

# **How the CRCC Code of Ethics is Related to Your Career Satisfaction**

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MAUREEN MCGUIRE: All right. Welcome back, everybody. As I said before, this is all being recorded and fully captioned. And the evaluation will also be going out to you. So do not despair. If you have any questions, feel free to reach out to any of us at GW, and we'll try to get you to the right person. So I'm very pleased to introduce our next speaker, Dr. Robert Froehlich.

He has been providing rehabilitation counseling services since the early 1990s and has been a rehabilitation educator for more than 20 years. He currently teaches courses both online and on campus in the Rehabilitation Counseling Master's Program at the George Washington University. He has significant clinical experience in the psychiatric rehabilitation, brain injury rehabilitation, state federal VR, and private sector.

He's a Licensed Professional Counselor, LPC, in both Virginia and South Carolina, and is a nationally Certified Rehabilitation Counselor, or CRC. He's a past president of Virginia Rehabilitation Association and was elected to serve a three-year term as an at-large director on the Commission on Rehabilitation Counselor Certification, CRCC, board of directors. And he has just finished his term as chair of the CRCC ethics committee and is a member of the Virginia Counseling Association Ethics Committee.

Prior to joining the faculty of George Washington University, Dr. Froelich was an assistant professor with the University of South Carolina School of Medicine's Rehabilitation Counseling Program. And he's also a member of the Center for Rehabilitation Counseling Research and Education at GW. And with that, Dr. Froelich, I'm going to turn this right over to you.

ROB FROEHLICH: All right, wonderful. Hey, it's been so nice spending the past few hours with you all, hearing some great presentations, and seeing a lot of activity in the chat box. What I wanted to do with this presentation was to strike a bit of a blend between utility and information-sharing and something that allows for greater engagement.

So when I conceptualized this, I was, like, OK, what can we do with the CRC code that will help for people to feel directly connected with the work that they do? Now, I'm going to interrupt myself for a second because, not knowing the wonderful questions that would come up about AI implementation in the VR setting, what I want to say is there were a number of great comments in the chat as we moved along.

Megan Lengis highlighted one of the really big push/pull places that we're at. And what that is really the balance between being aware of and knowledgeable of AI and applying it in an ethical manner using the Code of Ethics. I do think that AI can be a powerful tool for many activities related to vocational rehabilitation. But Linda Hedinblad, my friend and colleague, who made the comment about feeling like an '80s auto assembly-line worker and being replaced by technology-- I'm not sure we're there yet.

I really do think that there are a lot of tools that can be used. For instance, if you think about using O\*NET with your clients or using the Career Index Plus with your clients, those are important and wonderful tools, but you don't just say to them, hey, go and do this. You still have that context and that human connection. And ethically, it's important to do that so that you're able to process the data and the information generated from those tools. So I'm sure more will probably come up in the chat potentially about AI, and we can process that.

But for what I have prepared for us, today I want to discuss the concept of career satisfaction broadly. I want to explore some ethical constructs that relate to career satisfaction. I want to review some of the relationship between ethical constructs and career decision-making and to look at the connection between potentially what some might describe as potentially less-energizing tasks associated with your career position and ethical responsibilities and to have a little bit of a discussion about, what kind of foundational information can I find in the Code of Ethics relating to things that I might find less energizing?

So as Dr. McGuire kind of indicated, this has been an ethics jam this has been a big focus of the work that I do, whether it's teaching our Professional and Ethical Foundations of Counseling course for more years than I care to admit, whether it's practice-- I also provide counseling and psychotherapy in private practice. And ethical constructs are integral in that area.

Leadership on various different boards, like Dr. McGuire had mentioned-- and most importantly, I think, I just find the topic fascinating and interesting. So I hope to share some of that interest with you all. And the vast majority of the research that I have conducted during my academic career has fallen in the ethics and counseling ethics and rehabilitation counseling arena as well.

So when we think about codes of ethics, it's been my experience, because of all of those roles, that people tend to think of the Codes of Ethics as rules. It's the rules. It's the playbook. And that makes sense as these are the enforceable standards of practice for our profession. Ethics committees, like the Commission on Rehabilitation Counselor Certification Ethics Committee as well as state licensure boards use codes of ethics as a basis to make decisions about whether or not a counselor acted in an ethical manner and whether there's a reason for a violation of the code to be found and then what should happen from that.

