

# Welcome to the YSBIV Foster Parent/Relative Caregiver Confidentiality and HIPAA Training





#### Confidentiality.....What does it mean?:

It is the preservation of personal information about an individual. Personal information shared with you about a child or family, both verbally and/or written, is private and confidential, and should not be shared without written consent from the client or the client's (child's) legal guardian.

- This training will focus on the law that governs protecting personal information known as the HIPAA Regulations, what information you are entitled to know as a foster parent or relative caregiver, and the responsibilities and importance of maintaining confidentiality.
- The topics covered in this training are important to help you understand the importance of and obligation to protect the privacy (confidentiality) and security (safeguarding) of the child and their family's confidential personal information and health data, which HIPAA calls Protected Health Information or PHI, and will focus on certain topics more than others.



# Why Comply With Confidentiality and HIPAA Laws?

- Our clients are placing their trust in us *and you* to preserve the privacy of their most sensitive and personal information, it's the law!
- As a member of the foster team, foster parents/relative caregivers are bound by the same expectations of protecting confidential information as our employees.
- ▶ Foster Parent 402 Licensing standards state:

#### **Section 402.24 Confidentiality of Information**

All personal or identifying information concerning a foster child, including but not limited to, his background, his family, and the identity and location of all other persons or families with whom he has been, or will be placed, shall be treated as confidential by all persons involved with the child.

#### If you choose not to follow the rules:

You put yourself at risk, which can include **personal** penalties, sanctions, and corrective actions by the agency, and may result in a licensing complaint.



# Why is Confidentiality and HIPAA Important in Foster care?

Foster parents are entrusted with confidential information about children in their care, and will learn additional confidential information about children and their families as a result of their work as foster parents. It is the **client's right and expectation** that confidential information will be respected and safeguarded by the agency.

#### Illinois Foster Parent Law states under Responsibility # 2:

"The (foster parent's) responsibility to respect the confidentiality concerning foster children and their families and act appropriately within applicable laws and regulations."

Maintaining confidentiality is an important responsibility, it is an ethical and legal obligation that must be taken seriously. Foster children and their families place their trust in the agency and you to protect their confidentiality.



# **Section I**

Introduction

The Law:

What is HIPAA?

The Rules



## What is HIPAA?

- Act of 1996. Act of 1996.
- HIPAA provides a framework for the establishment of nationwide protection of patient/client confidentiality, security of electronic systems, and standards and requirements for electronic transmission of health and mental health information.



# **HIPAA Regulations**

HIPAA Regulations require we protect our clients' PHI (Protected Health Information) in all media including, but not limited to, PHI created, stored, or transmitted in/on the following media:

- Verbal Discussions (i.e. in person or on the phone)
- Written on paper (i.e. assessments, progress notes, agency forms with clients information, service/treatment plans, medical/mental health records, referral forms, and explanation of benefit (EOBs) forms where insurance is involved)
- Computer Applications and Systems (YSBIV's computer system, emails, program associated computer based systems and electronic records)
- Computer Hardware/Equipment (i.e. PCs, laptops, PDAs, fax machines, servers and cell phones)



# **HIPAA Privacy Rule**

- The Privacy Rule (2003) refers to protection of an individual's health care data, including mental health.
- Defines how client information is used and disclosed, and establishes administrative requirements and application of sanctions.
- Gives clients privacy rights and more control over their own health/mental health information.
- Provides specific definition of what is considered as Patient/Client Identifiers.
- Outlines ways to safeguard Protected Health Information (PHI).





# **HIPAA Security Rule**

- The Security Rule (2005) protects the confidentiality, integrity and availability of PHI that is maintained or transmitted electronically.
- It requires administrative, physical and technical safeguards to securely protect PHI.
- Safeguards of Security means controlling:
  - Confidentiality of electronic protected health information (ePHI).
  - Storage of electronic protected health information (ePHI)
  - Access into electronic information



## **Other HIPAA Rules**

Privacy Requirements to directly cover <u>Business Associates</u> of the covered entity (YSBIV), and are subject to the same HIPAA criminal and civil penalties for violations.

The **Omnibus Rule** (2013) implemented new regulations such as Genetic Information Nondiscrimination Act (GINA), Breach Notification, marketing, fundraising, school immunization records, research authorizations and enforcement. YSBIV typically does not participate in research activities.



