

CODE OF ETHICS for Parent Support Providers

By making application for certification as a Parent Support Provider with the National Federation of Families for Children's Mental Health, I _____ pledge to strive to

- Share my experience as a parent when it may help other family members,
- Support other family members as peers with a common background and history rather than as experts who has all the answers,
- Acknowledge that each family member's answers may be different than mine,
- Take responsibility for clarifying my role as a Parent Support Provider and as a parent of a child who experienced emotional, behavioral or mental health challenges,
- Build partnerships with others who are involved in the care of our children,
- Commit to honesty in all my interactions as a Parent Support Provider and expect the same from others,
- Commit to a non-judgmental and respectful attitude in my dealings with & discussions regarding families, and
- Commit to a non-adversarial approach to advocacy in my role as a Parent Support Provider;

THEREFORE, in order to fulfill this pledge, I agree to abide by the following principles, rules, and procedures.

Initials

Principle 1 – Integrity

In order to maintain high standards of competence and integrity, I will:

1. Apply the principles of resiliency, wellness and/or recovery, family-driven approach, youth-guided or youth-driven approach, consumer-driven approach and peer to peer mutual-learning principles in every day interactions with family members;
2. Promote the family member's ethical decision-making and personal responsibility consistent with that family member's culture, values and beliefs;
3. Promote the family members' voices and the articulation of their values in planning and evaluating children's behavioral health related issues;
4. Teach, mentor, coach and support family members to articulate goals that reflect each family member's current needs and strengths;
5. Demonstrate respect for the cultural-based values of the family members engaged in peer support;
6. Communicate information in ways that are both developmentally and culturally appropriate;
7. Empower family members I am assisting to be fully informed in preparing to make decisions and understand the implications of these decisions;
8. Maintain high standards of professional competence and integrity;
9. Abstain from discriminating against or refusing services to anyone on the basis of race, ethnicity, gender, gender identity, religion/spirituality, culture, national origin, age, sexual orientation, marital status, language preference, socioeconomic status or disability;

10. Only assist family members whose concerns are within my competency as determined by my education, training, experience and on-going supervision/consultation;
11. Abstain from establishing or maintaining a relationship for the sole purpose of financial remuneration to me or the agency associated with me; and
12. Terminate a relationship when it becomes reasonably clear that the peer relationship is no longer the desire of the family member.

Initials

Principle 2 – Safety

In order to maintain the safety of all family members involved with their services, I will:

1. Comply with all laws and regulations applicable to the jurisdiction in which the peer support services are provided, including but not limited to confidentiality;
2. Maintain confidentiality in my personal and professional communication and ensure that family members have authorized my use or release of any and all information about themselves or family members for whom they have legal authority, including but not limited to verbal statements, writings, or re-release of documents;
3. Respect the privacy of the agencies with whom I partner and not distribute internal or draft documents or share private, internal conversations;
4. When complying with laws and regulations involving mandatory reporting of harm, abuse or neglect, make every effort to involve the family members in the planning for services and ensure that no further harm is done to family members as the result of the reporting;
5. Discuss and explain to family members the rights, roles, expectations, benefits and limitations of the peer support process;
6. Avoid ambiguity in the relationship with family members and ensure clarity of my role at all times;
7. Maintain a positive relationship with family members, refraining from premature or unannounced ceasing of the relationship, until a reasonable alternative arrangement is made for continuation of similar peer support services;
8. Abstain from engaging in intimate emotional or physical relationships with family members engaged in a peer support relationship;
9. Neither offer nor accept gifts, other than token gifts, related to the professional service of peer support, including but not limited to, personal barter services, payment for referrals, or other remunerations; and
10. Abstain from engaging in personal financial transactions with family members engaged in a peer support relationship.