That's one use of code of ethics. But there's so much more and have greater meaning to a profession that not the least of which is a profession is not a profession unless it has a code of ethics. So it's a foundational piece and a big part of what it is that we do in vocational rehabilitation. So we had the good fortune this morning to have a discussion with our Rehab Counseling Advisory Board at GW.

And then, similarly, when Commissioner Allen was talking and during the chats of the past couple of presentations, things came up that are really big, important, contemporary issues for us in our field. So post CORE, Council on Rehabilitation Education Accreditation and post Workforce innovations and Opportunities Act, our field has evolved and emerged a bit.

So in many ways, CACREP Accreditation for Rehab Programs has resulted in a more fine focus on the counseling side still looking at rehabilitation. If you think about the CRCC exam for certified rehabilitation counselors, there's two major areas that are covered, one being counseling and one being rehabilitation. So there may have been, since the CACREP merger, a bit more of a focus on the counseling side as well.

Sometimes these changes can lead to dissonance, and people feel confused and not clear on what's the role, and what's the definition, and what's the profession look like? So we're going to talk a little bit about that today. In addition, WIOA, and just overall personnel staffing changes in the broader world of work, have led to some changes in recruitment and retention practices in VR. And I would argue, beyond VR in all employment settings, we're seeing some different changes.

What I want us to remember is that, at our core, we are and have always been counselors in the VR realm. And that's an important anchor for us to hold onto. Now, most recently, when the Code was revised, I had the good fortune to sit on the revision task force. And what we did was looked at the existing 2017 Code of Ethics, but we also pulled in codes of ethics that made sense and are aligned in different ways.

So the CRCC Code is the one that I'm speaking on, not only because today here's an hour of CRC credit but also because it's the most directly related to the practice of Vocational Rehabilitation. And it is also completely aligned with the ACA Code of Ethics and other similar codes. When we did the revision, we looked at the National Clinical Mental Health Counselor Code of Ethics. We looked at codes for psychologists, social workers, for school counselors.

But we also looked at the social justice and multicultural counseling competencies as well. I do want to point, for those of you who are ethics enthusiasts, let's call you, the ACA Code is currently in the revision phase. And I'd be surprised if there's not an announcement at the conference in April as to that status. I know for CRCC, it took us about an 18-month window of time as we were going through. And ACA started, I want to say six to nine months ago. So they're probably in that phase too, so stay tuned for more on that.

But let's talk a little bit about how all this relates to our topic, which is your satisfaction at work. And so I'm really kind of excited about this because, when I was first told we were going to have this presentation and recently checked in on the registration numbers, they were hovering somewhere around 782. This is such a nice intimate gathering of my 377 closest personal friends. So I'm going to encourage you to put a little bit in the chat box, what do you like about your job?

Something simple, think of this as free association, just like a sentence or so. Ooh, things are coming in because I've got 377 of my closest personal friends. Yes. Absolutely.

The client, helping others, direct customer interaction, sharing knowledge, and lived experience while also learning about other people's knowledge and lived experience, helping people, helping people, making a difference in someone's life, clients, being able to make an impact, working with veterans, helping clients, my co-workers, helping people, autonomy, really enjoy being able to advocate for my clients, helping others, helping people, the variety of work, the flexibility.

It's very rewarding. The people I work with-- helping people, meeting new people, constant new learning, the impact you can have on a person's life, finding solutions, co-workers, making a positive difference in clients' lives, seeing people who discovered what they can do, helping people, many of the individuals we work with. Helping people-- I think we're seeing some trends here. It is the ability to assist, the ability to advocate, it is the environment in which we work-- helping my clients, autonomy.

Autonomy was another that came up multiple times. Being part of someone's change moment-- I love that. Watching how people grow, working with children and families-- yes, so these are all-- I want to share with you what are some common-- and my friend Christine Johnson's watching the chat as well. If there's something big that we missed in there, Christine, please do let me know.

Let's talk about background information on career satisfaction. So a super simple place to start is with a dictionary of types, the APA Dictionary of Psychology. And the APA Dictionary of Psychology defines job satisfaction as the attitude of a worker toward their job often expressed as a hedonic response of liking or disliking the work itself-- the rewards, pay, promotions, recognition, or the context-- working conditions, colleagues. So that's aligned with what we just saw just a bit.

