

Ethics: Real-World Practice Scenarios

Sept. 24, 2019

8:30 am–12:45 pm

Location

Northwest AHEC/McCreary Tower
475 Deacon Tower
Winston-Salem, NC 27105

Program Overview and Objectives

The increasingly complex field of behavioral health requires today's practitioner to make hurried ethical decisions at every turn. Our choices, in turn, influence the fate of our clients, agencies, and own professional trajectory. HIPPA, 42 CFR, agency and state standards, accrediting bodies, and our own moral compass. It's a wonder we make it through the week. In this workshop, we examine several ethical decision-making models and apply them to real-world ethical scenarios. Join us for a fun, fast-paced, and experiential workshop where you will collaborate with colleagues in practicing ethical decision-making skills.



REGISTER ONLINE AT WWW.NWAHEC.ORG/58228

Upon completion of the program, participants should be better able to:

- Compare and contrast ethical decision-making models.
- Choose a model that fits your style.
- Apply decision-making models to case scenarios.
- Describe the importance of not "walking point" when it comes to ethical dilemmas.

Who Should Participate

This workshop benefits anyone in the field of human services who is committed to ethical practice and is open to discussion with a different point of view. The target audience includes mental health and human service practitioners, including psychologists, social workers, licensed professional counselors, marriage and family therapists, substance use professionals, therapists and clinicians and all others interested in this topic.

As part of its commitment to diversity and inclusion, the Northwest AHEC and Wake Forest Baptist Medical Center provides compassionate education and respectful care for all, regardless of sexual orientation, gender identity or expression.

Provided by:

Northwest Area Health Education Center (AHEC), a program of Wake Forest School of Medicine and part of the NC AHEC System with support from Old Vineyard Behavioral Health Services.



Agenda

- 8 am **Registration**
- 8:30 am **Comparing and contrasting ethical decision-making models
Choosing a model that fits your style**
- 10:30 am **Break**
- 10:45 am **Applying decision-making models to case scenarios**
- 12:45 pm **Adjourn**

Faculty

Michael McGuire, MSW, LCSW, LCAS, LMFT, CCS, operates a private training and consulting business and is employed by the University of North Carolina at Chapel Hill School of Social Work as a Clinical Assistant Professor and the Director of the Substance Use and Addictions Specialist program. He is licensed as a Clinical Social Worker (LCSW), Marriage and Family Therapist (LMFT), Clinical Addictions Specialist (LCAS), and is a Certified Clinical Supervisor (CCS). His areas of interest and expertise include: staff and leadership workforce development, adolescent and family development, childhood trauma, substance use treatment, experiential learning, Service Members–Veteran–Families (SMVF), Motivational Interviewing, Feedback Informed Treatment, clinical supervision, clinical model implementation science, and ethics. Michael worked as a clinical director of a comprehensive treatment provider and more recently returned from Germany following a three-year contract working with American military families stationed abroad. He enjoys puns, travel, and personal growth. In that order.

This presenter is being supported through a partnership between UNC-CH School of Social Work and the NCAHEC Program.

Credits

- 0.4 CEUs from Wake Forest School of Medicine
- 4.0 Contact Hours from Northwest AHEC
- This program will provide 4.0 contact hours of (Category A) continuing education for North Carolina psychologists. No partial credit will be given.
- Application has been submitted for 4.0 contact hours of Substance Abuse Specific credit from the North Carolina Substance Abuse Professional Practice Board.
- This program does not provide specific NBCC Credits. However, per LPC licensure guidelines, you may submit up to 15 contact hours of continuing education by attending programs by affiliates of the National Area Health Education Center Organization (NAO). Northwest AHEC is a member of the NAO.

For More Information and Assistance

If you have questions about registering for this activity or need auxiliary aids or special services to attend, please contact Michelle Adams at least five working days before the activity 336-713-7726 or micadams@wakehealth.edu.