Initials:

Principle 3 - Professional Responsibility

Through educational activities, supervision and personal commitment, I will:

1. Stay informed and up-to date with regard to the research, policy and developments in the field of parent/peer support and children's emotional, developmental, behavioral (including substance use), or mental health which relates to my own practice area and children's general health and wellbeing;
2. Engage in helping relationships that include skills building not exceeding my scope of practice, experience, training, education or competence;
3. Perform or hold myself out as competent to perform only peer services not beyond my education, training, experience, or competence;
4. Seek appropriate professional supervision/consultation or assistance for my personal problems or conflicts that may impair or affect work/volunteer performance or judgment;
5. File a complaint with the NFFCMH when I have reason to believe that another Parent Support Provider is or has been engaged in conduct that violates the law or this Code. Making a complaint to the NFFCMH is an additional requirement, not a substitute for or alternative to any duty of filing report(s) required by statute or regulation;
6. Refrain from distorting, misusing or misrepresenting my experience, knowledge, skills or research findings;
7. Refrain from financially or professionally exploiting a colleague or representing a colleague's work, associated with the provision of peer support or the profession of peer support, as my own;
8. In the role of a supervisor/consultant, be responsible for maintaining the quality of my own supervisory/consultation skills and obtaining supervision/consultation for work as a supervisor/consultant;
9. In the role of a researcher, be aware of and comply with federal and state laws and regulations, agency regulations and professional standards governing the conduct of research, including but not limited to ensuring the participants' complete informed consent for participating or declining to participate in a study; and
10. In the role as a volunteer member or employee of an organization, give credit to persons for published or unpublished original ideas, take reasonable precautions to ensure that my employer or affiliate organization promotes and advertises materials accurately and factually.

Initials:

Principle 4 - Certification Responsibilities

As an applicant or certificant, I will:

1. Maintain current on dues;
2. Comply with Standards of Practice, Code of Ethics and recertification requirements set by the NFFCMH;

3. Only use the “Certified Parent Support Provider™” CPSP™ credential or represent myself as having that credential when I am in full compliance with the credentialing requirements;
4. Always utilize the “Certified Parent Support Provider™” CPSP™ designation appropriately;
5. Cooperate with any ethics investigation by any professional organization or government agency, and truthfully represent and disclose facts to such organizations or agencies when requested or when necessary to preserve the integrity of the peer support profession;
6. Comply with the NFFCMH’s requirements associated with the exclusive property rights to the content of its examinations, certificates, the name NFFCMH, the mark CPSP™, the term Certified Parent Support Provider™, and all relating marks or abbreviations that may not be used in any way other than with the express prior written consent of NFFCMH;
7. Immediately relinquish, refrain from using, and correct, at my expense, any and all outdated or otherwise inaccurate business cards, stationery, advertisements, or other use of any certificate, logo, emblem, and the NFFCMH name, marks and related abbreviations, in case the NFFCMH suspends, limits, revokes or otherwise accepts relinquishment of a CPSP™, credential bestowed upon me by the NFFCMH;
8. Notify the NFFCMH of any legal action with potential impact on my practice of peer support, including but not limited to: the filing in any court of an information, complaint, indictment, conviction, revocation of suspended imposition of sentence, revocation of probation/parole, filing of any charge or action before a state, tribal or federal regulatory agency or judicial body concerning the practice of peer support or related professions, or a matter before another certification body. Such notification shall be made within sixty (60) days of the filing of such charge or action, and I shall provide documentation of the resolution of such action within sixty (60) days of that resolution.

Initials:

By initialing and signing this form, I affirm that I have read through and understand all the information provided in this document described as Principle 1-4. By signing below, I understand that I will be held responsible and accountable to following these principles, rules, and procedures. If a complaint is made or it is alleged that I have broken any of these principles, rules, or procedures then I agree to have these actions or inactions reviewed and assessed by the Ethics Committee in accordance with the complaint guidelines of the National Federation of Families for Children's Mental Health. If it is found that I have violated any of these principles, rules and procedures, then I understand that measures will be taken against me, up to and including revocation of the certification by the NFFCMH.

Name of the Applicant

Signature of Applicant

Date