



School Social Work Association of America

SSWAA COVID-19 FAQ

These are unprecedented times for all of us: for our schools, for our communities, for the families we serve. This Frequently Asked Questions (FAQ) document is a follow-up from our SSWAA Webinar, “COVID-19 Health Crisis: Getting Through This Together, School Social Work in a Changing Landscape” where we will strive to answer the major questions that the COVID-19 crisis are posing to us as we attempt get our bearings and deliver effective and ethical school social work (SSW) services in this new time.

A few starting points, some of them disclaimers and qualifiers before we start the FAQ proper:

1. ***The suggested advice and answers we are providing here are just that, suggestions.*** We are not lawyers here at SSWAA, and we don’t work in your district and know the specific contextual variables that might impact how your district decides to respond to this crisis. While we are seeing some promising practices and strategies emerge, these are meant to be suggestions for you to consider and bring to your district, not mandates.
2. ***The lack of clarity is not a reason to do nothing or to wait for districts and states to provide us guidance.*** School social workers are dedicated and skilled professionals, and from what we’re hearing, at least some of you are being encouraged/told to “stand down” and not provide any services or outreach to your school clients and their families. We understand that districts are still figuring out what their expectations and responses are going to be, and often this is being balanced with other stakeholder demands (e.g. union work rules, parent expectations, SpEd and Medicaid mandates), but in our view it is our ethical obligation to advocate for services and supports to be provided to our schools in this challenging time, and we will try in this FAQ to provide you some of the ideas and tools we’re finding to help you push your districts and states to do right by kids who are not in school right now due to COVID-19. This will not be easy (has our work with our schools ever been, really?) but we are here to help you navigate these challenges and potential barriers as we ALL strive to provide the best possible service to our schools now.
3. ***We don’t know where this will all be in a month (maybe even in a week), and that matters, too.*** The need for us to be conscious of how many aspects of this crisis are still evolving is also on our minds as we write this. Getting to know examples of telehealth protocols and understanding how different apps and online tools are considered to be compliant with federal laws is essential, but it’s also essential that we continue to connect with each other, first with our district and state leaders and local SSW colleagues, and also with our state organizations and fellow SSWAA members. We are providing you spaces to do this via webinars we have done and will be scheduling, as well as the ongoing social platform activity going on at SSWNetwork, where SSWAA

and SSWNetwork are hosting a group dedicated to sharing what people are doing to support their schools.

As you read through the FAQ that follows, we suggest you also apply a 4-part process to each of the questions as you go about your own planning and preparations to deliver services in this time:

1. **Check-in with yourself:** practice the self-care necessary to put your professional SSW role on and do the work in this challenging time. We have to do all that we can to support our schools and colleagues, but we are also human and this crisis is impacting all of us in our own lives as well, and we will only be effective to the extent that we're taking care of ourselves as we move through this;
2. **Develop strong and consistent communication** with the relevant school, district, and state leaders with your SSW in-district colleagues so that you're operating with the most up-to-date guidance on how they're advising you to provide SSW services in this time;
3. **Use guidance from SSWAA, federal, and state sources to be an advocate for your students and schools.** In service of being advocates for our students, schools, and our profession, consult and integrate the best available guidance from the federal government (DOE, CDC, Office of SpEd, etc.), state resources, and SSWAA documents to educate (and if necessary, push) your district to do right by our kids and our role as SSW.
4. **Align your plans with our Social Work Code of Ethics.** With the up-to-date guidance you receive from your states and districts (assuming you get some, which is still an assumption based on what we're hearing) run that guidance up against our SW Code of Ethics to see how well the guidance does and doesn't align with our COE, and proceed to consider possible advocacy responses to school, district, and state leaders if you see things in the directives that seem to be problematic. (We attach the NASW COE at the end of this FAQ in the Appendix Section.)

Most of all, we ask you to be kind to yourself and to remember that your schools have never needed what you provide them more than now, and we stand ready to provide support and community as we all figure out how to come out of this time stronger and more connected.

