Managers make extraordinary efforts to act honestly, responsibly, responsively and promote ethical practices on the part of themselves individually and the organizations with which they are affiliated.

7. **Competence**

Targeted Case Managers prepare themselves to meet their professional standards and obligations, and actively attend to developing and enhancing their professional expertise; they get whatever preparation and supervisor support they need to ensure competence as they build their own skills. Targeted Case Managers make extraordinary efforts to ensure that they understand their duties, know how to carry out those duties, and provide their services in an effective and efficient manner.

**Interactions With People Accessing Services**

**Please note:** When applicable, references such as “the person” or “individuals accessing services” also include the person and his/her substitute decision-maker. “Guardian” also includes other recognized substitute decision makers when applicable.

**Commitment to Individuals:** Targeted Case managers have a responsibility first and foremost to the interests and well-being of individuals accessing services.

**Empowerment for Individuals:** Targeted Case Managers have a responsibility to help empower people to explore options that promote a richness of experiences which support living quality lifestyles as defined by the person receiving services and their supporters.

**Cultural Competence and Social Diversity:** Targeted Case managers will respect, support, consider and be sensitive to cultural differences as services are developed and implemented. Targeted Case managers will become knowledgeable about each individual’s culture and respect strengths in all cultures.
Sexual Relationships: Case managers shall not engage in any sexual activity or sexual contact with individuals accessing services. Any consent to sexual activity or sexual contact by an individual accessing services does not change the prohibition against such sexual activity or sexual contact. Interactions between Targeted Case Managers and individuals accessing services must be in a manner that ensures individuals are shielded from any appearance or possibility of sexual abuse or exploitation.

Respect: Targeted Case managers have a responsibility to assure that all verbal or written communications with or about an individual are guided by sensitivity and the understanding that all individuals have the right to be treated with dignity and respect.

Informed Consent: The Targeted Case Manager must protect an individual’s right to participate in decision making that information be presented in the person’s primary communication method. If the person is unable to make an informed decision and a guardian has been appointed, the TCM will assist the guardian in making an informed decision that supports the person’s preferred lifestyle. If the person does not have access to a guardian and needs some assistance in making complex decisions, the TCM will seek input from the person’s support network to help the person make the decision in a way that supports the person’s preferred lifestyle. The TCM will clearly identify supports the person needs to make informed decisions, as part of the person centered support plan.

Conflicts of Interest: The case manager must respect his/her role as a paid professional chosen by the person or the person’s guardian to protect their interests. The TCM will not use a person or his/her resources to further the TCM’s personal, political or business interests. The TCM will be alert to and avoid conflicts of interest that may interfere with the exercise of professional independence and judgment. If a conflict exists, the TCM will take appropriate action to resolve the conflict in a manner that protects the person’s rights and interests. When a TCM providers service to related persons, the case manager will clearly outline his/her responsibilities to each party and take appropriate action to minimize conflict. Appropriate action may include termination of services to the person and referral to another service provider.

Privacy and Confidentiality: The TCM will protect the person’s right to privacy at all times. The TCM will only disclose pertinent information after consent from the person and/or guardian has been secured. The TCM must secure, transfer and dispose of records in a manner that prevents unauthorized access and as outlined by the KDADS. The TCM will not disclose identifying information for training purposes without consent from the person. The TCM will take steps to protect the persons’ privacy when discussions take place in the presence of others. The TCM will explain to the person and guardian about circumstances that require disclosure of information without consent.

Access to Records: The TCM will promote the person’s right to access his/her records and make decisions about records availability for access in a timely manner. If other persons accessing
services are identified in the person’s records, the TCM will take steps to protect that person’s privacy. The TCM will make the person’s records available to others as requested by the person or guardian.

**Termination of Services:** The TCM may terminate services if the person no longer needs the service or wishes to discontinue services. The TCM must inform persons when planning to terminate services, explain other available options, explore all remedies to avoid termination for lack of payment, make appropriate referrals and assist with the transition to the receiving provider. The TCM cannot terminate services to pursue a social, financial or sexual relationship with the person. The TCM cannot terminate services when there is active, imminent danger to the person’s health, safety and welfare.

**Interactions With Other System Participants**

**Transition or Termination of Services:** In the event a person is transferring between service providers or terminating services, the TCM should actively support and participate in planning meetings and other necessary activities to ensure that there is a smooth transition process, that there are no provider or other obstructions to the transition, and that there are no significant disruptions of needed services during the process. The TCM shall encourage all persons involved in a service transition to address difficult service issues head on, to share realistic and fact-based evaluations of personal skills and abilities, and to voluntarily address those issues with all people/support teams involved. With the person’s informed choice, the TCM should disclose all relevant information to new service providers to assist in effective service planning. The TCM should take care to ensure that the policies and procedures of the CDDO in the relevant service area about service transition or termination are honored.

**Conflicts or Disputes:** In the event a TCM has a conflict or dispute with an employer, a colleague, another provider agency or a member of the person’s support team, the TCM should ensure that the person is not put at any disadvantage, is not brought into the dispute, and is not used to advance the TCMs position in the conflict.

**Cooperation:** TCMs should treat colleagues, other service providers and the person’s support team members with respect and fairness. They should interact with the person’s support team effectively and actively participate with the team in building supports that are meaningful and valuable to the person, using their knowledge and experience to contribute to the development of services and supports.

**Marketing/New Provider Setting:** Targeted Case Managers should not market their services in any manner that puts people in the middle of provider disputes. In the event a TCM develops a new provider agency, or changes employment from one provider setting to another, the TCM must be vigilant to ensure that the person and any alternative decision-maker understands that the TCM does not have the option of automatically transferring services for the person from one setting to the other. TCMs must ensure that the process for transfer of services established by the CDDO in the relevant service area is followed, and that the CDDO governs communication with the...
person and any alternative decision-maker about all available choices in the event of such a change. TCMs cannot use their unique relationship with and access to people to prepare in advance for such a change and make any suggestion to the person as to selecting the case manager in a new service setting.