

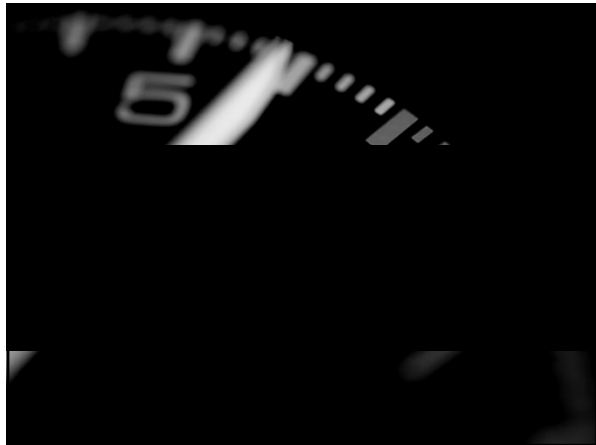
UPGRADE
that
ETHICAL COMPASS

CASE MANAGEMENT ETHICS 2026

Dr. Ellen Fink-Samnicks

DBH, MSW, LCSW, ACSW, CCM, CCTP, CRP, FCM

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Learning Objectives

- Identify strategies to reconcile professional obligations and regulatory requirements
- Define best practices to support ethical use of AI
- Implement the pillars of workforce development to enhance workforce retention
- Apply fresh ethical decision-making models for case managers
- Apply professional case management's established resources of ethical guidance (e.g., regulations, standards of practice, ethical codes)

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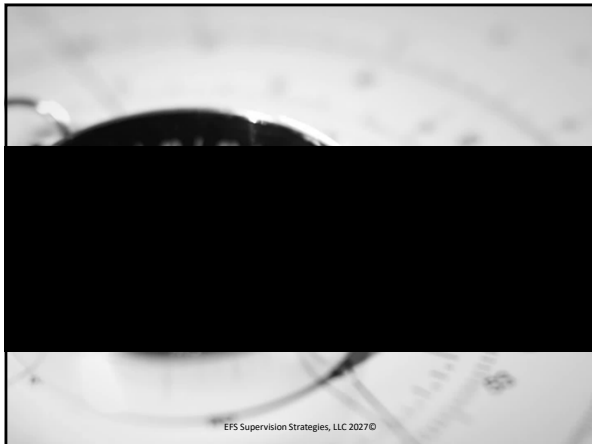
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Disclaimer 2

The data provided in this presentation is meant to inform your efforts, though it may also elicit strong emotions.

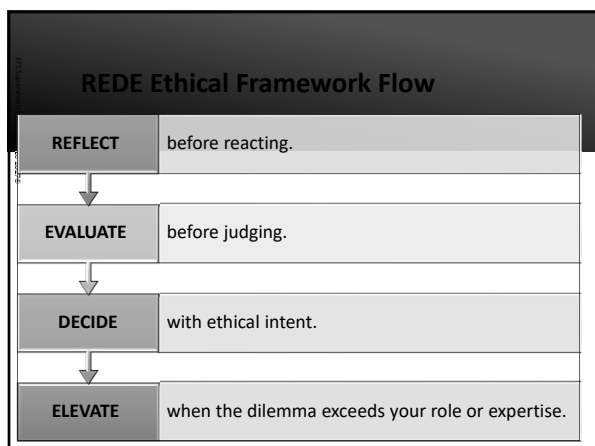
My primary goal is always to educate and advance the perspective of our workforce. It is your individual choice how the data and model guide your actions moving forward

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Phase	Key Question	What to Do
1. REFLECT	What is happening?	- Identify the ethical concern, relevant facts, involved parties, values, assumptions, and potential biases. - Ask: "What makes this situation ethically challenging?"
2. EVALUATE	What Established Resources of Guidance Apply?	- Examine professional regulations, laws, accreditation and credentialing requirements, professional codes, organizational policies, and the patient's preferences. - Consider competing ethical duties and possible consequences.
3. DECIDE	What is the most ethically defensible action?	Identify possible options: - weigh benefits and risks - consider the least restrictive and least harmful alternative, and - select the action that best protects the patient's rights, safety, dignity, and interests.
4. ELEVATE	Who else needs to be involved?	Seek appropriate consultation. Escalate to: - Supervisors - Organizational ethics committees - External professional ethics committees - Document the reasoning and outcome

