Ethical And Legal Issues in Treating HIV Clients

1. **Ethical Issues**
   The manual describes ethics in part as a moral approach to intellectual issues:
   A true B false

2. Advocates for persons with HIV have fought for years to:
   A maintain confidentiality C both of these
   B promote mandatory reporting D neither of these

3. The ongoing struggle between legislating morality for public good and fighting to retain individual autonomy rights is an ethical dilemma exemplified by SEP’s (syringe exchange programs):
   A true B false

4. What reasons are given for ethics issues being rarely covered in orientation sessions or continuing education activities with agencies:
   A these issues can be quite personal C both of these
   B there are no right or wrong answers in D neither of these
   many case examples

5. A policy that sets a standard for each new client to receive an intake interview within 24 hours is an example of the basic ethical principle of ______________:
   A justice B autonomy C beneficence D nonmaleficence E fidelity

6. In determining an individual’s ability to decide and act autonomously, a counselor must:
   A establish that the individual is competent C both of these
   B ensure the individual has the necessary information to make a sound decision in an unbiased manner D neither of these

7. In “doing good” for a client, it is deemed unwise for the clinician to take the client’s viewpoint and cultural context into account:
   A true B false

8. Sexual and financial exploitation of a client by a clinician is a blatant violation of which basic ethical principle:
   A justice B autonomy C beneficence D nonmaleficence E fidelity

9. The example of the client who shows up late and is terminated or transferred by the clinician only because he is the third client to show up late that day is a subtle example of a violation of which basic ethical principle:
   A justice B autonomy C beneficence D nonmaleficence E fidelity

10. Telling the truth and keeping promises is at the core of which basic ethical principle:
    A justice B autonomy C beneficence D nonmaleficence E fidelity

11. Confidentiality contracts may be breached for:
A suicidal or homicidal client intentions C the breaking of certain agency rules by the
B instances of reported child abuse D all of the above

12. Every time a clinician takes morally correct action in a “duty-to-treat” situation, they and their agency are legally protected:
A true B false

13. If a client has HIV but has not informed his partner about his HIV status, a counselor could be held liable in a civil lawsuit for knowing and not telling the client’s partner:
A true B false

14. It is extremely rare for a legal judgement to be made against a clinician who was following appropriate procedures and standards for her profession and institution in which she worked:
A true B false

15. Which is true for dual relationships where a provider may have had contact with a client in a social or sexual context as well as in a professional role:
A clinician should not assume a professional role with that client if possible B clinician should take advantage of the dual relationship and insist upon serving as counselor for that individual

16. Which is not a step for working through ethical issues as outlined by NASW’s Ethical Issues training manual:
A identify clinical, legal, system, cultural and ethical issues B review what principles are at stake with questions such as “Is harm being done by or to the client?” C list all possible options and examine their pros and cons D all of these are outlined steps

17. Which are given as additional resources for ethical problem solving:
A consultation with other providers in the community who understand the culture and what the clinician does B consult professional standards or codes of ethics documents for your profession C seek pro bono or reduced rate legal consultation D all are mentioned

18. **Legal Issues**
Many legal issues have ethical implications:
A true B false

19. Which are examples cited where legal questions may arise regarding access to treatment and issues of discrimination:
A a hospital is unwilling to admit a potentially relapsing client with a history of drug or alcohol use B a long term care facility is reluctant to accommodate a methadone-maintained client C a school refuses to hire an HIV positive teacher
D a business fires a secretary when it discovers she was once treated for alcoholism E all examples above are mentioned

20. An alcohol abuser whose drinking results in assaultive episodes that endanger elderly residents at a long-term care facility qualifies as an example of a condition under which the facility can legally exclude that individual:
21. Which examples listed below correctly state the protocol service providers may follow with respect to current illegal drug users:
   A  a hospital specializing in treating burns could refuse to treat a burn victim because he uses illegal drugs
   B  a homeless shelter could refuse to admit an abuser of illegal drugs
   C  both of these
   D  neither of these

22. In 1998, the Supreme Court held that asymptomatic HIV is a “disability” under the ADA (Americans with Disabilities Act):
   A  true
   B  false

