

Ethics for Rehabilitation Professionals

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May 18, 2022

Swedish Hospital

Part of  **NorthShore**

Course Audience Poll

Results

What's your profession?

- PT = 83.2%
- OT = 10.7%
- PTA = 5.3%
- OTA = 0.8%
- SLP = 0.0%

Where do you work?

- Edward/Elmhurst = 14.2%
- NorthShore (Legacy) = 32.1%
- Northwest Community Hospital = 25.4%
- Swedish Hospital = 24.6%
- Other = 3.7%

Swedish Hospital

Part of  NorthShore

Course Agenda

- 4:50 pm – 5:05 pm Attendee Arrival
- 5:05 pm – 5:10 pm Overview, Agenda, Objectives
- 5:10 pm – 5:20 pm Ethics Scenario #1
- 5:20 pm – 5:50 pm What is Ethics?
 - Morality vs Ethics vs Law
- 5:50 pm – 6:00 pm Medical Ethics
- 6:00 pm – 6:15 pm Professional Code of Ethics
 - AOTA, APTA, ASHA
- 6:15 pm – 6:25 pm Break 10 mins
- 6:25 pm – 6:40 pm Models for Resolving Ethical Dilemmas
- 6:40 pm – 6:55 pm Ethics Scenario #1 Revisited
- 6:55 pm – 7:15 pm Ethics Scenario #2
- 7:15 pm – 8:00 pm Ethical Questions & Discussion

Course Objectives

Upon completion of this course participants will be able to:

- ❖ Describe the five major ethical principles
- ❖ Describe the RIPS model for addressing ethical issues
- ❖ Identify resources to assist with ethical questions

Scenario #1

Mark is a resource PT who works at a large hospital system that has productivity standards. The standards have increased, and therapist productivity directly affects the amount of work that they're offered. If a therapist is consistently below the standard, they will be assigned fewer shifts. Mark has heard from other resource therapists that they feel this encourages staff to pad their stats, as the individual patients do not pay for the capitated therapy services. By billing more units per patient, they increase their productivity numbers.

Let's consider these questions, as we explore the topic of Ethics:

What is Mark's obligation as a therapist? As a co-worker? As an employee?

What is Ethics?



What is Ethics?

- a system of moral principles- the rules of conduct recognized in respect to a particular class of human actions or a particular group culture, etc.
- moral principles, as of an individual – that branch of philosophy dealing with values relating to human conduct, with respect to rightness and wrongness of certain actions and to the goodness and badness of the motives and the ends of such actions
- a complex of moral precepts held or rules of conduct followed by an individual
- At its simplest, ethics is a system of moral principles. They affect how people make decisions and lead their lives.

Morality vs Ethics vs Law

Morality as it is normally understood is a set of principles that outline correct (virtuous, proper) behavior for an individual. Usually morality is based in some philosophy, and often that philosophy is based in religion. Morality aims at the perfection of the individual through ‘right understanding’ and ‘right action’, though it often has social and interpersonal implications.

Quora.com (Ted Wrigley 1-18-2017)

Morality vs Ethics vs Law

Ethics as it is normally understood is a set of principles that outline correct (virtuous, proper) behavior within a community or society. Ethics is also usually based in some philosophy, though generally speaking it is more secular and analytic. Ethics aims at the perfection of a society through proper pro-social understanding and behavior.

Quora.com (Ted Wrigley 1-18-2017)

Morality vs Ethics vs Law

Law is a set of formal rules adopted by a community or society that are meant — ideally — to reflect and enforce moral or ethical principles. In its best sense law is intended to encourage moral or ethical behavior; in its worst sense law becomes a mere tool for punishing transgressions against moral or ethical authority.

Quora.com (Ted Wrigley 1-18-2017)

Where do ethics come from?

