

Establishing and Supporting Confidentiality and Boundaries



OBJECTIVES

At the end of this unit, participants will be able to:

- Understand confidentiality and the connection to HIPAA regulations
- Describe two situations in which confidentiality can (1) help and (2) hinder a CHW's relationship with a patient
- Recognize the impact of breaking confidentiality
- Identify and differentiate the four types of boundaries (emotional, place/time, physical, and personal)
- Discuss the importance of boundaries in professional relationships
- Develop strategies to manage situations when boundaries are crossed



INSTRUCTIONS

1. Welcome participants and review the objectives.
2. Discuss what confidentiality is and why it is important. Engage participants in a conversation about confidentiality and rules in their organization (slides 3–4).
3. Discuss HIPAA (slide 5).
4. Ask participants, "In what instances can confidentiality be broken?" Record responses from the group and compare with the list on slide 6.
5. Review slides on what happens when confidentiality is breached, and how supervisors can manage confidentiality (slides 7–8).
6. Distribute the Relationships and Boundaries in CHW Work worksheet and conduct boundaries activity (slide 9).
7. Review and facilitate discussion about types of boundaries (slides 10–27).
8. Activity: Case Scenarios. Distribute Boundary Scenarios handout. Ask for volunteers to read each scenario and solicit feedback on how they would handle the situation as a supervisor.
9. Wrap up: Ask for a volunteer to read the closing summary (slide 29).



Method(s) of Instruction

Lecture, brainstorm, group discussion, self-assessment



Estimated time

60 minutes



Key Concepts

Boundaries, confidentiality, HIPAA regulations



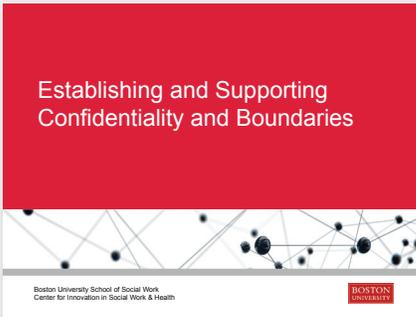
Materials

- Computer with projector and internet connection
- PowerPoint slides
- Flip charts
- Markers

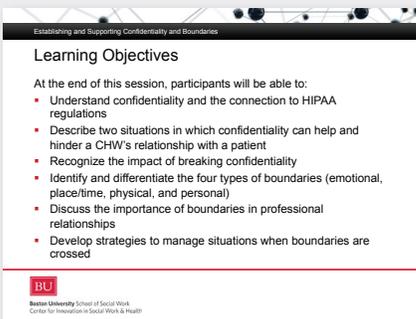
Handouts

- Relationships and Boundaries in CHW Work Worksheet
- Boundary Scenarios

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SLIDE 1

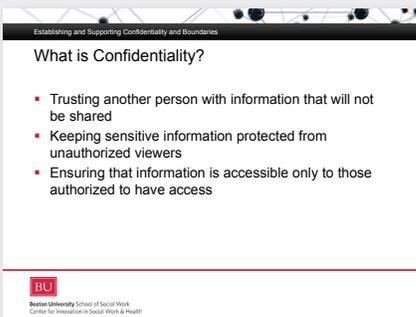


SLIDE 2

Review the slide.

Ask participants, "What is confidentiality?"

Facilitate a brief discussion.



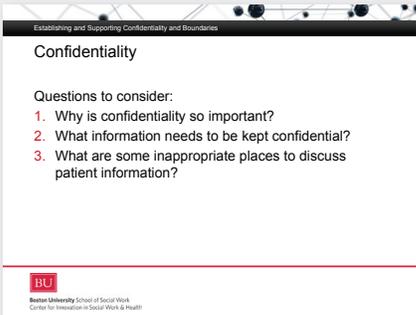
SLIDE 3

Review the slide.

Unauthorized viewers can vary from one organization to another, but generally, unauthorized users are people who are not employees of the organization.

In many cases, even among employees, only those working directly with a patient and their supervisors have access to patient files.

Engage the participants in a conversation about confidentiality rules in their respective organizations. Ask about specific policies, how they're applied, and their consequences.



SLIDE 4

Ask participants to brainstorm responses to question 1 and write answers on a flip chart sheet. Possible answers:

- People need to be able to trust their CHW
- People need to feel safe
- We must respect the dignity of individuals
- If clients don't trust us we may lose them
- It's agency policy
- There are liability issues for the agency

Tell participants that beyond file access, CHWs hold a lot of personal information about clients and have an ethical responsibility to guard that information from unauthorized users. This can be tricky because as members of the community, CHWs may travel in some of the same circles as their clients, and when clients see them in those circles, they may wonder if the CHW will guard their information. Any "leaks" will get back to patients and before you know it, other patients will know that the CHW can't be trusted. This could impact the effectiveness of the CHW at building trust and can lead to negative consequences.