23. What conditions must exist to protect individuals living with HIV/Aids from discrimination according to the Bragdon vs. Abbott decision:
   A  the individual must be “qualified” for service
   B  the individual must not pose a “direct threat” to the health or safety of others
   C  both of these
   D  neither of these

24. In cases where a public accommodation could argue that an HIV-positive individual poses a direct threat, it would also have to show that the threat could not be eliminated by a modification of policies, practices, or procedures, or by the provision of auxiliary aids or services:
   A  true
   B  false

25. The 2 Federal Acts would not protect an alcoholic secretary who binges on weekends but reports to work sober and performs her job safely and efficiently:
   A  true
   B  false

26. With respect to alcohol, the ADA permits employers to:
   A  prohibit alcohol use in the workplace
   B  require all employees to be free from the influence of alcohol at work
   C  require employees who abuse alcohol to maintain the same qualifications for employment, job performance and behavior that it requires of other employees
   D  all of these

27. With respect to illegal drugs, the ADA permits employers to:
   A  administer drug testing
   B  prohibit use of illegal drugs at work
   C  require its employees to be free from illegal drug influence at work
   D  all of these

28. The Drug-Free Workplace Act requires employers to establish an ongoing substance-free awareness program for its employees:
   A  true
   B  false

29. Current abusers of drugs have no protection against discrimination in employment, even if they are “qualified” and do not pose a “direct threat”:
   A  true
   B  false

30. Where can one find a useful “Q & A” about the ADA’s protections for persons living with HIV/Aids:
31. For employment discrimination complaints, which avenues offer the advantage of being inexpensive and not requiring an attorney:
A. EEOC (equal employment opportunity commission)
B. US Dept. of Justice
C. State Attorney General
D. all of the above

32. With respect to confidentiality of information about clients, Federal law applies throughout the country and preempts less restrictive State laws:
A. true
B. false

33. With respect to the Federal Government, which item below must be contained in a proper consent form for the release of confidential information:
A. signature of the client
B. purpose or need for disclosure
C. how much and what kind of information will be disclosed
D. statement that the client may revoke the consent at any time, except what has already been acted on
E. all of the above

34. One strategy for releasing only information about substance abuse but not information about HIV/AIDS is:
A. a narrowly drafted consent form
B. program-maintained filing systems that isolate the 2 different issues
C. both are mentioned
D. neither is mentioned

35. Which is not a method complying with state laws mandating the reporting of TB and HIV/AIDS cases if client identifying information must be reported:
A. obtain client consent
B. use a code rather than the client’s name (if state law permits)
C. report through a QSOA (qualified service organization agreement)
D. report under the audit and evaluation exception
E. all methods are mentioned

36. Suppose an HIV-infected client tells his counselor that he has had unprotected sex or shared syringes with someone. How can programs notify the Public Health Dept. without violating confidentiality:
A. sign a QSOA with the Public Health Depts.
B. obtain direct client consent
C. notify the Public Health Dept. in a way that does not identify the client as a substance abuser
D. obtain a court order after consulting state law
E. all are mentioned

37. HMOs or MCOs can review client records or request information about treatment at any time:
A. true
B. false

38. Federal regulations do not apply to any disclosure of information that would identify a deceased client as a substance abuser:
A. true
B. false
39. Medical emergency exceptions permit only disclosure to medical personnel:
   A true  B false

40. Which is *not* an additional rule regarding confidentiality given at the end of the segment:
   A Federal confidentiality regulations require programs to notify clients of their right to confidentiality
   B programs can never decide when to permit clients to view or obtain copies of their records
   C Federal regulations require programs to keep written records in a secure room
   D all are mentioned

41. Please choose one of the options below for receiving your certificate of CEH’s.
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   Please evaluate the course by choosing one of the responses below for each question. This data will help us to improve our program and meet certifying organization requirements. Thank you for allowing **QUE** to be your provider.

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44. The extent to which this course met the objectives

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46. Efficiency of course mechanics

47. The applicability or usability of the information for you

48. Website functionality and ease of use

49. Availability of course instructors (does the website provide adequate direction on how to access a staff member or instructor if needed for assistance?)

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