

February 14, 2017

Social Work in a Digital World: Ethical and Risk Management Challenges

What follows is a brief and by no means complete summary of a six-hour presentation by Fred Reamer, Ph.D, Professor, School of Social Work, Rhode Island College that was presented on May 15, 2016, at the Hunter College School of Social Work. The presentation was, as the title says, about risk management and therefore speaks to areas in which we can run afoul of legal and ethical expectations/requirements. It is offered to give a taste of what has changed since the “digital revolution” in the practice of psychotherapy and mental health services.

Technology has made great changes in Clinical, and non-clinical, social work, some of it without much fanfare or notice. At the same time technology is providing new challenges both by its very existence and by the demands it places on the helping relationship. While many of us think of "big ticket" items like telemental health, such as the delivery of mental health services, psychotherapy, to remote patients (patients not sitting in the room with us), or electronic billing and record keeping through clearing houses and off-site creation and storage of records through a web-based service, these are only the most obvious of the changes to social work. Text messaging, Voice-Over-Internet-Protocol (VOIP) phone systems, are other, less noticeable ways that the digital world has brought changes and challenges in how we work, the ethics of what we do and the risk in doing it.

Key ethical issues that arise in this new world are

- Informed consent
- Privacy and confidentiality
- Boundaries, dual relationships and conflicts of interest
- Practitioner competence
- Records and documentation
- Collegial relationships

While this list is similar to a list of key ethical issues that exist in the non-digital world, new dimensions are added by the use of digital technology. For example, is there a time limit on when a patient can send a text message? How early? How late? What is a "reasonable response time" to a text message and how to reply? Text? Voice? What if the patient is texting after hours in crisis? Is the patient alone or is someone else reading the texts? Is the text program

encrypted and can the text messages be printed or otherwise stored in the patient's record so that there is confidentiality and accountability? These questions touch on all of those bullet point issues, and that's just one example of the impact of digital technology on how we do our work.

Whereas in the past we only had to deal with in-person, phone and written communication we are now faced with those and text messaging, video conferencing, email, FaceBook, LinkedIn and other "social networking" sites by which our patients can contact us. From these same sources they can learn more about us than may be necessary or wise from an ethical and legal point of view. Similarly we can learn more about them than we would have just from the consulting room. The possibility also exists to create a relationship that takes on a more than therapeutic nature. When we start blurring boundaries on social networking sites we get into risky areas. We may carelessly say something injudicious about ourselves or a colleague. We could even invade a colleagues privacy by performing a search with one of the many search engines available.

How do we determine who is a "high risk" patient if we are performing remote psychotherapy with someone we have never met? Some of the services that provide remote psychotherapy, e.g. TalkSpace, allow for "anonymous" sessions. Therapists don't see that patient and all contact is performed through a chat session. Other programs allow the creation of an avatar, a video representation of yourself, that can be changed from session to session.

The statutory laws about telemedicine for New York State have been written but not the regulatory law that determine how it will be implemented, nor have the court challenges which create the case law that will determine the edges of practice begun. The Association of Social Work Boards (ASWB) International Technology Task Force has just completed Model Regulatory Standards for Technology and Social Work Practice, The American Medical Association (AMA) has just taken from the table "...a set of guidelines focused on ethical considerations related to the use of online or mobile visits between patients and physicians..." that was tabled a year ago to be rethought. It has taken this from the table as "...remote visits has turned into one of the biggest trends in healthcare..." The American Telemedicine Association issued Practice Guidelines for Video-Based Online Mental Health Services in May of 2013.

There are rewards and there are pitfalls to digital technology as it pertains to social work. In order to reap the rewards we need to be aware of the pitfalls, the ethical dilemmas and risks inherent in the use of these new means of service delivery and practice management.

Jay E. Korman LCSW