Ask participants to brainstorm responses to question 2 and write answers on a flip chart sheet. Summarize by stating that everything about the patient is confidential.

Possible answers:

- Patient's name, address, phone number
- Diagnosis
- Medical information
- Patient's relationship with CHW

Ask participants to brainstorm responses to question 3 and write answers on a flip chart sheet.

- Possible answers:
- Clinic and office hallway
- Email communication with the patient's full name
- Outside of the clinic/agency; for example grocery store, community meeting places
- Anyplace where others can hear what you are talking about

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Health Insurance Portability and Accountability Act (HIPAA)

- The federal government established this act to maintain and protect the rights and interests of the patient. HIPAA defines the standard for electronic data exchange, protects confidentiality and the security of health care records.
- The privacy or confidential rules regulate how information is shared. Upon engagement of health services (pharmacy, medical visit, social services etc.) the patient is informed of his rights to confidentiality and the policy and procedures regarding the release of his personal health information.
- The patient signs form stating that he or she received and reviewed HIPAA policy.

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SLIDE 5

Ask participants if they know of any legal reasons why confidentiality is kept and for what reasons?

Introduce and review the Health Insurance Portability and Accountability Act (HIPAA). Have a volunteer read the slide.

Acknowledge that some in the room may recall completing forms at medical appointments, pharmacies, etc. that acknowledge their receipt of the HIPAA law.

Next, ask when confidentiality can be broken? Write answers on a flip chart sheet.

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Situations When Data Can Be Released Without the Patient's Permission or Consent

- For the purpose of reporting abuse or neglect of a child, elderly, or disabled person to the proper social service agency
- If a patient is suicidal or homicidal, or an actual homicide is committed
- To prevent serious threat to health and public safety.
- To the department of public health for health reporting purposes.
- To inform appropriate bureaus during disaster relief.
- Workers' compensation.
- To the Food and Drug Administration for expected side effects of drugs, or food product defects to enable product recall.
- Correctional institutions.
- To medical examiners, coroners, procurement of organs, or certain research purposes.
- To notify family members or legal guardians involved in the patient's care if a person is missing (example Amber or Silver alerts on television/radio).

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SLIDE 6

Review the slide and compare with the responses on the flip chart from the previous slide.

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What Happens When Confidentiality is Not Respected or is Breached?

- The patient may be embarrassed
- The patient can lose trust in the CHW and the agency
- The patient may file charges against the CHW and the agency
- The employee may be reprimanded, given a warning or be dismissed from the agency
- The agency could be fined criminal penalties for disregarding HIPAA

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SLIDE 7

Review the slide.

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Supervision Strategies for Managing Confidentiality

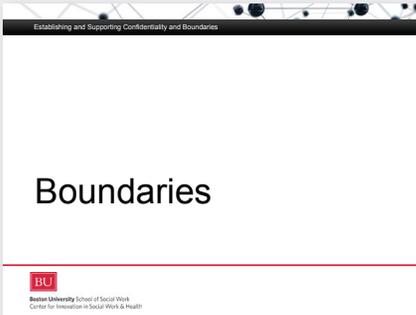
- Review program policies/procedures on patient confidentiality and HIPAA laws
- Expect CHWs to adhere to HIPAA laws
- Encourage CHWs to respect patient confidentiality
- Remind CHWs to have signed patient consent forms before sharing information

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SLIDE 8

Ask for a volunteer to read the slide.

Ask participants, "What are other strategies you might use?"



SLIDE 9

Ask participants, “What are boundaries and why are they important?”

Possible responses:

- for patients to feel safe
- for staff to feel safe
- for supervisors to feel safe
- to prevent peer burnout
- to prevent misinformation
- to prevent liability
- to keep patients engaged with the organization

Some boundaries are non-negotiable, as established by professional codes and agency policy, while others are more personal, and may be different from person to person or situation to situation.

CHW-related boundaries have always been a concern for service providers.