- Work Ethic
- Business/Corporate Ethics
- Medical Ethics
- Professional Code of Ethics

Ethics in Health Care

Arises out of the imbalance of power in the provider-patient relationship

Core Value: Trust: Fiduciary Relationship

- Placing patient's interest before self-interest
- Virtues and Vices
- Actions

Ethics in Health Care

The Five Ethical Principles

- Duties
- Based on reason, not religious belief
- Derived from nature of professional-patient relationship
 - Beneficence
 - Autonomy
 - Non-Maleficence
 - Fidelity
 - Justice

Ethics in Health Care

The Five Ethical Principles

Beneficence

Acting in a manner that promotes the welfare of the client

Autonomy

Acting in a manner that respects the client's freedom to control their own lives

- Individuals have the right to know their diagnosis/prognosis and determine the best outcome for themselves, based on their beliefs and values
- For patients, leads to Informed Consent: avoidance of Medical Paternalism

Ethics in Health Care

The Five Ethical Principles

Non-Maleficence

- First do no harm
- Prevent harm from happening
- Either doing or omitting actions
- Bottom line: ensure that the balance of benefit and risk/harm is in the patient's favor

Ethics in Health Care

The Five Ethical Principles

Fidelity

- **Veracity:** telling the truth
- Promise-keeping, for example
- **Confidentiality:** protecting harmful, shameful or embarrassing information about patients and colleagues, based in right to privacy
- **Don't exploit:** sexually, cause or hasten death, financially, emotionally

Ethics in Health Care

The Five Ethical Principles

Justice

- Treating patients/clients fairly based on need
 - No discrimination based on age, gender, race, religion, sexual preference, social factors
- Treat equals equally
 - When treatment is unequal, be clear about criteria and priorities and transparent about applications
- Distributive Justice
 - Fair distribution/allocation of benefits/resources

One way to operationalize the principles: the four boxes (Jonson, Siegler, Winslade)

<p>Medical Indications: BENEFICENCE</p> <ol style="list-style-type: none"> 1. Pt's medical problem? History? Diagnosis? Prognosis? 2. Is problem acute? Chronic? Critical? Emergent? Irreversible? 3. What are goals of treatment? 4. What are probabilities of success? 5. What are plans in case of therapeutic failure? 6. In sum, how can this pt. be benefited by medical and nursing care, and how can harm be avoided? 	<p>Patient Preferences: AUTONOMY</p> <ol style="list-style-type: none"> 1. What has pt expressed re preferences for tx? 2. Has pt been informed of benefits & risks, understood, and given consent? 3. Is pt mentally capable & legally competent? What is the evidence of incapacity? 4. Has pt expressed prior treatment preferences, e.g., in an advance directive? 5. If hospitalized, who is the appropriate surrogate? Is the surrogate using appropriate standards? 6. Is pt unwilling or unwilling to cooperate with medical treatment? If so, why? 7. In sum, is pt's right to choose being respected to extent possible in ethics and the law?
<p>Quality of Life: NONMALEFICENCE</p> <ol style="list-style-type: none"> 1. What are prospects, with or without tx, for a return to the pt's normal life? 2. Are there biases that might prejudice providers' evaluation of the pt's quality of life? 3. What physical, mental, & social deficits is the pt likely to experience if the tx succeeds? 4. Is the pt's present or future condition such that to continue life might be judged as undesirable by him/her? 5. Is there a plan and rationale to forgo treatment? 6. What plans are there for comfort & palliative care? 	<p>Contextual Features: JUSTICE</p> <ol style="list-style-type: none"> 1. Are there family issues that might influence treatment decisions? 2. Are there provider issues that might influence treatment decisions? 3. Are there financial and economic factors? 4. Are there religious and/or cultural factors? 5. Any justification to breach pt confidentiality? 6. Are there problems of allocation of resources? 7. What are legal implications of treatment decisions? 8. Is clinical research or teaching involved? 9. Any provider or institutional conflicts of interest?

Professional Code Of Ethics

AOTA Code of Ethics (2015)

Principle 1. Occupational Therapy personnel shall demonstrate a concern for the well-being and safety of recipients of their services. **Beneficence**

Principle 2. Occupational Therapy personnel shall refrain from actions that cause harm. **Non-maleficence**

Principle 3. Occupational Therapy personnel shall respect the right of the individual to self-determination, privacy, confidentiality, and consent. **Autonomy**

Principle 4. Occupational Therapy personnel shall promote fairness and objectivity in the provision of occupational therapy services. **Justice**

Principle 5. Occupational Therapy personnel shall provide comprehensive, accurate, and objective information when representing the profession. **Veracity**

Principle 6. Occupational Therapy personnel shall treat clients, colleagues, and other professionals with respect, fairness, discretion, and integrity. **Fidelity**

