Providing social work services online/remotely

This guideline will focus on the ethical considerations for social workers when using technology to deliver services where the social worker and client are not in the same physical location. Please see our other two guidelines in this area which focus on, Email, text message and mobile phone use and Social Media.

It is now difficult to think of anything that we can't book, access, arrange or enquire about online. As part of this now, ‘norm’, there has been a rapid increase in the amount of human and social services provided using online technologies. With this increase in online service provision, it is important for social workers to keep abreast of developments, as well as any ethical considerations that correspond with these changes in the field.

Organisations that have, for a long time, provided counselling or support services on the telephone are increasingly using technologies such as email and instant messaging in the provision of counselling and crisis support provision. Individual social workers in private practice are increasingly using online technologies to provide services to clients.

The software application Skype, in particular its video conferencing feature, is also a popular mechanism for client/professional communication.

Some examples of online social work services are:

- Email and instant messaging based counselling
- Counselling via video conference (Skype)
- Online group work programs with a facilitator
- Online social work forums
- Professional collaboration/supervision using cloud technologies (e.g. Wiki, Google Drive and OneDrive)
- e-Therapy (information provision, automated self help programs, self- administered psychological testing)
Services delivered via video conference (Skype) have several benefits including, but not limited to:

- Greater accessibility for people living in rural and remote areas
- More cost effective for users
- More attractive mechanism for young people to access support services
- Less threatening than face-to-face or even telephone counselling
- Ability for users to participate at their own convenience
- Ability to remain anonymous
- There are, conversely, numerous ethical issues to consider when providing any kind of remote social work service.

Challenges may include:

- Issues with maintaining privacy and confidentiality
- Difficulty being certain that informed consent has been obtained
- Difficulty identifying clients (or being sure that you are communicating with who you think you are communicating with)
- Greater difficulty controlling how information is interpreted
- Greater difficulty in assessing the wellbeing of clients
- Loss of visual / verbal cues
- Asynchrony of communication - where there is a delay between a client and social worker receiving a response from each other, such as when communicating via email (Reamer 2013, p. 4).

The challenge for social workers and organisations that employ social workers is to ensure that, if embracing such technologies for service provision that practice processes are ethical and adhere to practice standards.

Information, privacy and confidentiality

If engaging in online/technology based service provision, social workers must ensure their clients are aware of the additional limitations to privacy and confidentiality when using such methods of service provision. Different privacy and confidentiality issues emerge when services are provided in an online environment. Any data transmitted online, whether this is by email, cloud technologies, instant messaging or video conferencing via programs such as Skype can potentially be intercepted.

Some considerations:

- Privacy and confidentiality of the client cannot be guaranteed when engaging with online social work services due to the possibility of insecure connections or data being intercepted through hacking. Reamer (2013, p. 10) notes that clients who disclose confidential information in e-mail therapy messages do run the risk that their account may be breached. Clients should be made aware of these potential risks and provide informed consent to engage in such services in light of these risks.
• Information stored on local computers may not be secure or confidential. Clients should be made aware of how to clear the history of their communications with the service provider, so that it is not viewed by others using the computer.

• It is important to have information technology (IT) systems (hardware and software) that are well maintained, and have the most up to date security systems and firewalls to decrease risk of unwanted access to confidential information.

• Computers and other devices should be password protected so that third parties cannot obtain access to email trails containing online counselling conversations.

• Maintaining separate professional and personal email addresses and computer

• if possible, so as to reduce the possibility of confidential information being shared inadvertently with others and to keep a clear distinction between the social workers professional and personal online presence.

• Being conscious of the physical environment when providing services using video conferencing and ensure that information relating to other clients cannot be seen - e.g. case files with clients’ names on them.

• Discuss with clients that in the event of records being subpoenaed, or requested under Freedom of Information policies, verbatim print outs of the online counselling records (email and instant messaging records) could be required. Research suggests that people are more open when communicating over email than what they would be when speaking face-to-face. (Weisband & Reinig, 1995 cited in APS 1999).

• Discuss with clients participating in online groups the importance of respecting the privacy of other group members, as would be the case with face-to-face groups. Guidelines should be set in regards to the audio or video recording of group sessions and the sharing of this information by other technologies such as YouTube or Facebook, in which case information could potentially be made publicly available.

**Informed Consent**

Informed consent should be obtained from clients prior to the commencement of an online professional relationship. Social workers need to be especially vigilant in ensuring that, when working in an online environment, it is the actual client who has provided consent. It may be challenging to ensure satisfaction that all the requirements of informed consent have been addressed when obtaining this in an online environment. For example, it would be difficult to demonstrate that a person was fully capable of providing consent and that the elements of the informed consent process were truly understood (Reamer 2013, p. 12).
Some considerations and recommendations include:

- Meet with clients in person in the first instance, if feasible, to discuss and obtain informed consent and to discuss, more broadly, the counselling contract.
- If this is not feasible, consider having a telephone or videophone conversation with the client to discuss consent and the professional contract. The feasibility of meeting the client face-to-face would need to be assessed within the context of practice, for example in some cases the work with client may only be once off and there may be no face-to-face contact.
- Usually, social workers would adhere to state based legislation around minors providing informed consent to participate in counselling which states that:

  ‘a minor is … capable of giving informed consent when he/she achieves a sufficient understanding and intelligence to enable him/her to understand fully what is proposed’

  (National Children’s and Youth Law Centre [NCYLC] 2004).

It may be difficult to make an assessment of the above in an online environment.

Identity

If conducting social work interventions solely online, there could be issues with identifying that the person on the other end of the chat room, blog or email is the person they say they are.

