Students will maintain at all times the confidentiality of clients assigned to them in their field placement. They will protect the confidentiality of their clients when writing papers for their classes and when presenting cases in classes or in integrative seminars by changing clients’ names and disguising all identifying information. Please refer to the School of Social Work Guidelines for Maintaining Client Confidentiality for guidelines on how to protect and maintain client confidentiality and for suggestions on how to appropriately disguise identifying information.

Although we need to practice in accordance with the law and the NASW Code of Ethics in regard to confidentiality, the most compelling reason to maintain confidentiality should be out of respect for our clients. Veteran social work educator Alfred Kadushin advised that we should think of client information as a valuable possession of the client's temporarily lent to us. In fact, we need to remember that ownership of client information always resides with the client.

Though most mental health professionals are conscientious and intend to maintain the confidentiality of their clients, in fact many make unintentional mistakes throughout the course of their careers. The complexities involved in maintaining confidentiality are not a simple matter, and there are many challenges to our best intentions once we get out in the field and begin to practice.

Students are advised to carefully read the confidentiality policy of their field agency so that they are absolutely clear about with whom they may speak after the client agrees to receiving services from their agency.

Violations of Confidentiality

The following is a list of some common mistakes that practitioners or students may make that jeopardize clients' confidentiality:
• Leaving a message (other than just your name) for a client with someone other than the client or on a common answering machine.

• Accidentally running into a client in public and inadvertently revealing the nature of your relationship to others who happen to be around.

• Needing to share or just blow off steam and talking to a friend or family member about your day, and thus discussing client information.

• A family member of a client calls to get a message to your client and you agree to deliver it, thereby revealing the fact that you are seeing the client.

• A caring, concerned family member of your client calls wanting to know how she can help, or to share some information with you about the client, and you either inadvertently acknowledge that you are seeing the client and/or engage with the family member in a discussion about the client. In this example the client is not a minor, is not in danger of hurting self or another, and is oriented to person, place, and time.

• Feeling you need to answer a question regarding a client from someone with some authority, without a release (e.g., an emergency-room doctor, a lawyer, an insurance company representative, probation officer, etc.).

• A friend or colleague refers a client to you, wants to know if he/she called and how things are going, and you say yes and share a few things. Likewise, you call to thank a colleague for a referral without the client's permission.

• You run into a referral source that would like to know how things are going with a case, and you share a few things without a release from the client, or in a public place where the information can be overheard.

• A friend enthusiastically says she hears you are seeing someone she knows and that you are really helping. You acknowledge that you are in fact seeing the client.

**Guidelines for Maintaining Confidentiality**

Client information can be communicated verbally, nonverbally, or in written form, and all types of information need to be protected. The following are suggestions for protecting information:

• Get all necessary releases of information/informed consent in written form. If due to some pressing necessity you can only obtain it verbally, document that the client gave you the permission and then follow-up with a written release as soon as possible.

• Should you need to discuss a case or consult with another professional in the classroom or with an outside supervisor to obtain help with the care of your client, make sure you have adequately disguised all identifying information so the client is not recognizable. (See guidelines for disguising client information.)
• Should you ever recognize a client being discussed in an agency, classroom, etc., or with a person with whom you have some social or otherwise nonprofessional relationship and who is not aware that you may be privy to private information about that client, you should excuse yourself from the discussion and leave the room. (This is an ethical matter not a legal one.)

• Client information of any kind should not be transported out of the agency without explicit consent of the agency supervisor.

• Client information should always be locked up or otherwise protected. Don't leave papers with lists, appointment books, or documents with confidential information unattended (even if you are physically present). This includes writing case notes in public areas where others might see.

• It is your responsibility to educate or otherwise inform other nonprofessional personnel if you feel that they are in any way inadvertently exposing client information (e.g., leaving unfinished reports on the computer screen during lunch or speaking about clients in earshot of other people).

• When faxing information about a client, make sure you include a statement indicating the confidential nature of transmitted information on cover sheets. Client information must be adequately disguised when used for class assignments. Process recordings should be shredded after use, as well as papers containing client information when no longer needed for educational purposes.

Senate bill 19, sec. 56.101 reads, "Every provider of health care, health care service plan, or contractor who creates, maintains, preserves, stores, abandons, or destroys medical records shall do so in a manner that preserves the confidentiality of the information contained therein. Any provider of health care, health care service plan, or contractor who negligently disposes, abandons, or destroys medical records shall be subject to the provisions of this part."

Guidelines for Disguising Client Information

Regarding the disguising of confidential information, Senate Bill 19, section 56.05f states, "Medical information means any individually identifiable information, in electronic or physical form, in possession of or derived from a provider of health care or health care service plan regarding a patient's medical history, mental or physical condition or treatment. Individually identifiable means that the medical information includes or contains any element of personal identifying information sufficient to allow identification of the individual such as the patient's address, electronic mail address, telephone number or social security number, or other information that, alone or in combination with other publicly available information, reveals the individual's identity."
When preparing case material for classroom discussion or assignments, all identifying information must be deleted and disguised so as to maintain, with certainty the confidentiality of the client. However, students should not change the essential character of the case so that the analysis is affected. To ensure that legal compliance with confidentiality, students should check with their field instructor to make sure that they have disguised case information adequately.

The following are suggestions for disguising client information:

- Disguise ages of all individuals discussed, though keep within the same developmental stage or subphase.

- Disguise all names and clearly indicate in the paper that names have been changed.

- Give no exact dates including birth dates, referral dates, marriage dates, divorce dates, etc.

- Give no specific places including place of employment, birthplace, neighborhood, etc.

- Describe and disguise in general terms (e.g., client grew up on the west coast in a mid-size city, in a poor neighborhood).

- Disguise exact occupations, describe in a general way (e.g., works in the helping profession, works in a blue collar job, etc.).

- Disguise all numbers (e.g., exact years of education, exact years of marriage, etc.).

- Consider other aspects of the case that you can change without compromising the integrity of the case analysis. Could you change or not state the specific drug to which an individual is addicted? Could you change the exact nature of a physical problem?