Professional Code Of Ethics

APTA Code of Ethics

Principle 1. Physical Therapists shall respect the inherent dignity and rights of all individuals (Core Values: **Compassion, Integrity**)

1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability **Justice**

Principle 2. Physical Therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients (Core Values: **Altruism, Compassion, Professional Duty**)

2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interest of patients/clients over the interests of the physical therapist **Beneficence**

2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research **Autonomy**

Principle 3. Physical Therapists shall be accountable for making sound professional judgments (Core Values: **Excellence, Integrity**)

3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings **Non-Maleficence**

Professional Code Of Ethics

APTA Code of Ethics - continued

Principle 4. Physical Therapists shall demonstrate integrity in their relationships with patient/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public (Core Value: **Integrity**)

4A. Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations **Fidelity/Veracity**

Principle 5. Physical Therapists shall fulfill their legal and professional obligations. (Core Values: **Professional Duty, Accountability**)

Principle 6. Physical Therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors (Core Value: **Excellence**)

Principle 7. Physical Therapists shall promote organizational behaviors and business practices that benefit patients/clients and society (Core Values: **Integrity, Accountability**)

Principle 8. Physical Therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally (Core Value: **Social Responsibility**)

*** The APTA “Standards of Ethical Conduct for the Physical Therapist Assistant” includes the same principles*

Professional Code Of Ethics

ASHA Code of Ethics (2016)

Principle of Ethics I Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

C. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect. **Justice**

H. Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, technology employed, and products dispensed..... **Autonomy**

P. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities..... **Fidelity**

Professional Code Of Ethics

ASHA Code of Ethics - continued

Principle of Ethics II Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

D. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.

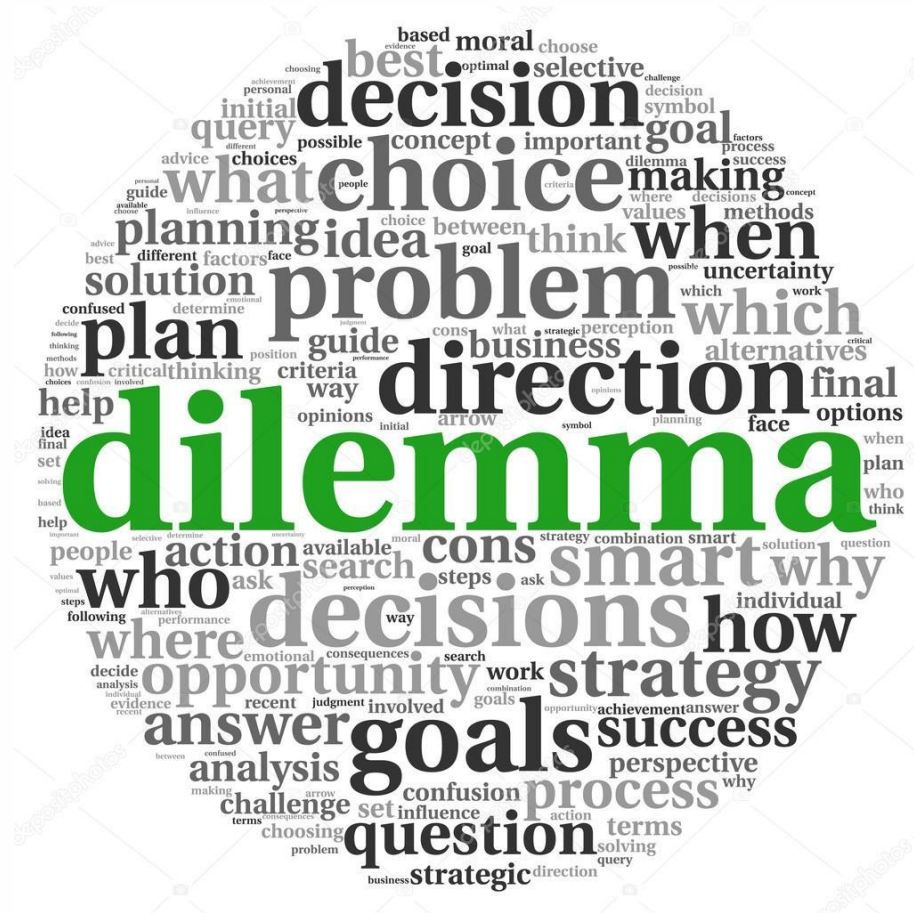
Principle of Ethics III Individuals shall honor their responsibility to the public when advocating for unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

E. Individuals' statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products for sale, and about research and scholarly activities. **Fidelity**

Principle of Ethics IV Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

L. Individuals shall not discriminate in their relationships with colleagues, assistants, students, support personnel, and members of other professions and disciplines on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, dialect, or socioeconomic status. **Justice**

How Do We Resolve Ethical Dilemmas?