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[Best Practice Telemental Health Service:](#)

1. *What are examples of good telehealth best practices and exemplars?*

We have been impressed by the range of examples and ideas that are still being developed by districts to provide telehealth services to their students during this time. Indeed, many of you are sharing that this is still very much “in development” in your district, and you expect to know more starting the week of 3/30 or even the following week. In the interim, we are hoping to provide you and your district leaders with an example to possibly guide and structure your work. We are attaching in this FAQ (with permission) a comprehensive telehealth plan that was developed by SSW Tonya Hernandez for the Clark County School District (which includes Las Vegas and is the 5th largest district in the U.S.) Her proposal for telehealth for SSW was adopted by the Nevada state board of education and will be implemented in the coming weeks. It is here in Appendix A and covers a range of the key issues in designing an effective telehealth program for SSW services. We invite you to share with us the plans you’re developing as well, so that we can strive to compile a number of exemplar telehealth and SSW service delivery plans to share with SSWAA members.

2. *What is the federal government's guidance regarding telehealth? What are the requirements before transitioning to telehealth counseling sessions?*

As of this writing, we are not aware of any clear federal guidance on how schools should be doing telehealth in relation to related services such as SSW. There is the clear directive that if schools are providing e-learning to gen ed students at this time, they are expected to provide a FAPE to students with disabilities (and many of us are in states where the SSW role is heavily organized around students in special education), so the implication is that those IEP-related services are expected to carry on as well. We are still monitoring this and will share additional information as we have it. In the meantime, we offer an example of how one big district (Clark County, Nevada) is going to be doing telehealth in Appendix A. There are also a range of good resources that NASW has organized here: <https://www.socialworkers.org/Practice/Infectious-Diseases/Coronavirus/Telehealth> In many ways before this crisis began, there is a strong professional culture already established around clinical social workers providing telehealth and navigating the myriad ethical, technical, and logistical challenges. Use those NASW resources as a starting point and consult with your NASW state chapter as well.

3. *How might you set up a schedule for telehealth individual sessions and group sessions?*

See Appendix A for how Clark County SSW are going to be doing this. Check with your district and clarify how they want you to be doing your sessions with your students. Once you have that guidance, put together a schedule that aligns with a typical school day and that is also organized around students’ other e-learning responsibilities during this time. Some districts are asking SSW

to build in their contact time around the typical e-learning day (say 9-1) and so in those districts, SSW are doing their individual sessions before 9 and after 1 p.m. What matters most is that you get that guidance from your district on how they want you to do telehealth (what apps and social media tools you're permitted to use, what timeframe you're expected to work in) and to then tap into our strong organizational skills to put together a schedule for our students and for us to keep in touch and keep focused on their SSW goals.

- 4. *Has there been conversation about how School Social Workers should maintain contact or be accessible to students and parents via technology platforms such as, Google Meet, Google Voice etc.?***

Districts are all over the place in answering this question. We recommend that you start with signing up for a Google Voice number so that you have that ready to use. Google Voice will redirect calls to your cell phone. You can give that number to clients when they feel safe to call you rather than you calling them when you don't know who might be listening. Ask your state professional association and districts and state board of education to provide guidelines and follow them.

- 5. *Do I need releases of information to speak with parents/guardians for children that are 18 yo? Many of the low-incidence students I work with are 18Yo+ but parent/guardians don't have extended guardianship.***

Many districts and SSW are following the same consent procedures that they did at the start of the year for SSW services and are trying to recreate that for online/telehealth work and doing this via signed and scanned forms. Others are doing this verbally and documenting in their case notes that they did that and following up with an email to parents or caregivers. For youth that are 18, it's still good practice to make sure that the youth who are still at home are making their parents aware of your service plans, but that would necessitate getting the consent from the adult student to proceed.

- 6. *What should we do if a student on our caseload doesn't show up for virtual sessions? Call parents each time to try to get in touch with them (afraid that will be bothersome to parents at work)? Do I use a student's cell phone number (concerned about boundary issues)?***

There are many factors, including boundary issues, that should be taken into consideration about how to engage and respond should a student on your caseload not show up for a virtual school social work session. We recommend that everyone try to establish their virtual office hour meeting times for a week by first working with your district and team to establish procedures that are reasonable and ethical to do. For example, the contact information you gather may or may not involve getting a student's cell phone number or social media details, and might instead focus on the contact information provided in the school database instead. Some students may already use a district-sponsored e-mail and that can be utilized with your district email to stay in touch. Once this is in place, we recommend tracking what your students "do" with that first full week of

services i.e. how many students show up, show up on time, and maintain the focus during the session. From that first week, a follow-up plan for keeping parents and caregivers informed about their child's attendance and involvement in SSW services seems to be indicated, though many parents are dealing with a host of other issues (and getting many other messages from the schools as well), so keeping that communication