REDE Framework Operationalized



Working Around the Words



Let's Keep This Simple

Don't Get Stuck on:	Reframe the conversation
Terminology	The underlying principle
Political or organizational language	Professional standards & responsibilities
What someone wants you to call it	What is actually happening
Ideological disagreement	Patient needs & outcomes
Labels	Observable behaviors & circumstances
Who is right	What is ethically defensible
Avoiding difficult topics	Address the issue professionally

THE Commission

CDMS®

CCM®

Underlying Values

- Board-certified case managers (CCMs) recognize the dignity, worth and rights of all people
- Section 5 S 20 – Unprofessional behavior**
- ...if the Board-certified case manager (CCM) engages in conduct involving discrimination against a client because of race, ethnicity, religion, age, gender, sexual orientation, national origin, marital status, or disability/handicap

(2026)

Ethical Principles:

- Autonomy
- Beneficence
- Fidelity
- Justice
- Nonmaleficence
- Veracity

Ethical Standards:

- Principle 1:** Respect the integrity, dignity, and protect the welfare of those persons or groups with whom they are working
- Principal 3:** Maintain objectivity in their relationships with clients

(2023)

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Code of Ethics



ANA

AMERICAN NURSES ASSOCIATION

- **Provision 1:** Respect for the inherent dignity, worth, and unique attributes of every person.
- **Provision 2:** Moral duties to self as a person of inherent dignity and worth including an expectation of a safe place to work.....
- **Provision 6:** Through individual and collective effort, establish, maintain, and improve the ethical environment of work setting that affects nursing care and the well-being of nurses.
- **Provision 7:** Advance the professional through multiple approaches to knowledge development, professional standards, and the generation of policies for nursing, health, and social concerns (e.g., technology).
- **Provision 9:** Work to enact resource practices, policies, and legislation to promote social justice, eliminate health inequities, and facilitate human flourishing.

(2025)

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(NASW, 2021)

Social Work's Core Values:

Service

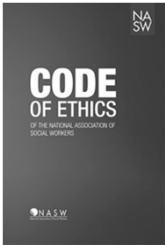
Social justice

Dignity and worth of the person

Importance of human relationships

Integrity

Competence.



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Standards:

B. Professional Responsibilities

C. Legal

D. Ethics

E. Advocacy

F. Cultural Competence

G. Resource Management

H. Health Information Technology

Q. DEIB and Health Equity

(2022, 2024)



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(2023)

AMERICAN CASE MANAGEMENT ASSOCIATION

Compliance

- CM will be knowledgeable of and ensure compliance with the federal, state, local organization and accreditation requirements that not only impact their scope of services but affect their ability to advocate for the patient.
- CM organizational structure, staffing, policies and procedures must meet the CMS Conditions of Participation.
- All disciplines function within the scope of practice defined by state licensing regulations.

- Professionalism**
- Resource Management**
- Technology**

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Apply REDE

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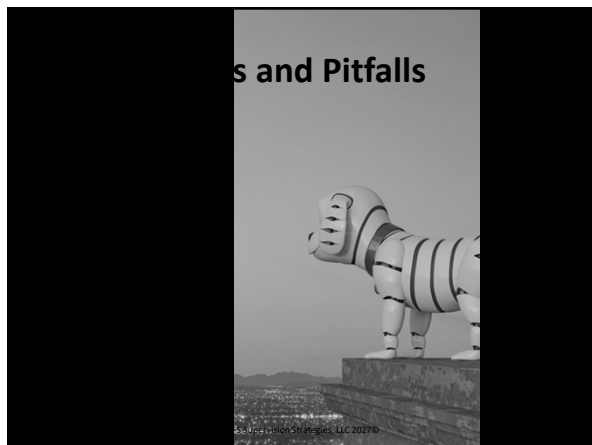
REDE Step	Key Questions/Actions
Reflect	Pause and recognize any ethical tension - What is being changed (e.g., language, priorities, or actual services)? - Could reframing obscure patient needs or disparities?
Evaluate	Assess competing responsibilities - Consider patient needs - Review professional obligations, and which established resources of guidance apply: licensure regulations, standards of practice, codes of professional conduct, organizational policy, and the potential impact of the revised language on advocacy and access to care.

Apply REDE

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REDE Step	Key Questions/Actions
Decide	Prioritize safe, patient-centric/shaped care. Follow legitimate organizational communication requirements while ensuring that documented barriers, and patient needs remain visible and addressed.
Elevate	Seek consultation. Escalate. Document Clarify ambiguous directives, consult leadership/ethics resources when appropriate, document patient-impact concerns, and escalate when reframing could contribute to unsafe or inequitable care.