And I share that wonderful SAT word with you, hedonic for your consideration over the weekend as well. Couple more general resources or articles-- article in LinkedIn from Evan Katz defines what makes employees happy-- positive work environment, fair compensation-- and fair compensation is a fascinating one because that's really operationally defined on a very individual basis.

I was walking around my neighborhood this morning trying to get some endorphins going and get prepared for today. And I heard this line in a country song. And it was, the thing about happiness is it doesn't live in bigger houses. Now, that doesn't mean that it doesn't have a house. It just means fair compensation, we should be appropriately awarded, but that's not why people are in this field. There are opportunities for growth and development are things. Recognition and appreciation and a work-life balance and job security-- these are things that are commonly associated with job satisfaction.

Another resource, gethppy.com-- and there is no a in that, for some reason. The factors that they indicate determine workplace happiness include recognition, the right benefits, interesting work, a healthy work-life balance, growth, potential for professional development, an inclusive, transparent, and communicative environment, and autonomy. And we're going to talk a bunch about that one as well and how it relates to the Code of Ethics.

So these are all about satisfaction, but they also have a relationship to some of the more common ethical complaints filed with CRC. And I would also argue that another one should be added on. And the commissioner made reference to this too, making a difference. And I saw that so many times in the chat box that you all just shared too. Making a difference is why you're there. But let's get a little more specific, if you will, going from general to some literature pertaining to information on rehabilitation counselors and counselors in job satisfaction.

So for those of you who are sitting around thinking, what am I going to do this weekend? Maybe I'd like to read some research articles or some background information. Hey, I've got some suggestions for you. So Lu, Brickam, Jaeger, and Lo, in 2022, looked at vocational rehabilitation counselor burnout profiles and a measure of mindfulness. So they looked at these profiles for 147 VR counselors using the Counselor Burnout Inventory and the Five Facet Mindfulness Questionnaire.

They developed a model that broke burnout profiles into well-adjusted counselor, type 1 preserving counselor, type 2 preserving counselor, and the disconnected counselor. And what they found was that the profiles differed significantly on a mindfulness measure, especially in acting with awareness and on judging. Something that I pulled that I thought was significant from this is that only 18.4% of this sample fell into the category of well-adjusted counselor.

And a hypothesis for some of these burnout profile findings was about caseload size related to vocational rehabilitation. And we're going to talk about that in just a little bit as well. But if you don't find that topic to be interesting, Henry and Timm-Davis in 2022 wrote an article talking about using career values to help counseling students determine their best fit. And this relates very much back to that post-WIOA, post-pandemic, and CORE/CACREP discussion we were having before.

It's a really important topic for counseling students to find the right setting. So they suggest counselor educators should work with students in examining the setting, looking at things like comparing between settings like private practice, agency work, working in a hospital, K to 12 schools.

And they suggest looking at the duties I linked, and then thinking about the work values associated with each and then helping students to think about their own work values and the alignment between those settings and their own value with the hypothesis that, if my own internalized, work-related values are related to those work settings, I'm going to be much happier. it seems like a great person-environment match. So take a look at that if that sounds interesting to you.

But then, on the other end of the spectrum from career satisfaction is that burnout phase or predictors of intent to leave current employment setting. So Jim Herbert and some colleagues up at Penn State looked at exactly that. What are the predictors to leave the current employment setting amongst rehabilitation counselors?

Now, I do want to also point out that the publication date of this was right in the midst of the pandemic. So that's kind of a contextual variable that I want to bring to you too. But this article looks at why might people choose to leave their job setting, and what might be some ways to change that?

So what they found was that many recommendations were made to improve job satisfaction across work settings, including providing flexible work hour schedules, providing additional clinical supervision time to improve counselor skill development, allowing counselors to accrue clinical hours as part of state VR in order to receive sufficient direct client contact hours needed to become a licensed professional counselor. And they also suggested developing pre-approved, no-cost continuing education units required for CRC counselors to maintain that credential.

Now, the letter c I think is a really important one. We talked about this just this morning. Many times we think about, if we're going to opt into vocational rehabilitation counseling setting, that sometimes that might preclude us from pursuing a licensed professional counselor credential or from being in that more outpatient setting. I would recommend, and do continually, that that is not an either/or. It can be an and. So I do very much agree that this is an important consideration for us.

An even deeper dive into the topic is a dissertation looking at VR counselor job satisfaction and correlating the Five Factor Personality trait with job satisfaction. So Kiel in 2022 completed this dissertation looking at 187 VR counselors. And what the findings demonstrated were that conscientiousness, extroversion, agreeableness, and neuroticism had a statistically significant correlation with job satisfaction for VR counselors.

