CAMFT'S 52ND ANNUAL CONFERENCE "THE FUTURE OF MENTAL HEALTH:

TOOLS

FOR THE THERAPIST'S TOOLBOX"

SUNDAY, MAY 15, 2016

AM SESSION (2 CE CREDITS)
10:15 A.M.–12:15 P.M.

SU6TE "21st Century Counseling—From the Couch to the Computer: Using Videoconferencing to Pioneer a New Frontier in Mental Health" presented by Suzanne Hughes, LMFT

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21ST CENTURY THERAPY

WELCOME TO THE VIRTUAL COUCH
SUZANNE HUGHES, MARRIAGE AND FAMILY THERAPIST

DIGITAL IMMIGRANTS
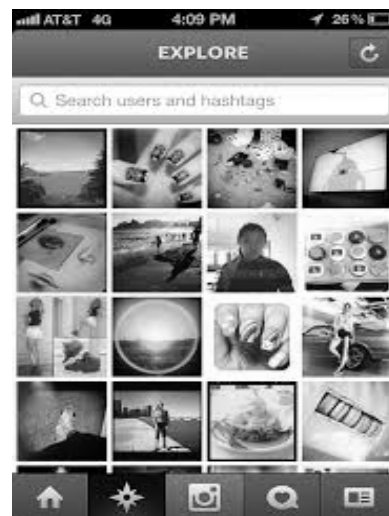
- Natives and non-natives to the Digital World
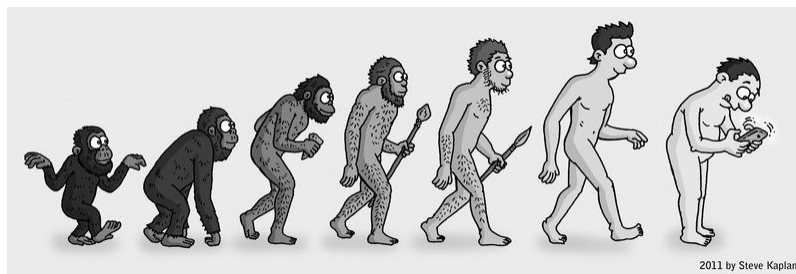
NEW AND NOT NEW

NEW AND NOT NEW

NEW AND NOT NEW

NEW AND NOT NEW

WHAT IS HAPPENING?

2011 by Steve Kaplan

WHAT IS TELE HEALTH

- **"Telehealth"**
  - is the delivery of health care services using information and communication technologies to consult, diagnose, treat, or educate a patient while the patient is at an "originating site" and the health care provider is at a "distant site." The "originating site" is the site where a patient is located at the time health care services are provided through a telecommunications system.
- **Synchronous vs asynchronous**

LEGAL AND ETHICAL CONSIDERATIONS

- Clear
  - Same as Face to Face counseling
- Confusing:
  - State considerations
  - Changing Recommendations

STATE	Telehealth/ Telepsychology Statutes and/or Regulations	Practice of Psychology defined to include specifically telepsychology?	Licensing Board Advisory Opinions	Telehealth Coverage Mandate	Temporary / Guest Practice Provision	Penalties for Unauthorized practice of psychology without a license
	occur in the physical presence of the patient			900,000 but proximity to nearest city of 500,00 is > 30 miles)		
ARKANSAS	NO	NO	NO	NO	NO	A.C.A. § 17-97-301 Misdemeanor: fine of $500-$1,000
CALIFORNIA	Cal. Bus. & Prof. Code §§ 2904.5, 2290.5 CA licensure is required to provide telehealth services to CA residents; telehealth includes live interactive and store & forward technologies; patient's verbal consent must be obtained prior to delivery of telehealth services & documented in patient's record. Failure to obtain patient consent in advance constitutes	Cal. Bus & Prof. Code § 2904.5 – Applicability of Telemedicine Provisions of Section 2290.5	See CA Board of Psychology's "Notice to California Consumers Regarding the Practice of Psychology on the Internet" available online at http://www.psychboard.ca.gov/consumers/internet-thrpy.shtml	Cal. Health & Safety Code § 1374.13; Cal. Ins. Code § 10123.85; Cal. Welfare & Institutions Code §§ 14132.72, 14132.725 Private payers cannot require in-person contact between a health care provider and patient or limit the type of setting where services are provided before payment is made for covered telehealth services, subject to coverage terms and conditions	Cal. Bus & Prof Code §2912 – Out of State Psychologists - Exemption Nothing in this chapter shall be construed to restrict or prevent a person who is licensed as a psychologist at the doctoral level in another state or territory of the United States or in Canada from offering psychological services in this state for a period not to exceed 30 days in any calendar year.	Cal. Bus & Prof Code §2970 Misdemeanor: fine not exceeding $2,000 AND/OR imprisonment in county jail not exceeding 6 months

