



Community of Practice Tip Sheet #2
Ethics and Confidentiality in Virtual Groups

Best Practices in Planning

Informed consent for virtual group therapy (signed document; see sample for items to use)

- Discusses risks to virtual therapy, requirements to participating in virtual group therapy
- Consider using cartoons to highlight the key elements

Confidentiality agreement (potentially a signed document)

- Outlines specifically what is allowed and what isn't; provides opportunity for educating the client on need to maintain privacy

Professional disclosure statement

- Education, theoretical orientation, etc. May be required by some states (can be included in informed consent document)

Identity verification

- Ask member to take a selfie with their ID and send it to you (and can send closer up image of their ID)
- If doing a phone session, ask them to verify their ID/Driver's License number that they already sent you to verify the voice if you don't recognize it

Group member preparation/pre-group meetings

- Discuss group member's roles, expectations, and their contributions to keeping the group safe for themselves and other members. Use humor to highlight key points
- Use motivational interviewing to increase their buy-in about the group
- Teach them the technical aspects of using the group meeting technology
 - Remember that individuals who have been incarcerated for several years are often very unfamiliar and uncomfortable with using technology. Work with them (with patience) to help them get comfortable with the technology. Sample YouTube instructional video: <https://www.youtube.com/watch?v=auA7OmQYZjl>
 - Consider creating YouTube videos for common on-boarding techniques (filling in PDFs electronically, connecting to Zoom, etc)
 - Teach them to rename their screen name on Zoom to be just their first name
- Consider community supports if client needs a secure location/computer to use (available in some counties)

Before each session

- Before adding a new member to your group, pull their file, look over the intake, and get familiar with the person and what their concerns are
- Consider sending out the group guidelines and expectations before each group (consider having these in image/cartoon form)
- Verify on your compiled list which clients are approved to use their phones (because of restrictions to smart phones or computers for various reasons)

Best Practices in Performing

Identity verification

- Ask a new member to show their ID right when they join the group



Location check

- Have every member do a 360 degree room check to ensure they are alone
- Do not allow members to use virtual backgrounds
- If in a non-secure location (grocery store, car, etc), tell them you'll remove them to the waiting room and will let them in once they let you know they are in a secure location (via text, or pre-arranged amount of time later)
- If they are in a location other than their emergency contact location provide in intake/group screening, have them message you their location in a private chat or send you a screenshot of their location shown on GoogleMaps (verify the date/time on their phone)

Ongoing discussion about privacy and confidentiality

- Use the group to educate new group members on norms and confidentiality. Ask group members to share how they keep the group confidential.
- Active discussion of need for privacy as way for members to get the most out of group
- Discussion of whether members feel safe making disclosures; help members discuss their anxiety

Modifying behaviors

- Give everyone an opportunity to change their behavior. Invite them to do things per recommendations before removing them (if confidentiality isn't compromised)
- If a non-group members enters the room where your member is, remove them to the waiting room, and readmit them a few minutes later once

Removing members from group

- Remove member from group if not adhering to agreements in the informed consent/group guidelines (e.g., other people in room with them/switching person whose voice is on the phone)
- Remove member if not at location provided and doesn't give new location for emergency use

Best Practices in Group Processing

Documentation

- Individual notes written for each person (including documenting their location and specific start and stop time)
- Can use shared "theme/content" with no client names in all notes

Debriefing

- Discussion with supervisor or fellow clinicians about ethical concerns (e.g., when to allow a member to try again by going to the waiting room and fixing the concern vs removing them from the group for that session and reporting to their PO)

For reference, see the Association for Specialists in Group Work (ASGW) Best Practices Document:
<https://asgw.org/wp-content/uploads/2020/06/usgw297284-111..117.pdf>

Developed by: Leann Diederich, Ph.D. and the Idaho Community of Practice group held on Feb. 26, 2021.