7. *I am in NYC where schools are closed and we are being directed to do teletherapy. Like many colleagues, am very concerned about liability should a crisis occur while on teletherapy. Mostly, I'm concerned should a student become suicidal or act dangerously while in session. We have not been given anything in writing saying our school board has liability coverage for us. I appreciate the guidance and support I'm getting here from SSWAA and peer colleagues, but I'm confused about how to move forward with my SSW services as neither my district, school principal, or state leaders have thus far given me any guidance or parameters for expectations related to my SSW services during this time of schools being shut down.*

The very significant challenges and questions related to telehealth are real and need careful consideration before barreling into delivering these services, no matter how much we may want to start working with our young people right away. Regardless of what districts are or aren't saying, there are a number of critical ethical, legal, logistical, and technical concerns that need to be resolved for your own satisfaction before proceeding:

- Starting with our code of ethics, it is our responsibility to preserve client privacy and confidentiality. This will be challenging given the telehealth settings our students will be in (home, surrounded by siblings and other family members). We need to make every effort we can to ensure that the youth has a quiet, private space to meet with us, with the understanding that it will not be something we can certify;
- Assessing our own liability and exposure in the event of a crisis that happens while they're working with us—again, any district that is expecting or requiring you to provide telehealth services needs to also provide you with assurance via liability insurance that you are covered in the event of any crises that happen. Many of us have our own clinical social work liability insurance, but it is incumbent on the district to clarify what our exposure and coverage will be if these situations arise. For example, would personal clinical social work liability insurance cover a SSW for something that happens in their school capacity via a telehealth session? These issues are ones to first bring up with your fellow SSW in your district, then take to your leaders and ask for clarification (some of you are telling us that your teachers' union work rules and other union conditions are impacting these discussions as well, and it will be important to make sure that your SSW voice is at that table as well);
- Our logistical and technical issues will vary depending on our own comfort level with doing telehealth and using technology this way, but striving to create a district-level set of norms and practices for SSW seems to be the best first step. You know your kids and schools, and you also know your own comfort level with all these new ways we're being asked to practice. For those of you who already use technology regularly in your

practice, this can be a good time to help lead your district's efforts and to assist the others in your district who are new to this. For everyone, it's crucial to work together as much as possible and to share what's working and what you need help with, so that everyone isn't working from their homes and re-inventing the wheel.

- Many SSW are telling us that their districts are promising to have something in place "soon," meaning likely next week or the week after as many school districts were on Spring Break during this shut-down time as well. We strongly recommend that you take this opportunity to not simply await guidance from your district leaders (who themselves have never had to deal with a crisis like this one either), and to instead take this opportunity to advocate for SSW as a role and for our students' needs. It may prove that for many schools, what to do about SSW services and the kids on our caseloads might not be the top priority. That doesn't mean we can't fight for what our students need, and for what we know we can do for them. Use the resources we share here in the FAQ and the appendices, and organize with your local SSW community, state orgs, and SSWAA members to ensure that all our kids are safe and supported.

Ethical Considerations:

1. *I have a question about informed consent for teletherapy sessions. If I already have informed consent from parents/guardians for students, should I obtain consent for teletherapy services as well?*

Yes, teletherapy is a different service, and receiving consent and erring on the side of caution is what many of our members are doing, again working within the guidance and requirements they're getting from their schools, districts, and states. Moreover, privacy and confidentiality changes with teletherapy when students are receiving services in the household, so consent, even if it's verbal and not written, and touching base with the family for students under the age of 18 seems to be the ethical first step in starting our teletherapy work with our students.

2. *I'm in Texas - School Social Workers are not recognized by the Texas Ed Agency. What about the ethical guidelines connecting with students via email or Google Hangout etc.?*

While this is a question focused on one state, it really applies to all of us, whether SSW is recognized in your specific state or not. The first step has to be to communicate firmly and clearly with the district or agency that has hired you to be a SSW to see what their requirements and guidance is related to the use of technology to engage student clients during this time. You will likely hear a range of answers, and we are providing a range of resources in this FAQ that you can deploy to advocate for tools that you want to use. Most of all, keep the focus on the students themselves and demand that the school district/agency provide you guidance on how to stay connected to your students during this time.