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FOUR CAMFT RECOMMENDATIONS

- CAMFT *Code of Ethics, Section 1.4.2* pertains to electronic therapy (e.g., therapy by telephone or internet).

- The CAMFT *Code of Ethics* recommends the following:
  - Ensuring telephone or video conferencing is an appropriate and suitable means of rendering psychotherapeutic services,

CAMFT RECOMMENDATIONS

- Informing patients of the potential risks, consequences, and benefits of telehealth, including but not limited to, confidentiality, clinical limitations, transmission difficulties, and the ability to respond to emergencies,

- Obtaining informed consent as required by the California Telemedicine Act.11

CAMFT RECOMMENDATIONS

- Equivalency
  - no conclusive studies indicating telehealth is either any less effective than traditional face-to-face counseling; or, that telehealth should not be used to treat an individual with a particular condition or diagnoses.
- Disconnection and Emergencies
- Appropriateness:
  - 1) Skill level in using technology
  - 2) comfortably express himself or herself through a telephonic or online modality
  - 3) whether the technology allows the clinician to identify subtle physical cues, body language, or voice intonatioion
  - 4) Personality Type
  - 5) Risk Factors and Diagnosis

LEGAL AND ETHICAL ISSUES

- Same standards for face to face apply for online treatment (Need Verbal consent Documented)
- State License in the location that the services are delivered
- Confirm that the system you use meets requirements from HIPAA and HITEC for data security and encryption
- Confirm your professional liability coverage covers telehealth

SKYPE, FACETIME, AND VSEE

- HIPAA- (PHI) patients protected health Information
- Written business associate agreement (BAA)
  - appropriately safeguard and protect the privacy and security of a patient's health information

EVIDENCE-BASED RESEARCH

- **The effects of online psychotherapy outlasted the results of face to face counseling.**
  - In a University of Zurich study found that depression was eased in 53% of those give online therapy as opposed to 50% who had in-person therapy57% of online patients showed no signs of depression compared to 42 percent with conventional therapy

    Journal of Affective Disorder, 2013

EFFICACY STUDIES

- **Online therapy significantly lowered the number of hospital visits among veterans.**
  - In a four year study by John Hopkins found that there was a 25% drop if they chose on-line therapy. Face to Face clients also reduced there hospital visits

    Psychiatric Services, April 2012

  Online therapy delivers the same satisfaction at slightly less cost.
  - Clients in Canada were offered online and face to face counseling and both groups experience the same clinical outcome of patient satisfaction but the online group was 10% less expensive

    American Psychiatric Association, 2007

EFFICACY STUDIES

- **Lower attrition in telephone group vs. face to face group. Longer term follow up (6mths) found face to face group were significantly less depressed**
  - Mohr, et al. found that our of 325 primary care patients diagnosed with MDD that were randomly assigned to either a face to face therapy or telephone therapy. Both groups showed improvement post treatment but 6 months later the face to face group showed less depressive symptomatoloy
    - Journal of American Medical Association, 2012