Now, that neuroticism doesn't mean that VR counselors are neurotic. There are several factors and indicators under that Five Factor model. So I just want to point that out as well. But now we've had a real brief walk through, what are some job satisfaction pieces of literature and findings? But let's look at the Code. And what information from the Code can we use to conceptualize our work? Let's start with some of the basics.

So when we focus on codes-- I want to go back to that-- what I'm hoping to re-imagine is that we're going to transform our view and move beyond seeing them as the rules. And let's look at thinking about this Code of Ethics as a change in our mindset from moving away from or avoiding something, like moving away from or avoiding problems at work or sanctions or punishment. Let's reconceptualize it and think about the Code as serving as an anchor to assist the process of moving toward, doing what's best for both our clients and for us.

The Code is really structured in a way where it can be of assistance for both of those. And one of the very starting points is-- one of the ethical principles that is the foundation of our Code of Ethics, and that is autonomy. And I was so happy to see it come up in the chat box too. Autonomy is feeling a sense of agency regarding decisions and tasks associated with one's career. And it's essential for career satisfaction.

So having an agreed-upon system of expectations, which is really the Code, can assist a counselor, can assist a supervisor or a leader, or anyone involved in the process of rehabilitation provision to critically think and to make decisions aligned with ethics and best practices. So I tell our students all the time, being confident in our fund of knowledge and using critical decision-making to implement that fund of knowledge is a major task associated with rehabilitation counseling.

What you know is an important part of quality assurance, and it's an essential part of transforming practice to a more effective approach. A lot of times, we feel like, I'm just one person. And the rules or the policies, say, that I have to do this-- I am not here to advocate for you not to follow policies and procedures. But what I am saying is, if something doesn't make sense, there are people in your organization, I am certain of it, who are interested in hearing that and hearing why and understanding maybe even within the scope of the Code of Ethics why an approach makes or does not make sense.

I would like for you to think of yourselves as having the potential for being ethical agents of change as we go through. So let's talk a little bit more about some of the structure of the Code in the beginning parts. So the defining the profession statement is a new addition to the 2023 Code of Ethics. And the ethics code revision task force felt it was really important, given all of those contexts of change that we have been discussing so far, that we have a statement saying, hey, what do we do as rehabilitation counselors?

And so an important piece I'd like to pull from that is that CRCs work with the whole person to help them understand the functional implications of their disability and the environmental constraints that may occur. My good friend Christine Johnson pointed out the importance of language there. There's a difference between thinking about functional implications and functional limitations. And words like that impact our ability to conceptualize the great changes that are in store for the clients that we work with.

So it's important for us to realize that this defining-the-profession statement is what we do down to the fact that CRCs or rehabilitation professionals are unique in comparison to other counseling professionals given their interaction with individuals with disabilities and that no other counseling profession is primarily dedicated to working with individuals with all types of disabilities. Doesn't mean that other counseling specialties don't work with people with disabilities. It just means that certified rehabilitation counselors are uniquely trained to do so.

And frequently, we'll have conversations with people in various different groups or organizations or what have you. And we say, well, do you work with people with disabilities? And they say no, we don't work with people with disabilities, which is nonsense, because that just means they don't know that they work with people with disabilities just based upon population demographics. So defining the profession is really important.

The counseling relationship is the very first part of the Code. So sometimes we get into organizations, and we feel like, I'm not doing what I was trained to do, or I'm not fully focusing on-- all of that stuff that everybody said-- helping people, advocating for people, making the change, being an agent of change with people.

But what's important to remember is the very starting point of the Code of Ethics says that we work in cooperation with clients to promote client growth, welfare, and support them in developing and progressing towards their goals, that we understand that trust is a cornerstone of the counseling relationship and that CRCs have a responsibility to respect and safeguard the client's right to privacy and confidentiality. We respect the rights of clients to make their own decisions about matters that impact their own lives. And we are expected to respect the diverse cultural backgrounds and identities of clients they serve, and we don't discriminate in their provision of rehabilitation counseling services based on protected identities.

So sometimes, if you're having a day where you're, like, I am not sure what it is that I'm doing here, go back to this very beginning part. This is what you're doing in vocational rehabilitation. And this is the important part of the work that you do. And it's codified in describing what you should be doing.

