

Table 3-1

## Behaviors That May Subject Licensees to Disciplinary Action

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- Abuse of drugs or alcohol
- Conviction of a felony
- Conviction of a crime of moral turpitude (e.g., sex offense, extortion, or embezzlement)
- Conviction of a crime related to the practice of the profession for which one holds a license
- Practicing without a prescription or referral (if required by the state's practice act)
- Practicing outside the scope of one's practice or using interventions for which one is not certified or trained
- Obtaining a license using fraud or deception (e.g., purposely giving an incorrect address)
- Gross negligence in practicing one's profession
- Breaching patient confidentiality
- Failing to report a known violation of the licensure law by another licensee
- Making or filing false claims or reports
- Accepting kickbacks
- Exercising undue influence over patients or clients
- Failing to maintain adequate records
- Failing to provide adequate supervision
- Providing unnecessary services
- False, deceptive, or misleading advertising
- Practicing under a name other than one's own
- Failure to perform a legal obligation
- Practicing medicine when you are not a physician (i.e., diagnosing and prescribing)
- Performing services not authorized by the patient
- Performing experimental services without first obtaining informed consent
- Practicing beyond scope permitted
- Failure to comply with continuing education requirements
- Failure to notify the licensure board of an address change, which results in failure to renew
- Inability to practice competently

abuse according to the state law requirement (see Appendix E). Many states put into place abuse hotlines to allow those who report abuse to remain anonymous. Ethical dilemmas may arise where health and rehabilitation professionals find the legal obligation to report abuse in conflict with the employing facility's policies and procedures.

### CONTRACTS

*A verbal contract isn't worth the paper it's written on.*  
—Samuel Goldwyn (as quoted in Peter, 1997)

Legal and ethical issues often arise surrounding the complexities and intricacies of contracts. When two parties make an agreement with mutual promises, they form a contract. Health and rehabilitation professionals work in many situations where they may encounter contractual relationships. For example, they may enter into contracts with their employers, commonly referred to as *employment contracts*. Therapists may also find themselves involved in contractual relationships with managed care companies or other providers or insurers to provide therapy services.