# **Section II HIPAA Definitions**





#### What is Protected Health Information (PHI)?

- Protected Health Information (PHI) is individually identifiable health and/or mental health information that is:
  - Any information, transmitted or maintained in any medium, including demographic information.
  - Created or received by the agency, or an agency business associate.
  - Relates to/describes past, present of future physical or mental health condition; or past, present or future payment for provision of services.
  - Can be used to identify the client



#### What Can PHI Include?

- Types of PHI Data Protected by HIPAA:
  - Written documentation and all paper records, including historical information, medical and mental health records.
  - Spoken and verbal information including voicemails
  - Electronic databases, and any electronic information, including research information, containing PHI stored on a computer, smartphone, memory card or other electronic device.
  - Photographic images
  - Audio and video recordings
  - Client Identifiers



Client Identifiers are PHI that includes information by which the identity of a client can be determined with reasonable accuracy and speed either directly or by reference to other publicly or commonly known available information.

#### What Are Some Examples of Patient/Client Identifiers?

- Names
- Case ID Numbers
- Social Security Numbers
- Account Numbers
- License/Certification numbers
- Vehicle Identifiers/Serial numbers/License plate numbers
- Internet protocol addresses
- Health plan numbers
- Full face photographic images and any comparable images

- Web universal resource locaters (URLs)
- Any dates related to any individual (date of birth)
- ▶ Telephone numbers
- Fax numbers
- Email addresses
- Biometric identifiers including finger and voice prints
- Any other unique identifying number, characteristic or code



# CHECK LIST

#### What Are Uses and Disclosures?

#### **USES:**

When we review, share, analysis or use PHI internally (i.e. audits, training, supervision, or quality improvement, or the performance of assigned job or responsibility within the agency.)

#### **DISCLOSURES:**

When we release or provide PHI to someone with **appropriate releases signed or consent** given by the client or client's guardian (i.e. to attorney or providing records to another provider) or disclosures without consent as allowed by HIPAA. Consents for the release of information of a foster child may only be signed by the DCFS Guardian.





# **Exceptions to Disclosure:**

There are exceptions to disclosing information <u>without</u> the consent of the client or guardian:

These exceptions <u>can</u> include:

- \* Disclosures to the client about themselves or their services
- \* Court Ordered Release of Information/Records
- \* Subpoenas
- \* Where there is a public health/safety threat
- \* When there is a concern for the health, safety or well-being of an individual (i.e.: threats of harm to oneself and/or others, reporting of Child Abuse and Neglect.)
- Provision of services and Agency Operations (TPO)





# **Written Required Consents**

# Section 402.25 of Foster Home Licensing Standards state that the foster parent and agency will comply with the Required Written Consents for the release of information:

- a) The supervising agency shall ensure that prior written consents from legally responsible persons (parent, court, or other legal custodian or guardian) are obtained for certain acts of a child or performance of certain acts on his or her behalf, including but not limited to:
  - 1) health care and treatment, including medical, surgical, psychiatric, psychological, and dental;
  - 2) use of psychoactive drugs;
  - 3) religious instruction and/or church attendance in a different faith;
  - 4) work programs, induction into the armed services, driving a car and car ownership;
  - 5) extensive visits, trips, or excursions;
  - 6) use of photographs for publicity or other purposes; and
  - 7) consent to marriage for child under age of 18.





# Written Required Consents

#### **Section 402.25**

- **b)** Written consents shall be dated and limited to a specific period of time.
- c) Any written or verbal consent or authorization given by the individuals referenced in subsection (a) or by others that conflicts with any of the requirements of this Part is not valid.

#### Please note:

Foster Parents *are not authorized* to sign Consents and/or Release of Information forms on behalf their foster child(ren). This authorization for the release of information, consent for health care and treatment must be obtained by the Guardian's office through DCFS. Please contact your caseworker to facilitate any necessary authorizations.



#### What is the Minimum Necessary Rule?

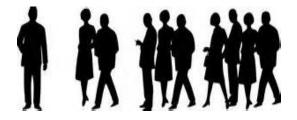
- To use or disclose/release only the **minimum necessary** to accomplish intended purposes of the use, disclosure, or request.
- > YSBIV as an agency, through its actions and policies:
  - Identifies which employees who need to access PHI, and provides them with the appropriate level of access.
  - Limits the PHI provided to others in the agency on a "need-to-know" basis.
- ➤ Requests from individuals or other providers outside of YSBIV:
  - Have limited access to the PHI provided, and is limited to what is needed or requested to accomplish the purpose for which the request was made through appropriate releases or consents.



How much is enough..... How much is too much?

