

*EARLY INTERVENTION AND PRESCHOOL  
SPECIAL EDUCATION PROGRAM*

# Implementing Professional Boundaries

*A Code of Ethics for  
Early Childhood Service Providers  
Working in the Home*



Nassau County  
Health

Department of

Office of Children with Special Needs

Adopted from:  
Suffolk County Department of  
Health Services  
Division of Services for Children  
with Special Needs  
(with additions emphasized)

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## ***WHY DO WE HAVE A PROFESSIONAL BOUNDARIES CODE OF ETHICS FOR EARLY CHILDHOOD SERVICE PROVIDERS?***

In the field of services for children with special needs, service providers are constantly faced with new challenges and new opportunities. This can be unsettling, and it is not always clear how to respond in certain situations or where the professional boundaries lie.

This Code is designed to support the values and foundations of early childhood education and to help each of us to live those values as we work in this field. It is a practical and clear guide to the behavior that is expected of each early childhood professional. Although our primary focus is on ethical standards as applied to the professional who provides services in the home environment, the setting is not exclusive. The Code deliberately sets consistent and high standards for all service providers no matter where services are being provided.

The Code should help guide and inform our everyday decisions as we work together toward the continued excellence of the early childhood special service programs in Suffolk County.

### ***Our Responsibilities***

Each one of us working with young children with special needs must carefully read and understand the Code, as we are all individually responsible to follow both it and New York State Department of Health and New York State Department of Education policies.

We must hold ourselves and our peers accountable for following the rules. Being accountable means we each must take a proactive approach to ethical, legal and compliance concerns by identifying, reporting and addressing them as necessary.

By doing this, we can all play a part in meeting expectations of excellence.

***Meryl J. Zaglin***  
Director

*It is human nature to empathize with others; the problem is when objectivity is lost. A desire to support the family may conflict with the service delivery responsibility as noted in the early intervention IFSP or school district IEP.*

## **WHY IS IT DIFFICULT TO ESTABLISH AND MAINTAIN PROFESSIONAL BOUNDARIES?**

Adapted from Kelly Wolf,  
CASA of Santa Cruz County

**Difficulties may arise when there is a:**

- ◆ **DUAL RELATIONSHIP**—The service provider and the family know each other in a personal context from another setting or develop a personal relationship during the delivery of services.
- ◆ **CONFLICT IN VALUES AND JUDGEMENT** — The family’s choices, history, relationships, feelings, lifestyle and/or life circumstances conflict with the service provider’s values and judgments.
- ◆ **LOSS OF OBJECTIVITY** — The service provider may lose objectivity with the family due to the development of personal attachments.
- ◆ **OVER IDENTIFICATION** — The family’s experiences may cause some level of reactive symptoms in the service provider. The service provider may over-identify with the family due to his or her own personal history.
- ◆ **ROLE PLAYING OF THE “HERO”** — The service provider may be playing the hero role and feel the need to rescue the child and family.
- ◆ **EXHIBITING POOR TEAMWORK** — The service provider may believe that he or she can provide services better than other team members or other agencies can. The service provider undermines the role of the other team members or other agencies isolating the parent from other points of view.

*Due to a family's very special needs and life circumstances, a service provider working closely with a family may find that the role of the professional is difficult to maintain.*

**SIGNS THAT PROFESSIONAL BOUNDARIES ARE NOT  
BEING MAINTAINED BETWEEN  
THE SERVICE PROVIDER AND THE FAMILY**

Adapted from Kelly Wolf,  
CASA of Santa Cruz County

- ◆ The family and service provider refer to each other as friends.
- ◆ The service provider offers to assist the family (e.g. babysitting, shopping, driving) in ways that are not appropriate.
- ◆ The service provider receives gifts from or gives gifts to the family.
- ◆ The family asks for personal information from or about the service provider.
- ◆ The service provider reveals personal information to the family.
- ◆ The family asks or expects the service provider to socialize outside of professional settings (e.g. attending social events or parties).
- ◆ The service provider is unable to sleep due to anxiety related to the child or family situation.
- ◆ Discussions regarding work dominate the service provider's social interactions with friends and family.
- ◆ The service provider is "venting" with the family about other service providers on the team.

## CODE OF ETHICS FOR EARLY CHILDHOOD SERVICE PROVIDERS

All service providers must observe and comply with the following standards of conduct:

### **1. PROFESSIONAL ETHICAL CONDUCT, PRACTICES AND PERFORMANCE**

***Standard 1.1 The service provider shall comply with state regulations, written local school board policies, county standards and other applicable State and Federal laws.***

The service provider must know and comply with the Early Intervention Program and Preschool Special Education Program policies and New York State and Nassau County policies and procedures.

The service provider has a professional obligation to address unethical behavior demonstrated by colleagues or families and to report concerns to the program director.

