

Maintaining Confidentiality

Presented by

Foster Home Licensing Team

Permanency Planning- Social Work





What is Confidentiality?



- Confidentiality means that information shared within a relationship will not be shared outside that relationship.
- The birth parent of a foster child has the right to have the information about them maintained by the agency kept confidential.
- There are rules and regulations about what confidential information the agency can share with other team members, including the foster parents.
- Parents themselves may share confidential information with the foster parents; however, the foster parents must keep personal information in confidence with the understanding that foster parents must share information with agency staff.





Why is this important?

Foster parents are privy to a lot of sensitive information. They are expected to keep this confidential. Violation of confidential information can result in the revocation of a foster home license.

By disclosing confidential information about the birth parent(s) and/or the foster child to a friend, relative, another foster parent, you are violating that person's right to privacy.

As a foster parent, you are a member of the professional child welfare team. Remember the six principles of System of Care Framework:

- 1. Everyone desires respect
- 2. Everyone needs to be heard
- 3. Everyone has strengths
- 4. Judgments can wait
- 5. Partners share power
- 6. Partnership is a process





What is considered confidential in child welfare?

- Birth Parent's:
 - ✤ Identifying information
 - Substance use (current or history)- Protected by Federal Law HIPPA
 - Case plan
- Foster Parent's:
 - Background information: family history, how many children the foster parent have, education level, salary, etc.
 - Last name, address, phone
 - History of substance use, domestic violence relationships, mental/emotional health issues, etc., if applicable.
 - Unless, the foster parent volunteers this information for the purpose of building rapport with the birth parent and/or for the purpose of shared parenting.
- ✤ ASK YOURSELF:
 - Is this information relevant to child safety?
 - Would I want the information shared if this was me in such situation?
 - What is the purpose behind someone asking for or sharing information?





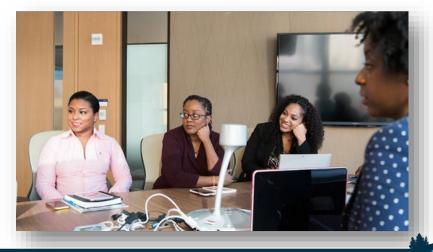
Child and Family Team Meetings (CFT's)

During CFT's, every participant must sign a confidentiality agreement. No information shared by the meeting participants should go out the door and be shared with fellow foster parents, relatives, church members, etc.

However, there are three exceptions to the rule:

- 1. If a participant is a threat to themselves or others, the information will be shared with the appropriate agencies such as local police department, hospital if needed, suicide prevention agency, etc.
- 2. If a participant makes allegations of child abuse, neglect or dependency OR allegations of a disabled adult exploitation, abuse or neglect, a CPS/APS report will be made. Note: Allegations which have not been yet investigated by CPS/APS.
- 3. All information shared at the CFT's can be shared with the Court for the purpose of updating the legal system of case dynamics.









WhatsApp

Social Media Policy

- No identifying information about foster children in your care should be posted in the internet or in social media outlets.
- Social media can be used as a means of shared parenting between foster parents and biological parents please consider the following recommendations:
 - > All communication remain child focused and refrain from discussion of case specifics.
 - Opinions of the case progress or professionals involved; remain neutral and positive
 - Set boundaries early on in regards to how often information may be shared or how frequently or timely you will respond to questions and/or inquiries.
 - > No fake accounts or identities should be used for communication with parents or team members.
- Foster parents can post pictures of the foster child on social media; HOWEVER, the child must not be labeled as "foster child" nor should have any identifying information.
- You may talk to another caregiver online about the foster child such as seeking advice; HOWEVER, no identifying information can be provided, otherwise, it will be a breech of confidentiality.
- Help the child in your care to wisely use technology and social media by being aware of the dangers of internet and by setting up the necessary parental controls.
- > Check out this link for more tips and information: <u>https://www.childwelfare.gov/pubPDFs/smtips_parent.pdf</u>











As a foster parent, you are have the right to have the following information:

Outside of the Child and Family Team meetings:

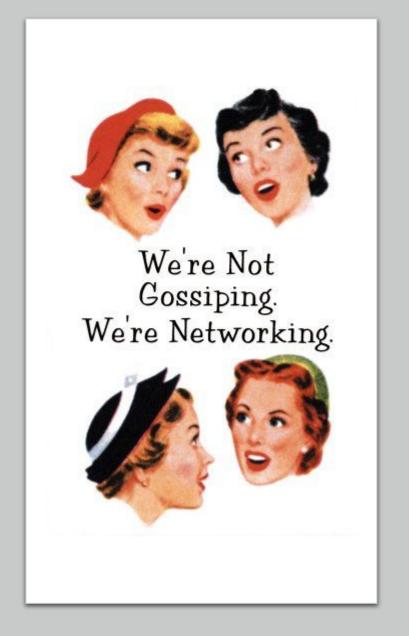
- Child's medical history (including past hospitalizations, allergies, past and current medications, etc)
- Child's educational history (including IEP's and 504B plans)
- The behaviors the child has exhibited in the past
- Upcoming court hearing and Child and Family Team meeting dates
- The visitation schedule between the child and birth parent
- The dynamics between the child and their birth parent during a family visitation
- The reason the child entered custody (domestic violence, substance use, physical abuse, etc. Remember that substance use is protected by HIPPA)
- Child's likes and dislikes, what triggers the child, child's demeanor when they are happy, sad, angry, etc.
- Any other child-specific information related to their well-being



OMBE COUNTY







Scenario #1



Margaret (foster mom #1): I was at DSS yesterday because Lucy's mom had a CFT. Let me just tell you, it was a long one.

Susan (foster mom #2) : Oh yeah? Tell me all about it. I want to hear the juiciest details.

Margaret: Well, Sandra showed up high. Well, I don't know if she was using but her eyes looked red. You know she has a history of heroin use so it would not surprise me.

Susan: You know, I heard she was back with Jack and we all know what that means. I don't know how DSS just ignores this. Lucy has witnessed so much domestic violence between them.

Margaret: Lucy's social worker was all like, "Trauma-informed practice... Often victims of DV will use substances to cope with the pain they are going through, blah, blah, blah. What about Lucy? I would adopt her, and she won't ever have to deal with this again.

Susan: Agreed! Keep me posted about the case.



Think about the following:

Keep a record of your answers.



- 1. What federal law was broken?
- 2. How would you feel if another adult was sharing your private information without your consent?
- 3. How would Lucy feel knowing that other adults are negatively talking about her parents?
- 4. What principles of System of Care Framework were broken?







Scenario #2

Margaret (foster mom #1): I was at DSS yesterday because Lucy's mom had a CFT. Let me just tell you, it was a long one.

Susan (foster mom #2) : Yes, there is a lot of topics that need to be covered. I can see how it would be a long one.

Margaret: Lucy's mom, Sandra, needs a lot of support right now. She is going though a difficult time and the best thing I can do is to continue to care for Lucy and do shared parenting with Sandra.

Susan: You know, I ran into Sandra at DSS when I was dropping off Lucy's brother for his visit with Sandra. Sandra shared that she is back with Jack and she asked that you and I do not share this information with the children and that she would like to be the one to do it.

Margaret: She shared the same thing at the CFT. Lucy's social worker urged us to look at the case through a trauma-informed lenses. Often victims of domestic violence have a difficult time leaving their perpetrator due to various reasons.

Susan: Did Sandra appear high at the CFT? I thought she was when I ran into her at DSS. Or was anything shared at the CFT about whether she is in treatment?

Margaret: I am not sure I can share this information as I signed a confidentiality agreement and this information is also protected by HIPPA. I would not want to violate Sandra's right to privacy out of respect to her and Lucy. However, if you suspect that Sandra may have appeared under the influence, you should let the social worker know so they can follow up.

Susan: You are right. I did not think about this before I asked. I will follow up with the social worker.



Now think about this...

Keep a record of your answers.

- 1. How was scenario #1 different from scenario #2?
- 2. Do you think it was okay what Susan shared with Margaret about running into Sandra at DSS?
- 3. What principles of System of Care Framework were honored?
- 4. If you were Sandra, how would you feel knowing about the conversation?









https://www.surveymonkey.com/r/VZ8RQVX

Thank you for participating!

This training was made with specific state mandates and Buncombe County policy targeted. Some policies may differ dependent on licensing agency and county of placement origin. Please check in with your agency if this training could count as part of your ongoing in-service training hours.