School Social Worker Role and Responsibilities:

1. *I am designated specifically as a SPED social worker and have many students on my caseload who have significant behavioral concerns when under stress. A typical workday for me involves significant behavioral crisis response. What parent-friendly de-escalation resources and behavioral management resources, if any, are there at the moment? I have several families for whom I am concerned about behavioral safety when together all day, in a stressful situation, attempting to participate in e-learning.*

This is a crucial question for us as SSW, we know that our kids are in home situations that are often stressful, based on their behaviors and family dynamics. In Appendix C (“Resources for Families”) we offer a range of ideas and tools for helping with de-escalation, stress management, and discussion tools to help parents manage in this crisis.

2. *What would you suggest I do if my school leaders aren't giving us guidance? If our school district is closed for a few weeks and we do not have an assigned duty or responsibility as far as the district is concerned, what can we do as social workers that can be considered independent of our district...but still able to help the children/students in our communities?*

We know that even when your school/district has not provided an assigned duty or specific responsibility, there are opportunities to engage our communities. The national School Social Work Practice Model highlights three practice domains. Link for the practice model is here: https://aab82939-3e7b-497d-8f30-a85373757e29.filesusr.com/ugd/426a18_09cc4457882b4138bb70d3654a0b87bc.pdf

Using this unstructured time to maximize access to school-based and community-based resources could be a powerful way to provide help now and build your knowledge of how resources in your community are being shaped in response to COVID-19.

Examples:

- Create a resource book covering basic needs, indicating updates as it relates to COVID-19
- Review opportunities for giving/engagement with community partners (e.g., share out fundraising efforts of a local organization, offer to help with stated organization needs, etc.).

McKinney Vento - How to address needs of homeless students:

1. *I have students who are McKinney Vento. I only have an address of the motel they have been staying in. How can I provide services to this student?*

The SSW first needs to consider what the scope and intent of their district’s learning plan entails. Next consulting any applicable state guidance as it applies to McKinney-Vento eligible students

during COVID-19 pandemic school closures should be considered. If your state does not address McKinney-Vento eligible students in its guidance, information from the Minnesota Department of Education's [School Closure Guidance for Minnesota Public School Districts and Charter Schools](#) provides comprehensive systems considerations that specifically identifies the need to engage and support McKinney-Vento students and their families to ensure they have equitable access and participation to the distance learning plan. (go to <https://education.mn.gov/MDE/dse/health/covid19/MDE032085> for more info on how MN schools will be responding to COVID-19.)

Actions of the school social worker could include the following:

- Engage in a needs assessment with the student/family regarding barriers to participation in the distance learning plan.
- Collaborate with the student and family to reduce barriers impacting access to school-based and community-based resources during the COVID-19 pandemic.

Best Practice in Collaboration with Community Supports:

- 1. If we provide students with hotline phone numbers, do we know if those agencies are increasing staff to support students in crisis?***

This question presents an excellent opportunity to use our time at home to develop up-to-date resource lists, and to follow up with relevant crisis lines and crisis response agencies and teams to check on them to see how they're managing and to see what their staffing/response plans are. Given that many of us doing telehealth and other remote SSW services will likely have moments in our work with students and their families where we see the need to suggest they call a hotline or other crisis team, we need to feel confident that there will be a helpful response at the other end when they make those calls.

Medicaid:

- 1. What is your take on billing for Medicaid during this crisis?***

As of this writing, this is still an issue that is being sorted out at the state and federal levels—check with your NASW state chapter for their guidance as well as NASW who has been working on this issue. It is also likely that individual districts are going to have their own perspective on this, as many SSW services and other related services are also billed for Medicaid, so your own district leadership and legal department needs to be consulted before moving forward on billing Medicaid (and this assumes that there is a consensus statement/guidance from your district on what actual SSW services are going to be in this COVID-19 response time).

[How to handle student anxiety related to COVID-19:](#)

1. How do I speak to my students, particularly younger ones, about the virus in order to ensure that they have an understanding?

It's essential for us to make sure what we're saying and sharing with our young people is developmentally appropriate and ultimately helpful and reassuring. This CDC article, "Talking with Children about Coronavirus Disease" does a good job of helping get things started and help us get in the right space to have those conversations. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/talking-with-children.html> [1] [SEP]

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SSWAA COVID-19 FAQ Appendices A-D

Appendix A: Example of a Telehealth Proposal for SSW Services for Clark County, Nevada; was subsequently approved for the entire state of NV by the Nevada State Board of Education.