Some considerations and recommendations include:

- Arranging a face to face, telephone or video phone meeting with the client, not only to obtain full informed consent, but also to gain a sense of the client, how they talk, what language they use etc, to help aid with identity.
- Consideration may be given to agreeing on a personalised code word or phrase that helps to verify the identity of each party before the start of every online therapy/counselling session.

Professional Boundaries

As discussed in parts 1 and 2 of this suite of ethics and practice guidelines, professional boundaries can be easily blurred when technologies such as email, text and instant message, and social networking sites are used. While some practitioners believe that maintaining online relationships with clients are useful as a therapeutic tool, Kolmes and Taube (cited in Reamer 2013, p. 5) have concerns that online relationships may lead to boundary confusion. This is an important consideration and issue for social workers who use such technologies more formally, for the provision of professional social work services.

It is important for social workers to be cognisant of the fact that by using more informally perceived modes of communication for service provision, professional boundaries may become more fragile. Reamer (2013, p. 13) warns that by having extensive communication with clients outside of normal working hours may give clients the impression that their relationship is fluid and not bound by parameters that ordinarily define professional/client relationships (Reamer 2013 p.13).
Some considerations and recommendations include:

- Discuss boundaries in an online environment with clients.
- Contract with clients around when the sessions will take place, how long the sessions will last for, and what subject material might not be appropriate during such sessions.
- Make an agreement with clients around the time frame in which emails will be responded to. Social workers will also need to be clear with clients when emails will not be read, for example on weekends or after 6pm on weekdays,
- and ensure that clients have emergency referral information if needed.
- Discuss with clients the distinction between professional online presence and personal online presence. Discuss that the former is the only means by which social worker and client should communicate. Clients should be provided with an alternative and appropriate contact for crisis situations.
- Consider what is visible in the office or space you are working from (as you would in any working space). For example, if a social worker has pictures of children or family in the background, this could elicit the client asking questions or initiate conversations that are of a personal nature and therefore blur the boundaries of professional relationship.
- Ensure work is conducted from a relatively sound proof space if working from home particularly if there are others in the house at the time.

**Technology Failure**

Social workers who plan on providing services online should ensure that they have stable IT systems to reduce risk of a technology failure.

Social workers also need to consider what procedures they will follow if a technology failure were to occur partway through an online session with a client. It could potentially be harmful to a client if a therapy or counselling session is prematurely terminated for this reason, especially if the social worker is not able to regain contact with the client with reasonable immediacy.

Some considerations and recommendations include:

- Discussing and making an agreement with clients regarding a procedure to follow in the event of termination of an online session due to technology difficulties or failure.
- Asking clients to provide an alternative means of contact, such as a mobile phone number, to use to close the session safely or continue with the session if that is appropriate and agreed by both parties.
Lack of visual and verbal cues

Some of the inherent skills social workers possess are the use of eye contact, body language and other physical and verbal cues such as tone of voice and facial expression. These can be lost with online (and telephone) communication method.

Some considerations and recommendations include:

- Discussing the possibility of misunderstandings with clients, and encourage clients to inform social workers of any misunderstanding or concerns they may have in relation to something a social worker has communicated.
- Pollock (2006 cited in Robinson 2009) suggests the use of emoticons (a representation of a facial expression such as “😊”) and ‘emotional bracketing’ which indicates in brackets what thoughts or feelings you might be aware of experiencing while writing a particular passage. For example, ‘last comment said with concern and worry’. Pollock also discusses ‘descriptive immediacy’ which essentially is describing one’s immediate state, physically, intellectually or emotionally, right at the time of writing (for example “as I consider your success, my smile is wide and I’m nodding my head”)

Legal/Statutory and Insurance Issues

If providing an online or remote service to a client who lives or resides in a different state or territory of Australia, or another country altogether, the social worker should be aware of any differences in statutory obligations or differences in legislation that may apply to their interstate or overseas client prior to the commencement of the professional relationship. AASW members receive professional indemnity insurance for social work activities. In most cases, the AASW would consider online counselling/therapy services a ‘social work activity’ for the purposes of insurance. The insurance policy covers worldwide social work activities, but excludes the USA and Canada. Social workers would need to obtain separate insurance cover if working with clients in these countries. Before exploring alternative insurance coverage, discuss with clients whether their needs would be best met by accessing services from a local service provider.

Online Resources – e-Therapy and e-Interventions

If a person was to type the term “depression” into a search engine such as Google, an array of sites would be displayed including a Wikipedia page, homepages for organisations such as Beyond Blue and Reach out, as well as other sites which advertise ‘do it yourself’ checklists or information about depression written by professionals.

If a social worker plans on creating such online resources for the public or using tailored and structured E-Therapy programs, there are several ethical considerations in relation to this:

- All external resources should be cited on any site created by a social worker.
- Be clear about credentials and the limitations to knowledge and skill base if techniques, mechanisms and different types of interventions are in any way endorsed or recommended.
• Inform users about the nature of any products advertised, the risks associated with their use, the outcomes, reliability, validity measures and other information required to evaluate the soundness of the test. Social workers should be clear that on-line ‘do-it-yourself’ assessment is not a substitute for a formal psychological evaluation.

• Provide information about the current state of knowledge regarding effectiveness. This should always be dated so as readers are aware of the currency of the information.

• Any information posted to the web should state the purpose of this information and how it should be interpreted. It would be advisable to include a disclaimer stating the limitations to any information provided.

• Contact details for where readers may go for further information/support should be provided.

• Informal online forums, such as an informal chat/Q and A forum, have certain limitations such as privacy cannot be guaranteed. Social workers should clearly recommend on their site that users remove any identifying information and the reasons for doing this.

• Be clear about legal responsibilities with respect to advertising businesses online. The Australian Competition and Consumer Commission discusses the requirements of businesses who advertise via social media: http://www.accc.gov.au/business/advertising-promoting-your-business/social-media