Further into that area of section A.2 looks at all of the areas within there-- look at the welfare of individuals served. So this is where the individualized and collaborative part of our work happens, including those counseling plans that we develop that are individualized and collaborative. And it reminds us to regularly review those plans. It looks at the primary responsibility. The lead-off is the primary responsibility of CRCs is to respect the dignity of clients and to promote their welfare.

We look at other things too like employment but also, outside of work, integration into the community, figuring ways for us to be able to integrate that and then client autonomy, that clients make decisions on their own behalf. So all of these things should be foundational pieces of the work that we're doing. And we should feel confident and enthused that we are able to engage in these activities.

I know you have lots of other things that may provide distractions and may not be as enthusiasm-generating. But this is the anchor. This is the stuff to come back to that's really exciting about what you all do.

Additionally, section A.2 looks at respecting diversity and looks at concepts of respect and culture and also, most importantly, acknowledging that we do not condone or engage in the prejudicial treatment of an individual or group based on their actual or perceived membership in a particular group, class, or category. So again, another foundational reframing thought for us as we're moving through our day to day work, as is the next section pertaining to-- the next subset pertaining to section a looking at client rights.

Professional disclosure statement-- so when we start working with our clients, they have every right to know who we are and why we are the one that's qualified to provide the services and to say that we're going to assist them toward their goals. So that's just a foundational. That's the beginning of a relationship, any relationship that you have. And I don't mean to equate a counseling relationship with every relationship, but any relationship you start begins with, here's a little bit about me. Tell me a little bit about you. So it completely makes sense.

And informed consent is one of the foundational pieces of everything we do. And this is voluntary. People are coming here for collaboration and the provision of services towards their goal. But in no way do we ever say, you must be. Sometimes people transition in and transition out, and that's all part of the process. They have the ability to do so.

So then we come to the important-- we've talked about a lot of the dos. Then there's the don'ts. And I would love to sit here having been engaged for a number of years with the Ethics Committee for CRC but also working with our professional association and the state and looking at the state licensure board, I would love to tell you that these are simple and should go without saying. But all of the areas relative to sexual or romantic relationships with current clients with former clients, with vulnerable clients, unfortunately, still comes before ethics committees and ethics boards on a regular basis.

And more broad and positive focused areas-- extending professional boundaries. And that is our ability to look at, we may serve different roles in different people's lives and may engage in activities-- like, for instance, a lot of us work with transition-age students. It is not entirely inappropriate for you to go to a graduation for someone that you have worked with for quite a period of time to get across that finish line.

But you have to think about discussing in advance, how will you explain what you're doing there? If the person doesn't want to say that you're their counselor, that's going to present an issue. Think about what could go wrong. Think about documenting this in advance and thinking about solutions for what could happen if there are challenges there too. So all of these are kind of like the dos and the don'ts that we've talked about the real basic ones so far.

But now I want to ask you, why did you want to be a rehabilitation counselor? Let's see some things, again. Short sentence in the text box.

Seeing success in the community and being part of a team to help people get there. Meeting with people with disabilities for the first time and giving them hope. Yes, there were a number of statements in here about hope. And I love that, that the application of that construct to the work that we do-- offering possibilities, supporting people to reach their potential, helping people, seeing people achieve their goals, the ability to help others change their lives for good, the-- yeah, to be that one person who might have-- or that one engagement with VR that sticks.

Yeah, autonomy and helping others, coordinating with other providers, changing people's lives, finding strengths, and being challenged in the workplace, the ability to serve others and address real needs regarding education, training, and employment, seeing our impact and feeling consumers' gratitude, seeing people achieve their goals. Sometimes 5:00 PM. Yeah, you know what? We are not counseling robots. So sometimes 5:00 PM is the motivate for that you need to get through the day.

Flexibility to help people, compassionate about sharing community resources, helping consumers, functioning as a resource, sharing knowledge-- not only is it lovely for me to go through and see all of these like-minded approaches. But it's so great to see so many names that I've known from the past and some new ones that I don't know. And thanks for being here. Continuing learning, exchanging, mentoring a new counselor, changing lives-- all of these are really great and positive things.

So let's look a little bit more back at the Code. And my friend, Christine, if there's something big that I missed in there because I didn't scroll all the way to the bottom, please let me know.

CHRISTINE: Yeah.