The service provider has a professional obligation to address illegal behavior demonstrated by colleagues or families and to report concerns to the responsible authorities.

The service provider should only make recommendations for service at the CPSE meeting that can be substantiated and documented in terms of developmental appropriateness and educational necessity.

The service provider should discuss the child's progress in relation to the IFSP or IEP goals with the family. Specific recommendations for services (including frequency and duration) should be deferred to the IFSP meeting or the CPSE meeting when all members including the parent and provider are present.

***Standard 1.2 The service provider must avoid engaging in deceptive practices.***

The service provider must operate within the boundaries established by education, training and credentials.

The educational decisions for preschool children are made by the CPSE. THE SERVICE PROVIDER IS THERE TO PARTICIPATE IN THE DISCUSSION.

The therapeutic decisions for a child enrolled in the Early Intervention program are made at the IFSP meeting. Decisions about programs, placement or services should not be determined prior to the meeting.

The service provider must truthfully represent his or her services, professional credentials, and qualifications. The service provider must inform families of the scope and limitations of his or her credentials.

***Standard 1.3 The service provider shall follow the guidelines of his or her profession with regard to continued education and professional development.***

The service provider should remain proficient in professional practice by reading appropriate literature, attending conferences, participating in workshops and maintaining credentials.

***Standard 1.4 The service provider shall avoid using a professional relationship with a family for personal advantage. Specifically, if the service provider is contracted with and being paid for by Nassau County to provide services, the provider cannot augment income by providing additional professional or therapeutic services.***

Financial relationships between the service provider and family members of children enrolled in the program are prohibited.

***Standard 1.5 The service provider shall not accept gratuities, gifts, or favors .***

This standard prohibits the acceptance of gifts offered and accepted from students, parents or other persons or organizations in recognition of or appreciation for service.

***Standard 1.6 The service provider shall not falsify records or direct or coerce others to do so.***

The service provider must keep true records and accurate documentation.

***Standard 1.7 The service provider shall deliver services during authorized time periods.***

The preschool service provider must be aware of the service calendar of the school district and must verify the days services are to be delivered.

The preschool service provider must alert the agency or school district if the IEP is missing specific components or necessary information. For example, the IEP must include service information: start and end dates for service provision, frequency and duration of services, location of service, goals and objectives and the service calendar to be followed. BE AWARE, START AND END DATES ALONE DO NOT EXPLAIN SERVICE INTERRUPTIONS DUE TO HOLIDAYS AND VACATION DAYS. The preschool service provider should verify holidays and vacation days at the CPSE meeting.

The service provider must be aware of the start and end dates of the authorized service for a child who is receiving Early Intervention services.

***Standard 1.8 The service provider shall refrain from providing services when his or her personal circumstances compromise delivering services to the best of his or her abilities.***

The service provider must not provide direct service while impaired due to the use of illicit drugs or alcohol or due to the effects of medication.

***Standard 1.9 The service provider shall adhere to appropriate dress codes.***

***Standard 1.10 The service provider shall not “friend” any past or present family on any social media site.***

## **2. ETHICAL CONDUCT TOWARDS PROFESSIONAL COLLEAGUES**

***Standard 2.1 The service provider shall not reveal confidential health or personal information concerning colleagues unless disclosure serves lawful professional purposes or is required by law.***

***Standard 2.2 The service provider shall not knowingly make false statements or share personal opinions about a colleague or the school system.***

## **3. ETHICAL CONDUCT TOWARD CHILDREN AND FAMILIES**

***Standard 3.1 The service provider shall not reveal confidential information concerning students unless disclosure serves lawful professional purposes or is required by law.***

The service provider must maintain the confidentiality of families served by the program in accordance with all applicable Federal, State and local laws and regulations.

Service providers are required to report suspicions of child abuse, maltreatment, and neglect.

***Standard 3.2 The service provider shall treat a student in a manner that positively affects the student’s learning, physical health, mental health and safety.***

The service provider should make every effort to follow regular scheduled appointments.

The service provider must inform his or her agency or



the school district if he or she is going to be absent for an extended period of time, i.e. absence of five or more consecutive sessions.

The service provider must make timely efforts to make up missed services.

The service provider shall not engage in non-emergency cell phone conversations during service provision. The focus should be solely on the child.

The service provider must ensure that the student's legal guardian or an adult over the age of 18 is present in the home at the time of service provision.

***Standard 3.3 The service provider shall not exclude a student from participation in a program, deny benefits to a student, or grant an advantage to a student on the basis of race, color, gender, disability, national origin, religion, or family status.***

The service provider must not refuse to provide services for which he or she is credentialed solely on the basis of gender, race, socioeconomic status, ethnicity, color, religion, national origin, disability, sexual orientation, or political affiliation.