Created and submitted by Ms. Tonya Hernandez, LCSW (School Social Work Liaison and current Loyola SMHAPP Certificate Student)

CCSD Telehealth Proposal

Social workers in schools are trained to conduct psychosocial assessments of students and families in the context of their environment and to include relationships with family members, peers, teachers, and community needs. During the COVID-19 crisis, social workers in schools will be able to conduct this function with the use of technology. These assessments will include the student's strengths and needs. They will allow for school social workers to maintain contact with students and families and provide support as needed to best maintain student safety while schools are closed.

Social work services provided using electronic technology have benefits and risks. The benefits of providing social work services through electronic means during the COVID-19 crisis include:

1. Enhanced access to social work services that cannot be given to social distancing.
2. Allows social workers to monitor student's emotional status
3. Allows social workers to respond quickly to students and families when needed.
4. Provides for a cost-effective and productive means of delivering services
5. Allows for ease of communication
6. Students and families do not have to travel to obtain social work services

The possible risks of providing social work services through electronic means would include:

1. Possible failure of technology and the interruption of services
2. Possible break of confidentiality

Social Workers in schools will ensure appropriate boundaries are kept between students and families using technology this will be safeguarded by instructing social workers to not use personal email, their personal cell phone numbers, or social media sites to make contact with

students or families. They will ensure their communication is kept at a professional level and will clearly explain to students and families their role as a professional. Social workers will not post any personally identifiable information regarding students and families on any form of social media.

To further ensure professional boundaries are maintained a social media policy will be developed to inform students and families of the social worker's professional role. The social worker will be available during normal school hours and will only communicate with the student and family using school email, Google Hangout, Google Meet, or Zoom. The policy will be reviewed with each student and family the first time they meet and revisited as needed. In addition, social workers will explain to the student and family that at times technology may fail due to power outages, or lost, damaged, or stolen devices. Should this occur for a long period of time the social worker will mail using U.S. Postal Service community providers who can assist the student and the family until technology can be restored.

While conducting social work services using technology, the social worker will have the numbers to crisis helplines and mobile crisis to assist students and families should a mental health emergency arise. If the social worker believes the student is having suicidal thoughts, the social worker will mobilize resources to defuse the risks and restore the safety of the student. The social worker will contact the student's parent or guardian immediately to ensure safety. If they are unable to contact the parent or guardian, they will call CCSD Police to ask for a wellness check that occurs at the student's home address.

CCSD should require social workers to complete a course in HIPPA and Ethics in order to ensure proper guidance and ethics are used with technology. Wayne State University offers a two-hour online workshop that discusses HIPPA and reviews the NASW Code of Ethics emphasizing the use of technology in direct practice. The cost of the course is \$25 per social worker. Link:

<https://socialwork.wayne.edu/ce/hipaaethics>

MTSS Services

Google phone, Google Hangouts, Google Meet, or Zoom. Consent forms for Tier II and Tier III students will be obtained via email or during technology meetings, or phone calls to parents. An example of a Telehealth Informed Consent form was developed by NASW in March 2020 to support the transition to telehealth services. SSW will reach out to students and families as needed to provide the following array of services. Link:

<https://www.socialworkers.org/LinkClick.aspx?fileticket=fN67->

Tier I services will be provided to the families and students by either the development of a Google Classroom that is offered to all students or by working remotely with the school to upload necessary community resources and information using each school's method they already have in place i.e. ParentLink, CCSD mail, Google Classroom, or School Website.

Students may have many questions regarding the Coronavirus and social workers can use students and families at a Tier I-II or III level using social stories to support students.

For example:

1. School Social Work Network has a useful article: How to Talk to Your Kids about Coronavirus <https://schoolsocialwork.net/how-to-talk-to-your-kids-about-coronavirus/>
2. PBS Kids uses cartoon characters to speak to younger students: PBS: Coronavirus https://www.pbs.org/parents/thrive/how-to-talk-to-your-kids-about-coronavirus?utm_source=LINKEDIN_COMPANY&utm_medium=social&utm_term=20200310&utm_content=3190319287&utm_campaign=WGBH
3. Low-cost Internet from Comcast <https://www.wxyz.com/news/national/coronavirus/comcast-offering-internet-essentials-package-free-for-60-months-during-coronavirus-outbreak>
4. Podcast: Turnaround for Children – Coronavirus: Keeping our children and ourselves safe, with Pamela Cantor, M.D. <https://www.turnaroundusa.org/the-180-podcast-coronavirus/>
5. Child Mind Institute: Supporting Kids During the Coronavirus Crisis <https://childmind.org/article/supporting-kids-during-the-covid-19-crisis/>