Reframe the Language vs. the Patient's Reality	
Instead of	Consider
"We need to address disparities."	Are there differences in access, treatment, outcomes, or resources that require our attention?
"This is an inclusion issue."	Does the care plan account for the patient's circumstances, preferences, communication needs, and ability to participate?
"We need culturally responsive care."	How do we understand about this patient's values, beliefs, communication style, family structure, or preferences to provide appropriate care?
"We need to advocate for this population."	- What barriers are preventing this patient from receiving appropriate care, and - What can we ethically do about them?



Artificial intelligence and nursing science: Opportunities, challenges, implications, and guidelines

(De) AI chatbots may have a negative impact on the mental health of patients with mental illness, especially those with anxiety disorders (Olsen et al., 2024)

Hospitals deploying clinical AI faster than oversight rules are being written

Misuse of AI chatbots tops annual list of health technology issues

Health Care Workers Furious as NYC Replaces Nurses with at AI (Landymore, 2026)

Balancing rapid medical innovation with patient safety and trust remains a core challenge (Jayaram & Owens, 2026)

Patients Wary of Governments, Companies Pushing AI as a Rural Healthcare Solution (Zionts & Tahir, 2026)

As AI enters the operating room, reports arise of botched surgeries and misidentified body parts (Dowdell et al., 2026)

The AI Prompt That Almost Killed a Cancer Patient (And Why Doctors Are Worried) (Lia, 2025)

Medical benefits

- Predicts risks and diseases
- Supports prevention and control of diseases
- Leads to better data-driven decisions
- Assists in improving surgery
- Supports mental health

Economic and Social benefits

- Reduces posttreatment expenditures
- Cost savings via
 - early diagnosis
 - enhanced clinical trials
- Patient empowerment
- Relieves practitioners' workload

(Chustecki, 2024)

Clinical and Diagnostic Risks

- Misdiagnosis and errors
- Overreliance
- Opacity: "Black Box"

Ethical and Social Concerns

- Algorithm Bias
- Loss of empathy/human connection
- Accountability Gaps

(Boyd & Markowitz, 2026; Chustecki, 2024)

Data and Security Vulnerabilities

- Privacy and confidentiality
- Cybersecurity threats

(Di Palma et al., 2025; Hou et al., 2025)

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Consider This...

- Jordan is a hospital CM caring for a 72-year-old patient, Calita, who recovering from pneumonia and heart failure.
- The hospital's new AI discharge tool recommends a home discharge plan for Calita with home health and predicts a low risk of readmission.
- However, Jordan's assessment tells a different story. The patient lives alone, has fallen multiple times, and needs assistance with toileting and ambulation. Calita states to Jordan, "I'm afraid to go home. I don't think I can safely manage."
- PT recommends short-term rehabilitation, but the MD says, *"The AI analyzed thousands of cases. We should trust the data."*
- Jordan also learns that the AI has shown lower accuracy for some older adults living alone, although the hospital has not determined whether bias affected this patient's recommendation.

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Apply REDE

REDE Step	Key Questions/Actions
Reflect	Pause and recognize the conflict. • What is Jordan observing that the AI recommendation may not capture? • How do Calita's expressed fears, falls, functional limitations, and living situation affect discharge safety?
Evaluate	Assess all available evidence. • Compare the AI recommendation with Jordan's assessment, PT recommendation, Calita's preferences, and clinical findings. • What are the potential risks of relying on an AI tool with known limitations for some older adults living alone? • What regulations, professional standards, codes of ethics, codes of professional conduct apply to this situation

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Apply REDE

REDE Step	Key Questions/Actions
Decide	Prioritize safe, patient-centric/shaped care. • Advocate for further interdisciplinary review and consideration of short-term rehabilitation. • Do not allow the AI recommendation to override clinical judgment, patient voice, or safety concerns.
Elevate	Seek consultation. Escalate. Document. • Communicate concerns to the interdisciplinary team, physician, AI/quality leadership, or ethics resources as appropriate. • Document the conflicting recommendations, Calita's wishes, identified risks, and actions taken. • Anything else?



Governance Resources

- American College of Physicians Policy Position Paper on AI (Daneshvar et al., 2024)
- American Academy of Nursing (AAN, 2026)
- ECRI AI Position Paper on Technology Hazards (ECRI, 2025)
- Joint Commission's Responsible Use in AI (RUIAI) Certification (Joint Commission, 2026)
- National Association of Social Workers AI Guidance (NASW, 2026)
- The Coalition for Health AI (CHAI): AI Governance for Health Systems: (CHAI, 2026)
- WHO Ethics and Governance of Artificial Intelligence for Health (WHO, 2025)



Workforce Retention

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The Facts

- Growing research showing 1:4 case managers leaves their role within healthcare settings annually
- Retention rates range:
 - From 72%-87% , and
 - With turnover reportedly 13% to 28% depending on the practice setting and population.