ROB FROEHLICH: OK. So again, going back to that defining the profession-- so many of the things that you put in the chat box very much relate to your selection of your career based upon those statements that you made. But a lot of what comes to mind when I think about those topics that you just shared is the area looking at advocacy. So that's section C of the Code.

Each one of the sections of the Code-- if it's been a while since you've read the Code, let me just remind you, each one of the sections has almost like an abstract for, here's what you're going to read in this particular section. So frequently going to those sections before you go to the subsets is helpful just to get a spirit of what's here.

But in terms of advocacy, CRCs are aware of and sensitive to the needs of individuals with disabilities and recognize that individuals with disabilities are disproportionately represented in communities of color and are more likely to experience poverty, homelessness, trauma, systemic racism, and other adversities. So the activities, that CRCs advocate for at the individual group and institutional professional and societal levels are to provide opportunity and access; to improve the quality of life for individuals with disabilities, to remove potential barriers, be they societal, institutional, environmental; to the provision of access to services, to address stigma.

So much stigma is associated with mental health-related disabilities, but disability just in general, to foster systems change when appropriate and to promote diversity, equity, inclusion, and belonging, while maintaining an awareness of the intersectionality of client identities throughout their advocacy efforts. So in a nutshell, in a lot-- well, it's not a nutshell-- in a lot of words that really states some of the themes that you all shared in the chat box too.

But looking at it on a more one-on-one subset-by-subset area, the first section of advocacy and accessibility looks at attitudinal barriers and indicates that we recognize and address attitudinal barriers that inhibit the growth and development of your clients, including stigma, stereotyping, and discrimination.

Additionally, a section are looking at empowering the client ensures-- and think this wording is really important as well-- ensures that the voice of the client is heard, valued, and given full consideration by supporting informed choice and client engagement in decision-making and treatment planning. Additionally, we foster self-advocacy skills of clients to achieve maximum independence. Sometimes we get so super excited about advocating for people that we forget that people can advocate for themselves and that we can be a really important part of that process and collaborating to even more appropriately or fully prepare people to advocate on behalf of themselves.

Section C.1.d looks at organizational and system advocacy. And some thoughts there include considering how actions taken by your own organization as well as cooperating organizations may impact clients. And then, acting as advocates for clients who can't self-advocate and working to combat ableism and systems of oppression across policies, procedures, and practices-- so sometimes when you are feeling that you're in the midst of something that's very frustrating and seems very either inaccessible or that there's a big challenge for your client, know that this is part of the anticipated process and that the ethical counselor is going to think about, what can I do with that?

And how can I engage with decision-makers to talk about this challenge and to maybe collaboratively advocate with your client? So those are some of the beginning advocate advocacy and accessibility areas.

But I also want you to think about the second section of advocacy and accessibility. And that is looking at accommodations. One of the huge, important pieces of work that we do is working with people to find reasonable accommodations to work around any kind of challenges that they may be experiencing. So this is to address the barriers encountered by people with disabilities and to ensure fair and equitable access to personal, career, and independent living goals and that we facilitate the provision of necessary, appropriate, and reasonable accommodations in accordance with the law.

So it's just such an important, essential function of the work that we do. Other areas within the advocacy and accessibility section include barriers to services. So we collaborate with clients and/or other stakeholders to identify and develop a plan to address physical, programmatic, structural, attitudinal, or technological barriers to services to ensure fair and equitable access to service.

Similar wording for the areas looking at barriers to community inclusion-- and I just want to underscore these because the things that you're pulled and driven to do that you described in the text box are absolutely supported by your Code of Ethics.

A bit more on C.1 is looking at this adequacy of services. And this is an addition to the 2023 Code of Ethics. And it is not intended that-- it's intended to be opening the door to a conversation. And this is that CRCs advocate for a client to professional ratio and length of service that are sufficient to allow for a thorough and effective provision of services to meet the needs of the client. So this, we felt was important to add in to encourage dialogue relative to using resources in the most appropriate way for counselors to be able to work with a number of people and for a length of time that makes the most sense given the goals.

That doesn't mean that you, as a counselor, go in and say, hey, I'll work with x number of clients. It means, let's talk about how can we most efficiently, within our agency, work to serve the needs of people that I, the counselor, am working with. So I want to ask you, are there issues you commonly encounter for which you wish you had more guidance? Again, if you could try to keep it to a little sentence.