Models for Ethical Decision Making

Ethical Decision Making
Remember these key steps when you have an ethical dilemma.

I D E A

Information gathering and **Describe** situation
 a) gather information/facts on the case
 b) describe the different emotions
 c) identify ethical issues

Explore options and analyze
 d) explore options and consider their strengths and weaknesses

Act on your decisions and **evaluate**
 e) develop an action plan
 f) evaluate the plan
 g) self-evaluate your decision

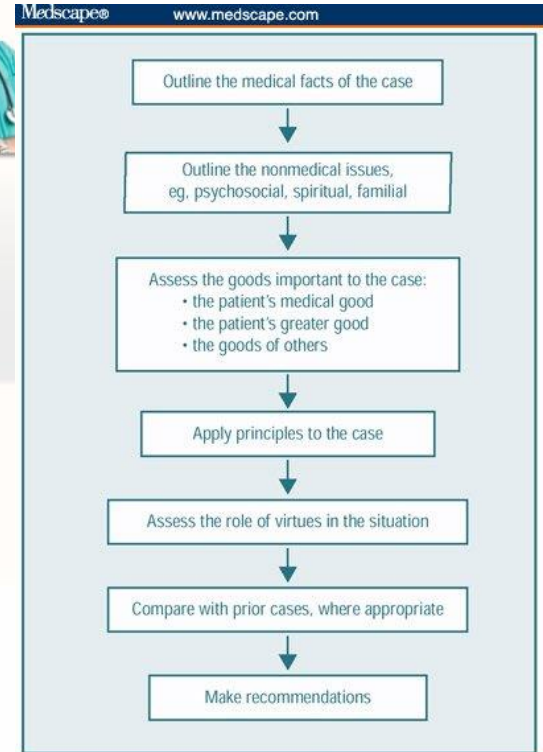
Remember
 • document the actual plan in the chart
 • seek help if necessary and consult with the person you report to

Critical Care Nursing
Nursing 203
Syllabus Week 1.7

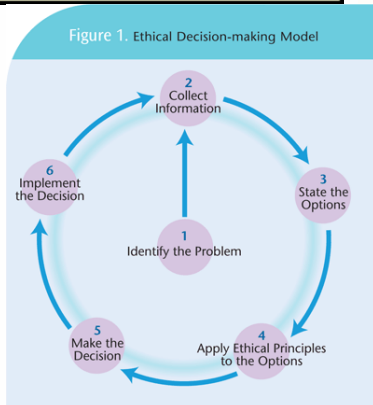



Steps in Ethical Decision Making

1. Identify the health problem.
2. Define the ethical issue.
3. Gather additional information.
4. Delineate the decision maker.
5. Examine ethical and moral principles.
6. Explore alternative options.
7. Implement decisions.
8. Evaluate and modify actions.



Source: Cancer Control © 2002 H. Lee Moffitt Cancer Center and Research Institute, Inc.



Dimensions of Dental Hygiene, June 2010



Professional Code Of Ethics

Kidder's work and others have been incorporated into an ethical decision making framework for therapists

The ethical decision making process has 4 steps

1. Recognize and define the ethical issue
2. Reflect
3. Decide the right thing to do
4. Implement, evaluate, reassess

Step 1. Recognize and define the ethical issue

The Realm – Individual Process – Situation (RIPS)
Model can be used in this step.

Models for Ethical Decision Making

Realm-Individual Process-Situation (RIPS) Model

- Designed to consider organizational and societal issues
- Emphasis on process, not only decision
- Useful when there are not necessarily two competing ethical principles

Realm	Individual Process	Situation
Individual Organizational/Institutional Societal	Moral Sensitivity Moral Judgment Moral motivation Moral Courage	Issue or problem Dilemma Distress Temptation Silence

Models for Ethical Decision Making

Realm-Individual Process-Situation (RIPS) Model

Individual

The Individual realm is concerned with the good of the patient/client and focuses on the rights, duties, relationships and behaviors between individuals. It deals with the least complex problems.