(Bogenshutz, et al., 2018; Simmons-Fields, 2023; VA, 2026)

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What Helps?

88.1%

- CEO-access
- Reimbursement: professional membership, conference attendance, professional development
- Tuition remission: Relevant higher education, board-certification prep (CMSA/CMI; 2024)



The Facts

- Burnout rates range: 30—70% of the workforce
- Professional case managers report being overworked: 45% of the workforce

(Telzak et al., 2022; The Commission, 2023)

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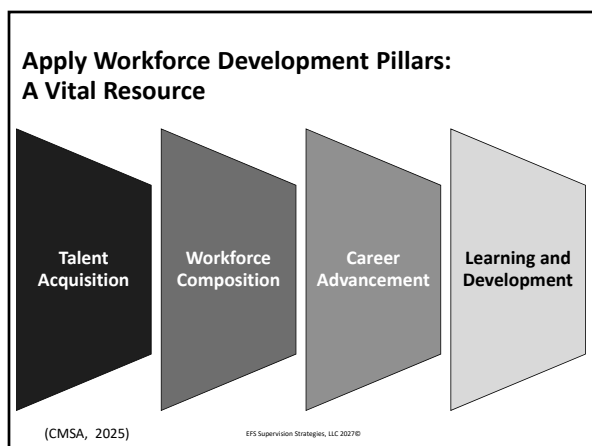
Consider this...

- A case management department has experienced significant workforce attrition, leaving remaining case managers with larger caseloads and less time for each patient
- To keep services moving, leadership asks staff to prioritize “high-risk” cases and shorten follow-up contacts for others.
- One case manager recognizes that several patients with complex social and behavioral health needs are receiving delayed referrals and inadequate care coordination

How can this case manager balance organizational productivity expectations with their professional responsibility to advocate for safe, equitable, and patient-centered care?

Apply REDE	
REDE Step	Key Questions/Actions
Reflect	- What ethical concerns are emerging? - Which patients may be disproportionately affected? - Am I able to meet my professional responsibilities within the current workload? - Are productivity expectations creating a conflict with patient-centered care?
Evaluate	- Who defines "high risk," and what criteria are being used? - Are social/behavioral health needs adequately represented in risk determination? - What patients are experiencing delayed services? - What professional standards, policies, regulations, or ethical principles apply?

Apply REDE	
REDE Step	Key Questions/Actions
Decide	- Which cases require immediate intervention? - Which follow-ups can safely be modified? - What resources or workflow changes could reduce risk? - How can I communicate concerns while remaining solution-focused?
Elevate	Seek consultation when the ethical conflict is unclear. - Escalate concerns when patient safety or equity remains at risk. - Document workload concerns, delayed referrals, care-coordination barriers, and actions taken. - Follow up to determine if the intervention actually reduced risk.







Reflect

A case manager's ethical compass must always point in the direction of patient and public safety:

- Federal, state, and local laws, and
- Established resources of guidance
 - Regulations
 - Accreditation requirements
 - Standards of Practice
 - Ethical Codes



Evaluate

Case managers must be confident to manage complex situations:

- Be diligent
- Use the research to consider the realities and aligned established resources of guidance
- Apply fresh ethical models: REDE!

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Decide

- Define the correct path, only after careful critical thinking
- Lead with confidence from the competence to designate a right course of action!

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Elevate

- Don't fly solo!
- Reach out for consultation:
 - Mentors
 - Trusted colleagues
 - Supervisors
 - Other case management leaders
 - Regulatory boards (e.g., licensure, certification, accreditation)

REDE Ethical Framework





REFLECT
Pause.
Consider.
What matters most?



EVALUATE
Gather facts.
Weigh impact.
Seek clarity.



DECIDE
Choose the right path.
Act with courage.



ELEVATE
Seek consultation.
Escalate.
Document.

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HAPPY CASE MANAGEMENT WEEK!

Thank You



Dr. Ellen Fink-Samnick DBH, MSW, LCSW, ACSW, CCM, CCTP, CRP, FCM
Author, Educator, Innovator, Researcher
www.efssupervisionstrategies.com
efssupervision@me.com

LinkedIn: [Ellen's Ethical Lens](#)
BlueSky.com: [@drel-dbh.bsky.social](#)
Blog: [Ellen's Interprofessional Insights](#)
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