***Standard 3.4 The service provider shall not solicit or engage in sexual conduct or a romantic or intimate relationship with family members of children enrolled in the program.***

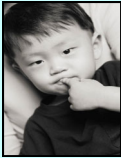
***Standard 3.5 The service provider shall not furnish alcohol or illegal/unauthorized drugs to any child or knowingly allow any child to consume alcohol or illegal/unauthorized drugs in the presence of the service provider.***

***Standard 3.6 The service provider shall adhere to the health and safety standards developed by the NYS Department of Health.***

## COMMUNICATING BOUNDARIES

Educators of infants and toddlers can be so willing to please families that they fail to convey clear messages about the parameters of their professional relationship—these are called **professional boundaries**. This can easily happen because of the intimate nature of infant and toddler work.

Having empathy for families and even sharing the joys and disappointments of raising children are essential elements of the professional partnership. However, we need to learn how “to be a participant in the family social system, while avoiding entangling alliances,” suggest Irene and Herbert Goldenberg (1996, p. 367). It is for the benefit of everyone that these boundaries are set and reinforced when necessary.



*Accept that you are emotionally engaged with each toddler or preschooler and her family, but recognize that the engagement should not disengage you from acting with professionalism.*

The following suggestions might be helpful when setting professional boundaries.

- Try to separate your home life and your professional role.
- Communicate to families the appropriate times and methods for exchanging ideas, concerns, and other information.
- Mention the parameters for confidentiality — and stick to them yourself.
- Discuss the professional role in group meetings with families.
- Identify elements of the family member’s role as they become necessary; for example, explain that they seek medical advice directly from their doctor or that they are responsible for various supplies, such as diapers and sunscreen.
- Show empathy for feelings, but avoid introducing your own fami-

ly  
issues.

- Avoid leading a family member to think that you can offer therapeutic help. Instead, refer the individual to helpful resources.
- Respect the family's background, religious beliefs, and political persuasion, but do not discuss issues outside your professional role.
- Help families to solve their own problems rather than provide answers for them.
- Keep conversation within the range of your professional competence (apart from general pleasant remarks).
- While you might think of family members as more than acquaintances, they are not your friends or potential clients—for cosmetic sales, for inclusion at your own family gatherings, to use for marketing purposes as potential customers, as supporters of political parties or for fundraising, or as potential converts to a religion.
- Identify situations that are outside your experience, training, or professional responsibility, and refer families to experts and suitable resources.
- Offer child care advice based on your own experience, but label it as just that —“In my experience . . .”
- Families expect professional behavior, so be sure that you behave in an ethical manner.
- Say “I don't know” when you do not know an answer to a question, but then try to access resources that can help.
- Refer them to the staff member concerned or, if necessary, the center's supervisor if they try to engage you in conversation about other staff.
- Accept that you are emotionally engaged with each toddler and her family, but recognize that the engagement should not disengage you from acting with professionalism.
- Open communication helps with boundary-setting.

*Reprinted with permission from the authors, 2009:  
Martin, Sue; and Berke, Jennifer E., See How They Grow:  
Infants and Toddlers, Resource Companion Book, published  
by Delmar Cengage Learning.*

**VIOLATIONS OF THE SERVICE PROVIDER  
PROFESSIONAL BOUNDARIES  
CODE OF ETHICS**

- ◆ Violations of the standards outlined above relating to the Code of Ethics are subject to the provider agency's disciplinary procedures.
  
- ◆ The agency must complete a Code of Ethics Incident Report and maintain a copy for inspection by Nassau County Department of Health Services, Office of Children with Special Needs upon request.

## *Selected Resources on Professional Behavior and Ethics:*

**THE NEW YORK STATE EARLY CARE AND EDUCATION CORE BODY OF KNOWLEDGE FRAMEWORK** *Essential Areas of Knowledge Needed In Working Effectively with Young Children, Birth through Age 8 , Developed and Published by The Career Development Initiative of New York State, Second Edition, 2001*  
<http://www.earlychildhood.org/pdfs/CoreBody.pdf>

*NYS Code of Ethics for Educators, Educator Resources, NYSED Office of Teaching Initiatives, New York State Code of Ethics for Educators, Statement of Purpose: The Code of Ethics is a public statement by educators that sets clear expectations and principles to guide practice and inspire professional excellence. Educators believe a commonly held set of principles can assist in the individual exercise of professional judgment. "Educator" as used throughout means all educators serving New York schools in positions requiring a certificate, including classroom teachers, school leaders and pupil personnel service providers.*  
<http://www.highered.nysed.gov/tcert/resteachers/codeofethics.html>

*The Council for Exceptional Children (CEC), Arlington, VA 22201*  
*CEC is the largest international professional organization dedicated to improving the educational success of individuals with disabilities and/or gifts and talents.*

