VIRGINIA SOCIETY FOR CLINICAL SOCIAL WORK

SUGGESTED INFORMATION TECHNOLOGY POLICIES FOR CLINICAL SOCIAL WORK PRACTICE* July 2011

Introduction:

Information Technology (IT) is an ever expanding influence on our clients and our own lives. The speed with which new technology evolves is quicker than the pace of developing professional and ethical standards to deal with the impact of the technology on the clinical relationship. The foundation of our clinical work is the quality of the relationship between the clinical social worker and the client. We need to be always guided in our decisions to act in the client's best interest and choose actions that will enhance the client-clinical social worker therapeutic relationship to help the client reach their treatment goals.

The following policies are to guide clinical social workers in dealing with IT as it impacts our clinical work.

- 1. **Web Site**: A clinical social worker may maintain a web site for the purposes of providing prospective clients information on services, clinical staff, contact information, news, educational information or links, information on billing and insurance, and other items as the clinical social worker determines would be helpful.
- 2. **E-Mail:** Clinical social worker practices may choose to provide each clinical staff member with a practice owned E-mail account. Each clinician may use this E-mail account to facilitate their work at the practice. Below is a suggested policy on use of E-mail with clients some Informed Consent parameters.

E-mail communication between the clinical social worker and clients present some unique ethical and legal issues. Each clinical social worker decides if they want to use e-mail communication so please discuss this with your therapist.

INFORMED CONSENT FOR E-MAIL

E-mail is only used for scheduling purposes or to provide clinicians with updated demographic information or for clinicians to provide educational information or homework for the client. All other communication should occur in person. E-mail is not to be used for communication of urgent or emergency situations; client's should call 911 or go to their local emergency room in an emergency situation. E-mails will be reviewed during usual business hours. E-mails will be printed and placed in the client's medical record. E-mail is not best for communicating emotional issues, sensitive concerns or items that need to be processed and explored. E-mail communication from the client must include their name and contact information. There is no guarantee of a specific "turn around" time to respond to E-mail communication. There is no guarantee of the security of e-mail communication and there is no guarantee against the loss in transmission of e-mail communication. Clients are forewarned that e-mail communication has security

limitations beyond the control of the clinical social worker. There is a fee for reading e-mail communication that is longer than a brief appointment time message. This fee is not covered by insurance. Clinicians reserve the right to not read lengthy e-mail and to bring any e-mail communication to the next client session to be processed. E-mail is used for conducting therapy.

3. E-mail privacy for employees:

- The law regarding employers' rights to employee e-mails and computer usage is evolving as fast as the technology. Federal law prohibits the unauthorized interception of, retrieval of or access to certain wire or electronic communications, including stored communications such as e-mail. However, once the communications are downloaded to a practice owned computer or server, they may be subject to control by the practice.
- > The practice reserves the right, in its discretion, to review any employee's electronic files and messages and usage to the extent necessary to ensure that electronic media and services are being used in compliance with the law and with practice policies. Such reviews will occur only when there's a reasonable suspicion of work-related misconduct by the employee, rather than non-specific trolling or fishing expeditions. Employees should therefore not assume electronic communications are totally private and confidential and should transmit highly sensitive information in other ways.
- All practice owned computers are practice property and shouldn't be used in any disruptive or offensive ways. The practice deems all computer content on practice owned computers, servers or other electronic media devices to be permanent and subject to retrieval and review at any time. Messages in the practice e-mail account provided to each employee are saved and are deemed practice property.

4. Clinical Social Worker and "Social Media" or "Social Networking" sites:

This includes such sites such as Facebook, Twitter, MySpace, You Tube, LinkedIn and other sites that are accessed via the Internet. The practice can't regulate employee's choices of Internet behavior while not at work. The practice does have an interest and a legal responsibility to assure that appropriate boundaries are maintained between clinicians and clients. To maintain appropriate clinical boundaries the practice policy is as follows:

- A. Clinicians will not use the practice owned computers for purposes other than professional work.
- B. Clinicians are strongly encouraged to not "friend" clients or join with clients in Internet based activity.
- C. If a clinician has communication with a client or former client via the Internet then the clinician is required to document that communication in the medical record of the client. The documentation should include:

- a) A printout of the communication, if available.
- b) If the printout is not available then the clinician will document the date, time, length of communication, content, purpose and any clinical issues that arose in the communication and how the clinician will incorporate this communication into the treatment plan.
- c) If the communication is with a former client, the clinician will meet with the chief executive officer of the practice to review the incident to assure there has been no boundary violation that may expose the practice to liability.