This one seems a little tougher. Oh, no, no, I'm sorry. I just didn't scroll far enough. Informed choice on what the counselor can do, financial participation-- Christine reminded me have 20 more minutes. Graduate students, to take the NCE and MCE-- [Mumbling] OK.

OK, so let me tell you what I thought would be helpful too for us to cover as we're kind of moving through. Sometimes there are transitions and changes in societal expectations. And sometimes we work in state-- we all work likely work in state agencies-- politics come into play. The multicultural considerations section of the code is an entirely new section. There's been content that has always focused on multicultural considerations and value in position that has been covered throughout the Code in areas that makes sense.

However, as a revision task force, we felt that it was important to have a specific area looking at multicultural considerations, looking at things like the impact of client intersectionality and identity. We're all more than just one variable. And how does that interact for our clients? And how does that interact between us, the counselor, and our clients? What is our awareness of our client's worldview, and how does that impact the services that they need and the services that we provide?

How do we avoid microaggression? How do we avoid using language that's offensive and not informed from our clients' perspectives? Looking at our own implicit bias-- and if anybody says they don't have bias, that's just not entirely true, because we all have bias. But it's not the fact of having bias, but it's what do we do with that bias in the counseling setting and in the counseling room?

Recognition and respect of client values is something else that can anchor us in our thoughts relative to the work we do with our clients. Thinking about our own cultural competence and our own development, our personal awareness of our culture, our practices of anti-racism, our thoughts on social justice and how we implement that, our thoughts on cultural humility and our use of affirming language with the clients that we work with; avoiding discrimination, thinking about religion and how that intersects with employment and the work that we do with our clients toward their goals-- all of these things are really important.

And in an environment where frequently politics comes in more and more, it's very helpful to have a centralized piece of information that says, here's what rehabilitation counselors do. And here's what they are ethically expected to do. So I share that with you too. And thinking about diversity, equity, and belonging in the coworker relationship, this really goes back to topics that relate to happiness in the work setting.

Earlier, we talked about belonging and transparency. This is an important section of the code that relates to that area. One more text chat thing. We're going to get as far as we get. What tasks do you least like to do in your professional role?

Paperwork, high caseload, paperwork, paperwork, case management, fiscal authorizations, paperwork, paperwork, paperwork, paperwork, documentation, difficult feedback in cases-- that's a tough one. Returning calls, paperwork, paperwork-- I think we see a little bit of a theme, paperwork, consumed by paperwork, paperwork, paperwork, paperwork.

All right, so it's not out of the realm of surprise to me because that's exactly what I thought you were going to say. So the Code has specific sections looking at dealing with data management and documentation. So sometimes it's super helpful to know why you're being asked to do something in order to do it. So the Code actually says that this is a requirement as is all sorts of policies and procedures and federal requirements and fiscal responsibility and whatnot.

But CRCs include sufficient and timely documentation in the records of their clients to facilitate the delivery and continuity of needed services. And then also, if there's mistakes, we can go back, and we change them. One thing that I did see in the chat before when we were talking about AI, that was a recommendation. And that was doing note-taking-- having AI do note-taking. I don't know that I'd be entirely comfortable with that for a number of reasons, not the least of which is the confidentiality.

Somebody mentioned, really, if you're using client names and whatnot, I'm not sure that you can really kind of put it in anywhere. But also, it's essential for me as the counselor to go back and think about, what did I do with this person? And what are the next steps, and what are those subjective/objective assessment and plan kind of pieces of information that you use in your various case management systems?

So it's not having supervisors that are being difficult and expecting you to do this. This is really part of the Code of Ethics too. So if that's helpful in some way-- still doesn't mean that you're going to all of the paperwork and documentation. But it really is, it's part of our ethical responsibility.

Policies and procedures are potential disconnects as well-- so a couple of things that I want to highlight to you-- one is professional courtesy and consideration. And the wording of this looks at that we're not going to-- that we acknowledge the expertise of other professional groups and are respectful to practices and that we don't question the competency or ethics of other professionals or agencies in the discussion with our clients unless it's done to protect the client's safety and well-being and is well documented.

A lot of times, a lot of complaints that come to the ethics board look at individuals being disgruntled with systems or with policies or procedures or whatnot. So it's just important not to drag our clients into that. And I want to bring that there too. Also, negative employment conditions-- we alert our employers of unethical policies and practices and have those discussions that I talked about before. And you go through a process of informal resolution.

