STATE OF CONNECTICUT
STATE ETHICS COMMISSION

ADVISORY OPINION NO. 90-14

Outside Treatment of Patients by Rehabilitation Counselors II

In Ethics Commission Advisory Opinion No. 88-20, the Commission ruled that counselors in state-run alcohol rehabilitation centers could not participate in a patient's aftercare treatment program for compensation if the patient was treated at the center which employed the counselor. The Commission stated:

> As part of their official duties, rehabilitation counselors are responsible for recommending aftercare programs and for coordinating and supervising the activities of ex-patients. If a counselor recommends himself or herself as the aftercare provider, an obvious violation of the use of office provisions of subsections 1-84(a) and (c) will have occurred. If a counselor, for compensation, provides an ex-patient's private aftercare or other treatment, the counselor will become officially responsible for monitoring and assessing the effectiveness of his or her own outside work. Clearly, the counselor will have accepted outside employment which will impair independence of judgment as to official duties in violation of subsection 1-84(b).... In addition, rehabilitation counselors acquire substantial confidential information in the course of their official duties. They possess such information regarding the identities, release dates, and treatment needs of their patients. It would seem virtually impossible for a counselor to seek or accept private employment treating his or her ex-patients without, at least inadvertently, making use of this confidential information in violation of subsection 1-84(c).

Ethics Commission Advisory Opinion No. 88-20, 50 Conn. L.J. No. 23, p. 36 (December 6, 1988).

Ms. Carol Collette-Gamache, a rehabilitation counselor at the Boneski Treatment Center ("Center") has asked the Commission whether Advisory Opinion No. 88-20 prohibits her or

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her husband from continuing to treat a patient upon his or her release from the Center, if the individual was a patient of hers or her husband's prior to entering the Center for treatment. Ms. Collette-Gamache has stated that, in this situation, neither she nor her husband would have referred the patient to the Center for treatment and that she would not be directly involved with the patient's treatment while he or she was at the Center.

In Advisory Opinion No. 88-20, the Commission acknowledged that counselors who have already developed a relationship with a patient may be the most qualified to treat that patient. The concerns expressed in Advisory Opinion No. 88-20 do not seem as troublesome in the scenario outlined by Ms. Collette-Gamache. If she is not involved with the patient's care at Boneski, she would not be involved in monitoring his or her aftercare. Regardless of whether Ms. Collette-Gamache or her husband referred the patient to the Center, since the patient had already gone to Ms. Collette-Gamache and/or her husband prior to entering the Center, the concerns about the use of confidential information to obtain patients are also not applicable. Therefore, in the limited circumstances Ms. Collette-Gamache has presented to the Commission, it would not be a violation of the Code of Ethics for her or her husband to continue treating a patient upon release from the Center if she or her husband had treated that patient prior to his or her entrance into the the Center's program.

By order of the Commission,

(Rabbi) Emanuel Menitoff
Rabbi Michael Menitoff

Rabbi Michael Menitoff
Chairperson

Dated 5-7-90