Organizational/Institutional

The Organizational/Institutional realm is concerned with the good of the organization and focuses on structures and systems that will facilitate organizational or institutional goals.

Societal

The societal realm is concerned with the common good and is the most complex realm.

Models for Ethical Decision Making

Realm-Individual Process-Situation (RIPS) Model

Moral sensitivity

Involves recognizing, interpreting, and framing ethical situations

Moral judgement

Requires deciding on the right versus wrong actions. The process involves generating options, selecting, and applying ethical principles.

Moral motivation

Places a priority on ethical values over other values, such as self-interest, status, or financial gain. Professionalism is a primary “motivator” for ethical behavior.

Moral courage

Involves implementing the chosen ethical action, including developing a plan and persevering through barriers and adversity

Models for Ethical Decision Making

Realm-Individual Process-**Situation** (RIPS) Model

Issue/problem

Important values are present or may be challenged

Dilemma

Two alternative courses of action may be taken, both of which fulfill an important duty, and it is not possible to fulfill both obligations. Kidder describes this as “right vs right” decision

Distress

You know the right course of action but are not authorized or empowered to perform.

Temptation

Choice between a “right” and a “wrong,” in which you may stand to benefit from doing the wrong thing.

Silence

Ethical values are challenged, but no one is speaking about this challenge to values

Models for Ethical Decision Making

Rushworth Kidder has written numerous books on ethics and ethical decision making. In his book How Good People Make Tough Choices: Resolving the Dilemmas of Ethical Living, He describes nine checkpoints for Ethical Decision Making.

He suggest 4 tests to assess right vs wrong:

- The Legal Test – Is it legal?
- The Stench Test – gut check
- The Front Page Test – Would this be front page news?
- The Mom Test – What would your mother think?

Scenario #1 Revisited

Mark is a resource PT who works at a large hospital system that has productivity standards. The standards have increased, and therapist productivity directly affects the amount of work that they're offered. If a therapist is consistently below the standard, they will be assigned fewer shifts. Mark has heard from other resource therapists that they feel this encourages staff to pad their stats, as the individual patients do not pay for the capitated therapy services. By billing more units per patient, they increase their productivity numbers.

Now that we've explored the role of ethics in decision making, let's consider the following questions.

What is Mark's obligation as a therapist? As a co-worker? As an employee?

Scenario #1 - continued

Step 1. Recognize and Define the Ethical Issue

- What realm or realms does this situation fall?
Individual, organizational/institutional, societal
- Which individual moral process is most appropriate?
moral sensitivity, moral judgment, moral motivation, moral courage
- What type of ethical situation is this?
problem, dilemma, distress, temptation
- Are there barriers to Mark taking action?
- What does this situation require of Mark?
- Are there implications for action for anyone besides Mark?

Scenario #1 - continued

Step 1. Recognize and Define the Ethical Issue

Poll Results (Live Course)

- What realm or realms does this situation fall?
 - Individual = 39.0%
 - Organizational/Institutional = 61%
 - Societal = 1%
- Which individual moral process is most appropriate?
 - Moral sensitivity = 10%
 - Moral judgment = 46%
 - Moral motivation = 31%
 - Moral courage = 14%
- What type of ethical situation is this?
 - Problem/Issue = 16%
 - Dilemma = 42%
 - Distress = 10%
 - Temptation = 50%
 - Silence = 3%

Scenario #1 - continued

Step 2. Reflect

- What do you know about the legal obligations Mark may or may not face?
How can you best find them out?
- Who are the major stakeholders? In addition to Mark, who or what else may be affected by this situation?
- What are the potential consequences of action or inaction on Mark's part?
Might action or inaction break any laws?
- What ethical principle(s) may be involved? What resources could provide professional guidance? Are Mark and his colleagues guided by the same or different principles?
- How does the situation stack up against Kidder's tests?
Legal, stench, front page, mom, and professional ethical violation

Scenario #1 - continued

Step 3. Decide the Right Thing to Do

- If the situation fails Kidder's tests, action must be taken.
- If you believe the situation passes each test, it's time to look at three possible approaches for determining the right thing to do and determine if there are any barriers to your actions:
 - Rule-based: following only the principles you want everyone else to follow
 - Ends-based: Do whatever produces the greatest good for the greatest number of people
 - Care-based: Do unto others as you would have them do unto you (The "Golden Rule")

Scenario #1- continued

Step 4. Implement, Evaluate, Reassess

Having determined the right thing to do and the best way to implement the decision, reflect on the course of action chosen and think about whether a change in the clinic's organizational policy or culture might prevent this situation from recurring.