The very first thing is to talk with the decision-makers all the way down to, what's the last step? There is ultimately voluntary termination of employment may be the necessary action. I don't say that lightly. I don't say, hey, just go quit your job because you don't agree with things. I know it's not that simplistic. But if you find yourself in a place that is entirely incongruent with your ethical practice and with your understanding, then you have to make a decision. Is this the right place for me?

Other things, I guess-- I'm going to skip over this next slide. But one thing I didn't expect to see in there-- or maybe it's just because we just don't really talk about this. But we all talk about self-care. We talk about our clients all the time. We're, like, you really need to engage in self-care. You need to practice self-care strategies. But when I talk to counselors or when I talk to students, they're, like, oh, yeah, I'm just kind of too busy for that.

This is a really important piece of the work that you do, monitoring your own effectiveness, monitoring-- are there times where your own judgment becomes impaired, and you really need to think about self-care. And the reason why I have this here is that self-care activities to maintain and promote your own emotional, mental, and spiritual well-being to best meet your professional responsibilities is an ethical imperative for you all.

I want to just real quickly go through a couple of things because I want to have at least a couple of minutes while we're kind of bumping up on it. But other things that I want to draw your attention to are supervision, training, and teaching. My wonderful colleagues at 4:00 PM are going to talk a little bit about clinical supervision. But section I gives all of the outline of what should be happening, what should not be happening, what those expectations look like.

Technology, social media, and virtual counseling-- boy, did we talk about technology before? But I also want for us to think about that some clients may find technology-based services to be convenient and a preferred method of service delivery. But we have to recognize that electronic modalities may not be well suited for all clients and all situations. I'm someone who does provide teletherapy and distance counseling, so I'm a real believer in it. But it is not for everyone.

Being able to screen who it is well suited to and who it's not is an important part of the work that we do. Lots of other stuff in the technology and social media section. The last section of the code is ethical decision-making and resolving ethical issues. There are several contemporary decision-making models that CRC houses on their website. And I have the link to that for you.

But some simpler decision-making things-- is it legal? How would it look in the news? Does it comply with my agency's/organization's values? Am I treating others as I want to be treated? Am hesitant to tell other counselors-- all the way down to-- and it depends on the relationship you have with your mom as to whether this one makes sense, or not maybe you don't trust her judgment. But if you do, what would your mom say?

So that leaves us with about five minutes, give or take. Questions anyone? Somebody has self-care scheduled for 4:00 PM today, love that. Addie, you go.

MAUREEN MCGUIRE: I can read a couple comments. Great presentation, food for thought-- let's see what else we've got here. I think, as a profession, we have to also think about ourselves in terms of advocacy and self-care. Dr. McGuire, there's a good one in here too. Somebody said that there's a shortage of CRC/VR counselors on the team. And I get asked this question a lot too. What do I do if I'm the certified rehabilitation counselor, but nobody else on the team is a certified rehabilitation counselor.

ROB FROEHLICH: I still give the same guidance that this is a really helpful anchoring document. So even if someone is not-- maybe it's your supervisor that's not a certified rehabilitation counselor. And that's OK. But being able to discuss this information with that individual-- it's not a hierarchy. It's not that type of stuff. It's like, let's have a really informed discussion based upon the resources that we have.

MAUREEN MCGUIRE: You'll appreciate this one. Excellent and uplifting presentation. Who knew ethics could be so much fun?

ROB FROEHLICH: Who knew? Who knew?

MAUREEN MCGUIRE: We don't hear that very often. And our friend Mary Nunnally said, as always, love Rob's enthusiasm for presenting ethics to us. [LAUGHS]

ROB FROEHLICH: I had to look back. Hey, John Humphreys, thank you for saying that. I was, like, oh, is this somebody that I know and they're being nice to me? Thank you for saying that. It was uplifting. I appreciate that.

MAUREEN MCGUIRE: Also, great points about the importance of consultation, very good, very good. OK. Thank you so much, Dr. Froehlich.

ROB FROEHLICH: Hey, it was wonderful talking with you all about ethics. And if you need anything, my contact information is on the last slide. And I'd be happy to talk ethics with you at any point in time. My colleagues are going to do a great job now talking about clinical supervision. But I'm going to engage in some self-care too, and I'm going to slip off now too. So best wishes. Thanks for spending the afternoon together. Have a good weekend.

MAUREEN MCGUIRE: Thanks.

SPEAKER: Thanks, Dr. Froehlich.