Cost and Registration

\$40 registration fee if postmarked by Sept. 10, 2019 \ after, \$50 (register early to avoid late registration fee)

This program is offered at a reduced registration fee through support from Old Vineyard Behavioral Health Services.

Registration fee includes instructional and administrative costs, certificate of completion.

Register and pay online at northwestahec.org or complete and return the attached registration form. Payment by credit card (Visa, MasterCard and American Express) accepted online. Personal check, corporate check, money order or WFBMC internal transfer accepted by mail.

Payment Policy—Payment is required on or before entrance into any Northwest AHEC activity. If a corporate payment has not been received before the activity start date, you will be required to provide a personal credit card or check. To avoid personal payment, you should check with the financial staff at your organization to determine status of payment. If and when the corporate payment is received, Northwest AHEC will issue a full refund based on your original form of payment.

Refund Policy—Cancellations received in our office at least two weeks (14 business days) before the activity will receive a 100 percent refund. Registrants cancelling between two weeks and two full business days **prior to the first day of the event** will be refunded at 70% of the registration fee subject to a minimum \$25 cancellation fee. The registration fee will not be refunded if a cancellation is received less than two days before the activity. **Cancellations must be in writing (fax, email or mail).** You may send a substitute in your place.

When planning for an educational activity, registration fees are not based on credit hours or agenda. Registration fees are based on expenses such as meeting room rentals, food, equipment, staff, etc., and are not adjusted by issues such as cancellation of speakers or other unforeseen circumstances. Every effort will be given to ensure the activity is a success.

If you have not received confirmation of your registration 24 hours before the program date, please call Michelle Adams at 336-713-7726 or email micadams@wakehealth.edu to verify the status of your registration.

Note— Registering for and attending this program authorizes Northwest AHEC/Wake Forest School of Medicine to take pictures to be used for the Center's publications, website (including social media sites) and presentations. If you do not wish to be photographed, you may opt-out of photographs the day of the activity.

Location

**Northwest Area Health Education Center (NW AHEC)
McCreary Tower (a part of the Wake Forest Football Complex)**
475 Deacon Blvd.
Winston-Salem, NC 27105
p. 336-713-7700



> [Click Here for Directions](#)

Registration Form

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Please select registration fee:

- \$40 registration fee if postmarked by Sept. 10, 2019
- \$50 registration fee if postmarked after Sept. 10, 2019

Primary Phone # (last 4 digits only):
** required*

<i>First Name</i>	<i>MI</i>	<i>Last</i>	<i>Degrees (e.g., MD)</i>		
<i>Profession</i>		<i>Job Title</i>			
<i>Home Address</i>		<i>City</i>	<i>State</i>	<i>Zip</i>	<i>County</i>
<i>Home Phone</i>		<i>Cell Phone</i>			
<i>Employer</i>					
<i>Employer Address</i>		<i>City</i>	<i>State</i>	<i>Zip</i>	<i>County</i>
<i>Employer Phone</i>		<i>Employer Fax</i>			

Email Required:

Preferred Email *Home Email* *Work Email*

By providing your fax number, email address and telephone number, you have granted permission for us to contact you via the numbers and address indicated.

Please register **ONLINE** at www.nwahec.org/58228 (Recommended)

OR select one of the following options:

- Make check payable** to "Wake Forest University Health Sciences" and mail, with registration form, to:
 Wake Forest School of Medicine / NW AHEC
 Medical Center Boulevard, Winston-Salem, NC 27157-1060
 Attention: Michelle Adams
- WFBMC Internal Transfer:** 25-digit chartfield # _____ - _____ - _____ - _____ - _____
- Employer Payment:** Supervisor completes below and faxes registration to 336-713-7701.

<i>Supervisor's Name (Printed)</i>	<i>Signature</i>	<i>Phone</i>
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By signing, I am certifying that agency payment will follow. I understand that if I have a balance due and do not attend or send a substitute, I will be invoiced for the full program fee.