Ethics Resources

- RIPS Model
- Your hospital's Ethics Committee
- Your professional practice act
- Your professional organization's Ethics Committee
- Swisher, LL, et al. *The Realm-Individual-Process Situation (RIPs) Model of Ethical Decision making*. HPA Resource.2005; (5(3); 1,3-8
- Claudia Ann Morehead: moreheadca@aol.com
- Jay Lamble: jaylamble@gmail.com

Scenario #2

Mary is a PT working in Acute Care with an adult/geriatric population. She has a patient, Gertrude, with a history of stroke 3 months prior to admission, who was sent to rehab before going home after 10 days. She is now admitted with a COPD exacerbation.

Mary's evaluation of the patient leads her to believe that Gertrude has potential for significant improvement in both her pulmonary and neurologic realms, and that she probably left rehab too soon. The Social Worker has said that Gertrude has rehab days available but because she is improving with her COPD, she will likely only qualify for a SNF if she cannot go home. Mary really wants Gertrude to go to Acute rehab and wonders if she could color her documentation of Gertrude's condition to suggest that her neurologic problem makes her less safe than perhaps she actually is in order to qualify for Acute Rehab.

Scenario #2

Step 1. Recognize and Define the Ethical Issue

- What realm or realms does this situation fall?
Individual, organizational/institutional, societal
- Which individual moral process is most appropriate?
moral sensitivity, moral judgment, moral motivation, moral courage
- What type of ethical situation is this?
problem, dilemma, distress, temptation

Scenario #2

Step 1. Recognize and Define the Ethical Issue

Poll Results (Live Course)

- What realm or realms does this situation fall?
 - Individual = 66%
 - Organizational/institutional = 29%
 - Societal = 6%
- Which individual moral process is most appropriate?
 - Moral sensitivity = 12%
 - Moral judgment = 66%
 - Moral motivation = 12%
 - Moral courage = 10%
- What type of ethical situation is this?
 - Problem = 18%
 - Dilemma = 45%
 - Distress = 13%
 - Temptation = 33%

Scenario #2 – continued

Step 2. Reflect

- What do you know about the legal obligations Mary may or may not face?
How can you best find them out?
- Who are the major stakeholders? In addition to Mary, who or what else may be affected by this situation?
- What are the potential consequences of action or inaction on Mary's part?
Might action or inaction break any laws?
- What ethical principle(s) may be involved? What resources could provide professional guidance? Are Mary and her colleagues guided by the same or different principles?
- How does the situation stack up against Kidder's tests?
Legal, stench, front page, mom, and professional ethical violation

Scenario #2 - continued

Step 3. Decide the Right Thing to Do

- If the situation fails Kidder's tests, action must be taken.
- If you believe the situation passes each test, it's time to look at three possible approaches for determining the right thing to do and determine if there are any barriers to your actions:
 - Rule-based: following only the principles you want everyone else to follow
 - Ends-based: Do whatever produces the greatest good for the greatest number of people
 - Care-based: Do unto others as you would have them do unto you (The "Golden Rule")

Scenario #2 - continued

Step 4. Implement, Evaluate, Reassess

Having determined the right thing to do and the best way to implement the decision, reflect on the course of action chosen and think about whether a change in the clinic's organizational policy or culture might prevent this situation from recurring.

Wrap-up and Questions



Ethics for Rehabilitation Professionals

Course Evaluation:

<https://www.surveymonkey.com/r/6NMPWF7>

Ethics Quiz: <https://www.surveymonkey.com/r/Z7D77F8>

Your Course Certificate will be emailed to you within 3 to 5 days of receipt of your completed course evaluation and quiz.

Ethics for Rehabilitation Professionals

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Nora Sullivan: nsulliva@schosp.org

Your Course Certificate will be emailed to you within 3 to 5 days of receipt of your completed course evaluation and quiz your quiz score of 80% or better.

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