# **Section III**

**Client Rights** 





# **HIPAA Regulations**

#### What Are the Client Rights Under HIPAA?

- ▶ The right to individual privacy.
- The right to expect Health Care Providers, Mental Health Care Providers and Social Service Providers will protect these rights.

Other Client Rights Include: Access, Communications, Special Requests, Amendment, Accounting of Disclosures, Notice of Privacy Practices, Explanation of Client Rights, and Reminders, and the Right to File Complaints.



# Client Rights To File Privacy Violation Complaints

- Clients or individuals may file complaints directly with YSBIV regarding health information privacy violations or YSBIV privacy compliance with HIPAA.
- Or clients or individuals may file complaints directly with the Department of Health and Human Services and the Office of Civil Rights.





# Waiver of Rights

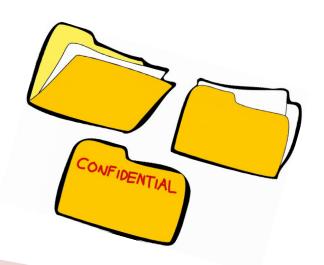
- YSBIV *cannot* require an individual to waive their rights provided under this rule for the purpose of providing treatment, payment or enrollment in a health plan or eligibility for benefits or services.
- YSBIV *may not* intimidate, threaten, coerce, discriminate against, or take other retaliatory action against:
  - Individuals for exercising their rights or filing a complaint;
  - Individuals and others for:
    - Filing a complaint with the Secretary, Dept. of Health and Human Services;
    - Testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing; or
    - Good faith opposition to a prohibited act or practice





# **Section IV**

# What Foster Parents and Relative Caregivers are Entitled to Know



The information shared with you by the caseworker or other members of the child welfare team is shared in confidence to help you understand and care for the child or children as you attempt to meet their daily needs.

Please keep in mind, if this is an initial placement of child in care, the agency may have only limited information at the time. More information will follow and be shared as it is known and necessary to the care of the child.

#### At a minimum, caregivers are to be given:

- Placement Information which includes why the child is in care and the current permanency plans for the child. If applicable, this should include a history of the child's placements and reasons for change of placement excluding the identity and location of previous caregivers.
- Medical Information must be shared with you and updated on an ongoing basis, this should include detailed information, if/when known, of the child's health history, immunization record, and medical card/insurance information.



- Social/Emotional and Behavioral Information necessary to care for and safeguard the child/ren to be placed or currently in the home including, but not limited to, fire setting, perpetration of sexual abuse, destructive behaviors and/or substance abuse. Information should include any effective responses to behaviors from previous caregivers.
- <u>Educational Information</u> should include detailed information about the child's education, including details of their Individual Education Plans( IEP's) when the child is receiving special education services, and any know academic and social behaviors at school.
- Access to Mental Health Information can only be given with consent of the guardian, and the youth 12 years or older, and is not automatically shared with caregivers.



- Foster Parent and Relative Caregivers are entitled to receive this information in writing, or verbally in emergency situations, then provided in writing as it becomes available.
- This should include: a copy of the child's portion of Integrated Assessment and service plan, if completed or when available, including the visitation arrangements, and all amendments or revisions as it relates to the child.
- Information shared with you will be updated as the case progresses, and/or as more information is known that impacts the care of the child in your home.

As a foster parent or relative caregiver you are not entitled to specific personal or private information regarding the parents, required services for the parents or their progress in services. This includes information shared at Court, Administrative Case Reviews and Child and Family Team Meetings. You may be asked to leave or be excused when discussing the parent and their current progress.



#### **Of Special Note**

#### **Confidentiality of Caregiver Information:**

Prospective and current foster families are often concerned about what happens to all of the personal information gathered and stored by the agency during and after licensing. The caregiver's signature on the licensing application implies that they are informed of the process and consents for the process to occur.

A foster caregiver's name, address and phone number **must not be disclosed without prior written consent.** Caregivers may also request the caseworker not to release this information to the child. DCFS Rules and Procedures about confidentiality are outlined in Rules 315 and 301.

You may also refer to the **Illinois DCFS Foster Parent Handbook**, Section 8 for Caregivers Rights and Responsibilities for more detailed information. A copy of this handbook is located on the IL DCFS website.



# **Section V**

# Safeguarding Confidential Information



What can I do to protect the child and family's confidential information?





#### **Applying some Golden Rules:**

Besides it being your responsibility, put yourself in the child or family's place! Reflect on your own childhood and family, and how you may have felt about personal information being shared with a teacher, peers, clergy, etc. Imagine if you were a foster child, would you want your personal information to be shared with others if it was not necessary? Think about how you would want to be introduced to neighbors and others outside of your family, and what you would want shared about you.