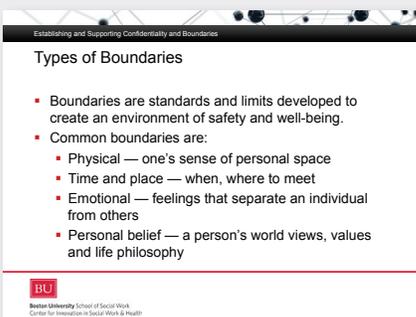
We tend to be more concerned about CHW boundaries than with other employees. Ask, “Why do you think this is so?” Take a few responses.

Possible responses:

- higher level of intimacy
- lack of experience in the workplace
- wanting to be all things to patients
- not knowing the limits of their roles

Boundaries Activity:

- We are going to do an individual exercise that will help you reflect on your own boundaries.
- Distribute the Relationships and Boundaries in CHW Work worksheet and allow some time for participants to write down their responses.
- Ask participants to share their answers and facilitate discussion. Were there any gray areas? Are there boundaries they felt strongly about or boundaries they just couldn't answer at all?
- **Key Point:** It is important for the supervisor to understand their own boundaries before they attempt to supervise a CHW around boundaries.



SLIDE 10

Review the slide.

Ask, “Why are these boundaries important and necessary, in general and specially for CHWs?”

Write responses on flip chart sheets – each type of boundary could be on its own sheet.

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Examples of When Physical Boundaries are Not Respected

- When someone approaches to talk about an issue and they get too close
- Looking through patient medical records without consent or relevance to work
- Inappropriate touching such as unwanted sexual advances

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SLIDE 11

Review the slide.

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Example of a Physical Boundary

A CHW is preparing to make appointment reminder phone calls for the next day's clinic. As the CHW is going through the list, the CHW says, "Hey, I know him; we went to high school together."

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SLIDE 12

Let's look at an example of a physical boundary that was addressed in supervision.

Talking points: When the CHW brings up this issue during supervision, it is important for the supervisor to acknowledge that often times we may know patients who come to the clinic, but it's important to respect our client's boundary by not revealing that we know them when we see their names on appointment calendars or in electronic medical records.

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Supervisor Strategies

- Model statements CHWs can use with patients or coworkers to respect physical space
- Review program policies/procedures on patient confidentiality-HIPAA laws
- Examine with CHWs how patient data can support achievement of adherence goals
- Encourage CHWs to review the agency's employee handbook to ensure understanding of the organizational policies

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SLIDE 13

Review the slide.

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Examples of Time Boundaries

- Start times and end times for work
- Allotting time to meet with a patient that allows for enough time to achieve goals
- Ending a meeting with a patient after an appropriate period of time, even if the patient wants to continue

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SLIDE 14

Review the slide.

Key idea: CHWs who model good time boundaries can help patients set boundaries with others in their lives.

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Time Boundary Scenario

Jill, a CHW, says that she is making good strides with her client who recently started coming back to the clinic. The challenge she has is that this particular client comes in daily and she is struggling to find time to work on finding other clients on the "out of care list."

As her supervisor, what recommendations do you have for Jill?

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SLIDE 15

Ask for a volunteer to read the scenario.

Ask participants, "What recommendations do you have for Jill?"

Talking points: Supervisors can initiate dialogue with CHWs about why it might be important to have time boundaries, and how it helps them AND their patients. By respecting time boundaries CHWs can help avoid overextending themselves and patients can feel that their time is respected by the CHW. It can also build a sense of trust. In this situation, Jill models for the client the ability to manage time and can refer the client to others on the team who can help them.

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Supervisory Strategies

- Expect CHWs to be on time
- Coach CHWs to begin and end patient meetings on time and within reasonable timeframes
- Teach CHWs to communicate to patients how long meetings will last
- Consider protocols regarding when CHWs may meet with patients
- Remember that time boundaries demonstrate respect for supervisors, CHWs, and patients
- Model good time boundaries as a supervisor

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SLIDE 16

Review the slide.

Connect these talking points about supervisory strategies to the roles of the administrative supervisor and clinical supervisor.

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What are Place Boundaries?

- Place boundaries help programs define best practices for where CHWs meet with patients
- Program managers and supervisors will want to consider the local community, the local medical network, safety issues, and the role of CHW work
- Decide where CHWs and patients can meet and clearly communicate this to the CHW team
- Consider allowing for flexibility based on patient needs and the CHW's experience

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SLIDE 17

Review the slide.

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Place Boundary Scenario

The CHW reports that their client lives in a neighborhood near a homeless shelter where many intravenous drug users hangout, otherwise known as "Recovery Zone."

What would you suggest to your CHW?

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SLIDE 18

Read the example.