Tier II services will be provided to students using Google Classroom, email, Google phone, Google Hangouts, Google Meet, or Zoom. Groups will consist of Social Emotional Learning (SEL) using the CASEL Wheel <https://casel.org/core-competencies/> to provide SEL Competencies and Psycho-educational groups that will focus on mindfulness, coping skills, anxiety, depression, and anger management. Check-in/Check-out interventions will be provided to students using Google Hangouts, Google Meet, or Zoom and can be completed daily to ensure SSW touches base with Tier II students in the morning and again in the afternoon. The IASSW Facebook Group has a great spreadsheet with many SEL Lessons that can be used to help support students at Tier II and Tier III students: SEL Activities for K-8. Link to activities here:

https://docs.google.com/spreadsheets/u/2/d/1uLmHt3yxmUR4UacBsR8oEZ3bYgx2u8lqOb-RFhn_Rao/htmlview?usp=drivesdk&fbclid=IwAR01tT_CKO1w6Gt3xq3ag34PNOgkX6Z1osSE1TGuQ0W5j5jHjSau4MwWTSk&pru=AAABcQfxb8*LZCR7wv-JxR3PUGIPpOKXw&urp=gmail_link

Guidance Teletherapy created a blog post on March 15, 2020, to help support telehealth

activities with students K-12: Interventions for Online Therapy with Children and Youth. Link to these activities here: https://www.guidancett.com/blog/interventions-for-online-therapy-with-children-and-youth-2020?utm_campaign=sswn_newsletter&utm_medium=email&utm_source=Revue%20newsletter

All Tier II groups will use an agenda format such as the one below

<p>Virtual Group Expectations:</p> <ul style="list-style-type: none"> ● Assume good intentions for yourself, each other and your families. ● If not talking, keep the microphone muted. ● Maintain confidentiality-no names or identifying information. ● Monitor air time. We will start on time and end on time. ● Use chat features for questions. ● Unmute when you want to contribute to the conversation. 		
<p>Purpose of Group: I want to support all of you through this difficult time. We are not the experts in how to deal with this as we are all learning alongside each other on how to best handle this situation. This space is intended to provide support, ideas and collaboration to students around the topic of school closure and how we can support each other during this time.</p>		
Time	Topic	Notes
5 Minutes	Welcome and Icebreaker Purpose Expectations	
20 Minutes	What are you and your family doing to support each other during school closure?	
15 Minutes	How are you communicating with people outside your home?	
15 Minutes	How can I best support you and your family during this time?	
15 Minutes	How have you been dealing with intense emotions? Anger, depression, anxiety?	
10 Minutes	Final questions or requests?	

Tier III services will be provided to students using Google Hangouts, Google Phone, Google Meet, or Zoom. Tier III services will consist of Solution-Focused Problem-Solving techniques, therapeutic interventions will be provided via telehealth services that will be provided by a clinical social worker or school mental health professional. To provide clinical services using telehealth HIPAA and FERPA laws must be followed.

Resources that can be used for Tier III interventions regarding COVID-19 are:

1. SEL Resources for Parents, Educators & School Communities Related to COVID-19
<https://insidesel.com/2020/03/12/covid-19/>
2. CDC Guide for Managing Anxiety & Stress <https://www.cdc.gov/coronavirus/2019-ncov/prepare/managing-stress-anxiety.html>
3. Mental Health America – Mental Health and COVID-19 Information and Resources.
<https://mhanational.org/covid19>
4. Turnaround for Children – COVID-19 Pandemic Resources
<https://www.turnaroundusa.org/coronavirus/>

Confidentiality

FERPA

To ensure FERPA regulations are followed the student's personally identifiable information will not be given to any educational agency or institution without written consent provided by the parent/guardian of the student. In addition, all rules and regulations will be followed as stated in the document provided by The United States of America Department of Education, Student Privacy Policy Office published *FERPA & Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions (FAQs), March 2020*.