[www.cec.sped.org](http://www.cec.sped.org)

*CEC Code of Ethics for Educators of Persons with Exceptionalities and CEC Ethics and Practice Standards*

<http://www.cec.sped.org/Content/NavigationMenu/ProfessionalDevelopment/ProfessionalStandards/EthicsPracticeStandards/default.htm>

*American Occupational Therapy Association Code of Ethics*

*As per the Preamble of the Occupational Therapy Code of Ethics (2005), "this commitment extends beyond service recipients to include professional colleagues, students, educators, businesses, and the community." (AJOT reference page)*  
<http://www.aota.org/Consumers/Ethics.aspx>

*American Physical Therapy Association Core Ethics Documents, including Professional Conduct, Professional Development, Ethics and Legal Resources*  
<http://www.apta.org>

*American Speech-Language-Hearing Association, Code of Ethics and Ethics Education, access at* <http://www.asha.org/practice/ethics/>

*American Sign Language Teachers Association Code of Ethics*  
<http://www.aslta.com/>

*National Association of the Deaf (NAD) and the Registry of Interpreters for the Deaf, Inc. (RID)*

*NAD-RID Code of Professional Conduct*

<http://www.rid.org/UserFiles/File/pdfs/codeofethics.pdf>

*Code of Ethics of the National Association of Social Workers*

*Approved by the 1996 NASW Delegate Assembly and [revised by the 2008 NASW Delegate Assembly](#)*

<http://www.socialworkers.org/pubs/code/code.asp>

*American Association of Psychologists*

*APA Ethical Principles of Psychologists and Code of Conduct*

<http://www.apa.org/ethics/code2002.html>

*Psychologists (Clinical & School): Code of Professional Responsibility in*

*Educational Measurement, Prepared by the NCME Ad Hoc Committee on the Development of a Code of Ethics*  
[http://www.natd.org/Code\\_of\\_Professional\\_Responsibilities.html](http://www.natd.org/Code_of_Professional_Responsibilities.html)

*School Psychologists: NASP Professional Conduct Manual, Principles for Professional Ethics & Standards for Provision of School Psychol. Services*  
<http://www.nasponline.org/standards/ProfessionalCond.pdf>

**BEHAVIOR ANALYST CERTIFICATION BOARD® Guidelines for responsible Conduct For Behavior Analysts (August 2004)**  
[http://www.bacb.com/Downloadfiles/BACBguidelines/40809\\_BACB\\_Guidelines.pdf](http://www.bacb.com/Downloadfiles/BACBguidelines/40809_BACB_Guidelines.pdf)

*The NAEYC [Code of Ethical Conduct : A Position Statement of the National Association of the Education of Young Children Position Statement NAEYC Guidelines for Responsible Behavior in the Education of Young Children, Power-Point Presentation](#), based on activities from the NAEYC publication, Teaching the NAEYC Code of Ethical Conduct.*  
<http://www.naeyc.org/files/naeyc/file/ecprofessional/EthicsCodeGeneralSession.ppt>

*Professional Ethics: Applying the NAEYC Code*  
<http://www.naeyc.org/files/naeyc/file/ecprofessional/ProfessionalEthicsCase.pdf>

*NAEYC's Position Statement References to Professional Development*  
<http://www.naeyc.org/files/naeyc/file/ecprofessional/Microsoft%20Word%20-%20Professional%20Development%20references%20in%20NAEYC%20position%20stateme.pdf>

*Winton, P., & Catlett, C. (1999), What we have learned about preparing personnel to serve children and families in early childhood intervention, Chapel Hill, NC: Frank Porter Graham Child Development Center, University of North Carolina.*  
<http://www.fpg.unc.edu/~scpp/pdfs/factoids.pdf>

*Resource Guide; Selected Early Childhood/Early Intervention Training Materials, Resources in 184 page downloadable reference guide*  
<http://www.fpg.unc.edu/~scpp/pdfs/rguide.pdf>

*Ethical Issues in Clinical Supervision, Syracuse University's School of Education, Department of Counseling and Human Services*  
[http://soe.syr.edu/academic/counseling\\_and\\_human\\_services/modules/Common\\_Ethical\\_Issues/default.aspx](http://soe.syr.edu/academic/counseling_and_human_services/modules/Common_Ethical_Issues/default.aspx)

*The National Staff Development and Training Association (NSDTA) Code of Ethics for Training and Development Professionals in Human Services: Case Scenarios and Training Implications, National Staff Development and Training Association American Public Human Services Association, 2004, 44 page manual*  
[http://nsdta.aphsa.org/PDF/Code\\_Ethics.pdf](http://nsdta.aphsa.org/PDF/Code_Ethics.pdf)



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