Ask participants, "What would you suggest to your CHW?"

Talking points: The supervisor should remind the CHW of the agency's safety policies and recommend that they meet with the client in the clinic or at a community location where the CHW feels safe.

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Supervisory Strategies

- Review issues regarding “safety in the field” and encourage CHWs to express any fears associated with lack of safety
- Decide where CHWs and patients can meet and clearly communicate this to the CHW team
- Consider allowing for flexibility based on patient needs and CHW’s experience

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SLIDE 19

Review the slide.

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Examples of When Emotional Boundaries are Crossed

- Blaming others, not taking personal responsibility for actions
- Imposing one’s feelings or ideas on another
- Allowing patient statements to have a negative impact on services the CHW is providing; patient may insist that they are not being helped

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SLIDE 20

Another type of boundary is emotional boundaries.

Sometimes a CHW may impose their feelings on their patients; for example if a patient is pregnant and the CHW wants the patient to get on medication right away, they may insist that the patient see her doctor, when the patient does not want to for fear of potential harm that may come to the baby from HIV medications. It is important in this situation that the CHW not say anything that may make the patient feel guilty, but use the time to educate the patient about benefits of being on HIV medications, and help the patient make a list of questions to ask the doctor about pros/cons of medications during pregnancy.

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Emotional Boundary Scenario

Your client knows you are a single mom as she is and is asking to borrow \$20 to buy formula for her baby. She states she will repay you when she gets her SSI check and says, “Do you want my baby to go hungry?”

What recommendations do you have for the CHW?

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SLIDE 21

Read the scenario and ask participants for their recommendations.

Talking points: They should remind the CHW of the agency policy that states that staff do not loan money to clients. Encourage the CHW to provide community resources for the client so that she may secure formula for their baby.

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Supervisory Strategies

- Coach CHWs to separate what they do and do not have control over
- Teach CHWs to let go of work-related issues after their assigned work hours
- If the CHW has an agency work phone, suggest they turn it off after work hours
- Encourage CHWs to set boundaries with patients, health care staff, and interdisciplinary teams
- Model self-care

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SLIDE 22

Review the list of supervisory strategies.

Ask participants if they can give an example of how these strategies connect to the administrative and/or clinical supervisor roles.

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Defining Personal Beliefs for CHWs

- A personal belief includes one's world view, values, and life philosophies.
- Personal beliefs include one's religious beliefs and political beliefs, etc.
- We all have a right to our beliefs, but sometimes our actions must be controlled in order to respect the rights of others.

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SLIDE 23

Review the slide.

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Personal Belief Boundary Scenario

The CHW's client is of Muslim faith and has shared that she must get permission from her husband to meet regularly. The CHW told the client that she lives in the US and it's the "land of the free" where everyone has equal rights.

A colleague has shared with you what the CHW told the client. What would you do as the CHW's supervisor?

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SLIDE 24

Read the scenario and ask participants for their recommendations.

Talking points: It's important to remind the CHW to respect a client's beliefs, and that while the CHW may have strong opinions, there are clear boundaries that they must respect. Negative statements may strain the client-CHW relationship and impact their work together.

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Supervisory Strategies

- Encourage CHWs to allow beliefs to support and inspire them, without imposing their beliefs on patients
- Find ways for CHWs to learn about cultural and other differences
- Encourage CHWs to consider individual differences between people with similar belief systems

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SLIDE 25

Review the slide.

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Boundaries, the Interdisciplinary Team, and Supervisory Considerations

- CHWs may identify more with the patient role than coworker/colleague role
- CHWs may defer decision-making to providers
- Lack of time boundaries regarding team meetings (i.e., lateness) may indicate CHWs' misunderstanding of their importance
- Providers may balk at communicating boundary issues because they are afraid of offending CHWs
- CHWs may elicit caretaking from providers, and/or providers may take the lead by offering it

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SLIDE 26

Review the slide for additional considerations related to CHW boundaries.

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Supervisory Strategies

- Continually communicating to CHWs their value and importance (use specific examples)
- Reminding CHWs that their input is the voice of patient advocacy
- Communicating professional norms to CHWs and educating providers to do the same
- Helping CHWs talk through how to distinguish between their roles as a patient (if they are) versus a CHW provider

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SLIDE 27

Review the slide.

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Activity: Case Scenarios

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SLIDE 28

Distribute Boundary Scenarios handout.

Ask for volunteers to read each scenario and solicit feedback on how they would handle the situation as a supervisor.