Confidentiality is important in building a relationship with your foster child. Most foster children have trust issues. If their information is freely shared, this may cause them to not trust you and increase their acting out behaviors.

A lack of trust diminishes the opportunity to strengthen and help foster children, and may cause them to hide behind emotional walls. If this occurs, it may interfere with your ability to give them the support and help they need.





#### **Applying some Golden Rules:**

Due to a desire to fit in, many foster children do not want others to become familiar with their personal information. Some foster children don't even want others to know that they reside in a foster home or be introduced as a foster child.

Many times foster children have strong loyalties to their biological families, despite the circumstances of their removal, and do not want anyone else knowing or discussing their family issues.

Respect will aid in developing trust with a child and family that most likely already possesses trust issues. Healthy trust in a foster home will allow for a smoother transition to the foster home for all members of the foster home. It helps a child and family feel safe and comfortable in sharing information which will increase the chances of them receiving adequate support and services.





#### Interactions or Relationships with Biological Family or Other Foster Caregivers Involved

In your role as a foster or relative caregiver you will more than likely interact with the biological parents or family, or other involved foster caregivers. You may develop or already have relationships with these individuals. With these relationships or interactions, you may inadvertently obtain other personal information about the biological parents, or they may share and entrust you with personal information about themselves or their past and current struggles.

In these interactions or relationships, the same rules apply for the confidentiality of the biological parents' information. Remember, if the biological parent(s) have shared personal information with you, they are *trusting* that you will maintain their privacy and confidentiality.

If there is a concern that this shared information will impact the child's safety and well-being or the care of the child, it should be reported to the case worker immediately. Unless the biological parent gives permission, it should not be shared with the other biological parent, relatives or other foster caregivers involved in the case.



#### Here are a few tips and guides to help to safeguard confidential information:

- Friends, neighbors, and extended family may all be curious about the child placed with you, *but* do not discuss information about the child or their family with those that **do not have a need to know**.
- It is important to remember that unless you have a consent for release of information signed by the client or clients' guardian *or* unless the information is essential in order to provide care for the child, confidential and private information should not be shared.

When sharing information in order to care for or provide services to the child, the "minimum necessary rule" should always apply!



#### Tips and guides to help to safeguard confidential information:

- When information is shared, it is extremely important to be mindful of your surroundings whether it is in person or over the phone. Avoid sharing information in public or common areas, or around others that do not need to know.
- ➤ Be mindful when leaving voicemails or sending emails with confidential information, can it be accessed by others or just the intended recipient?
- Maintain written records and information about your foster child in safe and secure place. The agency provides you with a Child Folder to help you keep this important information in an organized and safe manner.





# Safeguarding Confidentiality Social Media



#### Tips For Social Media Use By Foster Parents And Relative Caregivers:

Social Media is a popular way to share information and exciting news about oneself or family, it can be a place for support and to share information with other foster parents, friends or family. **Just remember confidentiality rules still apply!** 

- Talk with your caseworker about agency policies. Ask about guidelines and special considerations for children and youth in your care with social media or using social media to communicate with family of the child.
- Get permission from the agency before posting family pictures that include a foster child, even if this child is a relative, and/or identities are disguised. DCFS requires permission for the posting of any pictures of IL DCFS foster children.
- **Do not identify a youth as a foster child** or post a foster child's full name or other identifying information on a social network.
- Never discuss case specific information on foster parent support sites or other postings.
- Think before you post! Be sensitive to how messages may be interrupted by others.



# **Safeguarding Confidentiality**A Time to Share

#### There are situations and settings where you will need to share information....

- Make sure to discuss this with the caseworker before sharing the information.
- When sharing information, if appropriate, let the child you know what information you will be sharing information, why, and with whom, i.e.: a youth leader, church leader, daycare provider, afterschool care, etc.
- Common settings in which information is shared that is <u>directly related</u> to the service or care provided to the child:
  - Medical/Mental Health care
  - School
  - Guardian at Litem or CASA (Court Appointed Special Advocate)
  - Church/Church Youth Groups
  - Organized Sports or extra-curricular activities leaders
  - Daycare providers



Thank you for completing this training. If you have any questions about what information can be share, please check with your worker first!

For more information regarding HIPAA, visit:

https://www.hhs.gov/hipaa/index.html

For more information and/or training on Social Media and Safety, please refer to the IL DCFS Virtual Training Center (VTC).