https://studentprivacy.ed.gov/sites/default/files/resource_document/file/FERPA%20and%20Coronavirus%20Frequently%20Asked%20Questions_0.pdf

HIPPA

When providing telehealth to students and families CCSD will use the recommendations set in place by the U.S. Department of Health and Human Services and the U.S. Department of Education in the *Joint Guidance on the Application of the FERPA and HIPAA To Student Health Records, December 2019*

https://studentprivacy.ed.gov/sites/default/files/resource_document/file/2019%20HIPAA%20FERPA%20Joint%20Guidance%20508.pdf

[Special Education and 504](#)

According to the U.S. Department of Education: *Questions and Answers on Providing Services to Children with Disabilities During the Coronavirus Disease 2019 Outbreak, March 2020*. School Districts are required to provide Related Services to students who are absent from school due to COVID-19 school closures. Any student that was provided counseling as a related series by a school social worker, shall continue to offer those services via phone, Google Meets, Google Hangout, or Zoom. <https://sites.ed.gov/idea/files/qa-covid-19-03-12-2020.pdf>

Telehealth

Providing Telehealth to CCSD students will allow for social workers to effectively and consistently provide students and families with social-emotional support especially during the COVID-19 crisis. There are many online platforms that are HIPAA compliant. The District will need to have a Business Associates Agreement with any platform used:

[Google Suite Option:](#)

To ensure Google is HIPAA compliant The District would need to sign in to the Google Admin Console, and accept a HIPAA Business Associate Agreement.

Accept the HIPAA Business Associate Amendment

To review and accept a HIPAA Business Associate Agreement (BAA) for G Suite

https://gsuite.google.com/terms/2015/1/hipaa_baa.html or Cloud Identity

<https://cloud.google.com/terms/identity/baa>, you must be signed in to an administrator account for your G Suite or Cloud Identity service. Non-administrator G Suite users or users of the legacy free edition of G Suite cannot review and accept a BAA from Google at this time.

Opt into the HIPAA Business Associate Agreement:

1. Sign in to the Google Admin console. <https://support.google.com/a/answer/182076>
2. Click Company Profile.
3. Click Show more Legal & compliance.
4. In Security and Privacy Additional Terms next to HIPAA Business Associate Amendment, click Review and Accept.
5. Answer all three questions, and if you are confirmed as a HIPAA covered entity, click I accept to accept the HIPAA BAA.

[Zoom Option:](#)

Zoom is considered to be HIPAA Compliant and is used by many healthcare organizations around the world to provide healthcare services. The entity using Zoom for Telehealth accepts the **HIPAA**

Minimum Necessary Standards to comply with HIPPA. <https://www.hipaajournal.com/ahima-hipaa-minimum-necessary-standard-3481/>

1. The District must make reasonable efforts to ensure Privacy Health Information (PHI) is limited to the minimum necessary information. Just like with FERPA, written permission must be obtained in order to share HIPPA information.
2. The District shall not share via ZOOM any PHI such as physical documents related to student's health issues, disabilities or diagnosis, spreadsheets, films and printed images, electronically protected health information such as information stored on tape or other media.

For additional information regarding using ZOOM for Telehealth please review the **Zoom for Healthcare** <https://zoom.us/docs/doc/Zoom%20for%20Healthcare.pdf>. The District can use the Basic FREE program to allow for SSW to work with students using a face to face platform that is NOT HIPPA compliant. SSW can give students a phone number or personal meeting ID and/or a personal link that will allow for students and SSW to meet for Tier II or Tier III non-clinical services. Zoom can be integrated to include Google Calendar which will allow SSW to schedule meetings with students and families.

For Zoom to be HIPPA compliant The District would need to purchase Zoom with the minimum commitment of \$500 a month. Zoom would then provide The District with the HIPPA agreement that would enable HIPPA settings on the back end of Zoom to ensure PHI is secure. Once the Districts purchases Zoom at the \$500 a month level, all Districts users, even those using the free services would become HIPPA compliant. To make Zoom HIPPA compliant Zoom would shut off the ability to record the meeting in the cloud and it would provide protections to not display the PHI.

Zoom is perfect to use for social distancing as it allows for SSW to communicate with students and families and ensure everyone is kept safe from COVID-19. In addition, Zoom can also use simultaneous translation to translate and eliminate language barriers between SSW and families who do not speak English. This would need to be set up ahead of time but is a great tool to ensure all families are receiving the social-emotional services they require.