5. Clinical Social Worker and Blogging

The practice does not sponsor any Blog site. Again the practice can't regulate employee's choices of Internet behavior while not at work. The practice does ask that any clinician who establishes a blog, post on blogs or participates in a blog be cognizant of:

- a) The possible impact on the clinical relationship with clients who may read the blog.
- b) The possible impact on the clinical relationship if clients choose to "post" on a clinicians blog.
- c) The possible impact on the clinical relationship if the clinician chooses not to respond to a post made by a client on the clinician's blog.
- d) The possible impact on the clinical relationship if the clinician chooses to "post" on a client's blog.

6. Clinical Social Worker and Smartphones

Wikipedia defines Smartphones as follows:

A **smartphone** is a high-end <u>mobile phone</u> that offers more advanced computing ability and connectivity than a contemporary <u>feature phone</u> (i.e. a modern low-end phone). [1][2][3] A smart phone combines the functions of a <u>personal digital assistant</u> (PDA) and a mobile phone. Today's models typically also serve as <u>portable media players</u> and <u>camera phones</u> with high-resolution <u>touchscreen</u>, <u>GPS</u> navigation, <u>Wi-Fi</u> and <u>mobile broadband</u> access.

A smartphone runs a complete <u>mobile operating system</u>. Widespread examples are Apple <u>iOS</u>, Google <u>Android</u>, Microsoft <u>Windows Phone 7</u>, Nokia <u>Symbian</u>, Research In Motion <u>BlackBerry OS</u>, and <u>embedded Linux</u> distributions such as <u>Maemo</u> and <u>MeeGo</u>. Such systems can be installed on many different phone models. They can run third-party applications, using an <u>application programming interface</u> (API). [4]

The practice policy on Smartphones addresses issues concerning both the clinician and the client.

A. Clinicians are to use caution when using features of the Smartphone that involve client information. HIPAA requires protection of Electronic Protected Health Information (EPHI). Smartphones meet the definition of "electronic media devices" as defined by HIPAA. Clinicians must gain Informed Consent from the client to use Smartphones features that deal with any of the client's EPHI.

- B. Client's use of features on their Smartphone during a therapy session may be a therapeutic issue. The therapist is responsible to evaluate if this is an issue to become part of the focus of treatment.
- C. Client's use of photographic, video and or audio recording features on their Smartphone during a therapy session may be restricted by the clinicians for the protection of the clinician's privacy. This also may rise to the level of a being a therapeutic concern that the clinician should evaluate and address with the client as part of the treatment plan.

7. Clinical Social Worker and Google:

Search engines, like Google can provide access to a great deal of information.

- A. The practice policy is to discourage clinicians from conducting a Google search on their clients. Any information you gathered would impact your thinking, feelings and perceptions about the client and could negatively impact the clinical relationship and treatment. If a clinician chooses to conduct a Google search on a client, this should be documented in the "psychotherapy notes" of the client apart and separate from the medical record of the client.
- B. Clinicians are recommended to periodically conduct a Google search on their own name. Part of our current culture is that many prospective clients will Google a professional prior to seeking treatment from that professional. The clinician as part of their own self-awareness needs to be aware of their "Internet Presence." It is likely that a significant portion of the information on the Internet about the clinician was not placed on the Internet by the clinician. If there is inaccurate information about the clinician there may be opportunity to contact the host and have it corrected. It is helpful for the clinician to always be aware that any digitalized photos, images, documents or other digitalized items are possible to be put on the Internet.

*These are suggested guidelines. Nothing in this document is to be considered legal advice and the reader is encouraged to consult with legal counsel and use their own best judgment in adopting any of the items in this document. Information Technology is a constantly changing field and one must modify these guidelines as needed.