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Summary of Tips for Setting Boundaries

- Clearly define the CHW/patient relationship/roles
- Set guidelines so patients know what to expect in sessions
- It's important to respect boundaries once set
- Immediately let others know when they have crossed boundaries, and how they were crossed
- Follow through on what you said you would do if boundaries are crossed
- Separate boundary-setting and being empathic to the client's need to share their feelings

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SLIDE 29

Ask a volunteer to read the slide.

Relationships and Boundaries in CHW Work

Decide whether **for you** each of these situations is clearly Always Okay or Never Okay. If there are times when it might or might not be okay, depending on circumstances, check Sometimes Okay. Then make a note as to **when** or under **what circumstances** would make that behavior okay. Discuss your decision with others.

Behavior	Always Okay	Never Okay	Sometimes Okay (When?)
1. Keep your attraction to your client secret from supervisor/team			
2. Keep client's attraction to you secret from supervisor/team			
3. Keep boundary concerns secret from supervisor/team			
4. Bend the rules for an individual client			
5. Share religious/spiritual beliefs with client			
6. Advocate for a client despite your team/agency's opposing view			
7. Share after-hours social time with a client			
8. Bring a client to your home for any reason			
9. Share a meal with a client			
10. Engage in common interests with a client			
11. Spend time alone with client in their apartment			
12. Lend money to a client			
13. Lend personal items to a client			
14. Accept a loan of money from a client			
15. Accept a loan of personal items from a client			
16. Give a gift to a client			
17. Accept a gift from a client			



Behavior	Always Okay	Never Okay	Sometimes Okay (When?)
18. Call a client after work hours			
19. Accept a call from a client after work hours			
20. Accept a call from a client at your home			
21. Invite clients to a party at your home			
22. See a former client as a friend			
23. Date a former client			
24. Accept a hug from a client			
25. Initiate a hug with a client			
26. Accept a massage from a client			
27. Initiate a massage with a client			
28. Take a client to your church			
29. Take a client to your self-help meeting			
30. Ride in a client's vehicle			
31. Encourage your client to disclose to their partner(s)			
32. Encourage your client to disclose to their family members			
33. Disclose your own HIV status and your life story to your client			

Boundary Scenarios

What would you do?

I'm a little short on cash today and have no money for lunch, can I borrow \$5.00?

Would you like to go to the movies with me sometime?

Let me give you a ride home.

Listen, I don't like the open shower at the shelter, can I take a shower at your place?

I really like that dress, can I borrow it for a wedding I've been invited to?

You've been so good to me; can I give you a wet one?

You look stressed out, let me give you a massage.

I bought you a gift for being so nice to me.

I brought you a cake for your birthday, I baked it myself.

How much money do you make doing this job?

Can I have your cell phone number in case I need to contact you at night?

Remember you told me that you use medical marijuana? I got some good weed if you want to buy some.



It's really hard to come in to see you because I work until 5:00 p.m. and the office is closed. Can you meet with me at night?

Listen, I'm in a lot of pain, can you give me some pain killers?

I'd like to invite you to a 4th of July cookout.

My health has been so stable that I think I want to go back to work. Can you help connect me to training or employment programs?

My nurse did a TB test a couple of days ago and she told me to come back in a couple of days to measure it but I can't wait, can you measure it and let her know?

Can you take my blood pressure?

Since John is my new CHW now and I'm no longer your client, can we go out to dinner sometime?

Can you fill out this application for Medicaid for me?

I need you to give me a referral to housing.

I need you to get me into substance abuse treatment.

I need you to help me find a new doctor.

Acknowledgements

This curriculum draws from and is adapted from the expertise and experiences of the authors. We are also grateful to the supervisors who participated in the training from the following Ryan White program funded sites: 1917 Clinic, University of Birmingham, Alabama; East Carolina University Adult Specialty Care Clinic; Franklin Primary Health Center; McGregor Clinic; Southern Nevada Health District; CrescentCare; Newark Beth Israel Hospital-Family Treatment Center; the JACQUES Initiative; Legacy Community Health; and the Southwest Louisiana AIDS Council. You all taught us as much about how to be a successful supervisor, as we taught you.

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This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) number U69HA30462 "Improving Access to Care: Using Community Health Workers to Improve Linkage and Retention in HIV Care" (\$2,000,000 for federal funding). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

Suggested Citation:

Boston University Center for Innovation in Social Work & Health. (2019). A Training Curricula for Using Community Health Workers to Improve Linkage and Retention in HIV Care. Retrieved from: <http://ciswh.org/chw/>



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