Zoom meets also has mobile apps available which will allow students and families to join a Zoom meeting without having a computer at home to use. You do not have to have a Zoom account to join a Zoom meeting.

Appendix B: COVID-19 Resources (Being regularly updated, and to use to advocate for SSW services in your district)

CDC Guidance (specifically for schools)

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

Department of Education Latest Guidance

<https://www.ed.gov/coronavirus>

HHS Guidance on COVID-19 and HIPAA

<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html>

Specific Federal Guidance Related to SSW Services and Education

[FERPA](#)

To ensure FERPA regulations are followed the student's personally identifiable information will not be given to any educational agency or institution without written consent provided by the parent/guardian of the student. In addition, all rules and regulations will be followed as stated in the document provided by The United States of America Department of Education, Student Privacy Policy Office published *FERPA & Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions (FAQs), March 2020*.

https://studentprivacy.ed.gov/sites/default/files/resource_document/file/FERPA%20and%20Coronavirus%20Frequently%20Asked%20Questions_0.pdf

[HIPPA](#)

When providing telehealth to students and families CCSD will use the recommendations set in place by the U.S. Department of Health and Human Services and the U.S. Department of Education in the *Joint Guidance on the Application of the FERPA and HIPAA To Student Health Records, December 2019*

https://studentprivacy.ed.gov/sites/default/files/resource_document/file/2019%20HIPAA%20FERPA%20Joint%20Guidance%20508.pdf

[Special Education and 504](#)

According to the U.S. Department of Education: *Questions and Answers on Providing Services to Children with Disabilities During the Coronavirus Disease 2019 Outbreak, March 2020*. School Districts are required to provide Related Services to students who are absent from school due to COVID-19 school closures.

Any student that was provided counseling as a related series by a school social worker, shall continue to offer those services via phone, Google Meets, Google Hangout, or Zoom.

<https://sites.ed.gov/idea/files/qa-covid-19-03-12-2020.pdf>

Appendix C: Resources for our families

How to Avoid Passing Anxiety on to Your Kids

https://childmind.org/article/how-to-avoid-passing-anxiety-on-to-your-kids/?utm_source=newsletter&utm_medium=email&utm_content=%20Parents%20Guide%20to%20Problem%20Behavior&utm_campaign=Weekly-03-16-20

Meditation Apps for Kids

https://www.common sense media.org/lists/meditation-apps-for-kids?j=7698356&sfmc_sub=170711961&l=2048712_html&u=143332603&mid=6409703&jb=1022&utm_source=covid19_resources_jim&utm_medium=email

Parent/Caregiver Guide to Helping Families Cope with the Coronavirus Disease 2019 (COVID-19)

https://www.nctsn.org/sites/default/files/resources/fact-sheet/outbreak_factsheet_1.pdf

“You Are Not Your Child’s Teacher. You are their parent. You don’t need to panic about educating your child during quarantine.” (Slate article and podcast)

<https://slate.com/human-interest/2020/03/you-are-not-your-childs-teacher-quarantine-education.html>

Appendix D: NASW Code of Ethics & Resources for Telehealth and other online SSW services

NASW Code of Ethics

<https://www.socialworkers.org/About/Ethics/Code-of-Ethics>

NASW, ASWB, CSWE, & CSWA Standards for Technology in Social Work Practice

https://www.socialworkers.org/includes/newIncludes/homepage/PRA-BRO-33617.TechStandards_FINAL_POSTING.pdf

Telemental Health by Elizabeth Felton, JD, LICSW Office of General Counsel © March 2020.
National Association of Social Workers

<https://www.socialworkers.org/LinkClick.aspx?fileticket=evgx77RtVLI%3d&portalid=0>

Making the Most of “Going Virtual” in Response to COVID-19

https://education-first.com/covid-19/?mc_cid=81ee45e743&mc_eid=a2fb06eece&utm_source=Transforming+Education+Subscribers&utm_campaign=3981b07ddb-EMAIL_CAMPAIGN_2019_09_03_02_53_COPY_01&utm_medium=email&utm_term=0_99e6730d6b-3981b07ddb-421930489

PRACTICE GUIDELINES FOR VIDEO-BASED ONLINE MENTAL HEALTH SERVICES

https://www.integration.samhsa.gov/operations-administration/practice-guidelines-for-video-based-online-mental-health-services_at_5_29_13.pdf