EFFICACY STUDIES

- **Collaborative assessments with multiple clinicians can improve client care. Pre/post treatment becomes efficient and through**
  - Smith et al, discuss collaborative assessments based can improve symptom targeting and client care
    Professional Psychology: Research and Practice, 2011
- **Online therapy provides effective treatment for PTSD and accommodates a large number of clients**
  - A study of Defense service members with PTSD were treated with in-person and online therapy after 8 weeks the online group showed greater improvement. After 6 months they continued to show more improvement over the in-person group
    American Journal of Psychiatry, November 2007

OTHER STUDIES

- Study of Anxiety disorders in students showed no difference in treating an online group or in-person using the state trait anxiety inventory
- In 2003, a study established that telephone therapy outcomes were not significantly different from face to face therapy.

LOOKING FOR A ONLINE PROVIDER

- Live support
- Hippa–compliant technology
- Training
- Payer reimbursement
- Liability rider
- Marketing support
- Clinical tools for outcomes
- Practice management Tools
- Browser compatibility
- Chat features

PROVIDERS

Synchronous

- The Angry Therapist
- Virtual Therapy Connect
- Breakthrough
- Everbliss
- Elittlia

Asynchronous

- The Angry Therapist
- Seven Cups of Tea
- Talk Space
- Betterhelp

	orientation	Cost to client	Pay to Therapist	Client Membership	Set your own fee	Insurance
Break through	ALL	varies	$6.00 per session use	No	Yes	Yes
Eltitila	CBT	$9.00 first session	?	No	No	No
Everbliss	All-App-based	$25,$45,$90	80%	No	No	
Better Help	Messaging	$35 a week	$25-$8500	Yes	No	No
Talk space	Messaging	$25.00 a week	Up to $3000	Yes	No	No
Virtual therapy connect	All	varies	$29 a month	No	Yes	Yes
The Angry Therapist	All but training in a coaching model	Varies	80%	Yes-$29.00 a month for tribes	Yes and no	Maybe
Seven cups of Tea	Peer support Counseling Skill programs	$7.99 a month	?	Yes	No	No

MARKETING ON-LINE

- Envision your ideal client
- Write to the client
- Less education and experience-more who you are as a therapist
- Beware of psychobabble
- Invitation

BIO EXAMPLE

Do you feel unfulfilled? You may have a great partner, children, a satisfying career, but there is a place that fills empty. Do you experience the nagging feeling that something inside you is lost or missing? On paper you look great, but inside you are fighting to hold it all together.   You are grateful for all the good things in your life, yet there is an inexplicable hollowness that echoes in you. You may even feel guilty for feeling empty when life looks full.

I work with high-achievers who are desperately seeking to live a divinely-inspired intentional life. Where purpose reigns supreme and regrets are not allowed. If you are searching for a counselor to walk with you down this crazy road called life and you have the courage to unabashedly look at yourself and fight for your dreams, I will be a good fit for you. I like a client who wants to do the work to figure out where that emptiness comes from and works fiercely to fill it the void. I don't fix people; they fix themselves through openness, willingness, and vulnerability. If you can't be honest, please don't come into see me.

My work is a little going back, a lot on the present and a focus on the future. I ask questions and give feedback. I am not a nodding head with long annoying blocks of silence. Grief and Loss, depression and traumatic life experiences are my specialties. I have 20 years of experience and I work with teens, adults, and couples.

CANDIDATES FOR ONLINE THERAPY

- Current client
- Highly verbal
- Low resistance
- Traveler
- Rural or remote location
- High motivation to change
- Adjustment Disorders

COUNTER-INDICATED

- High resistance
- Crisis cases
  - History of suicide/homicide
  - Extreme emotional volatility
  - Personality Disorders
  - Substance Abuse

BENEFITS OF ONLINE THERAPY

- Portable
- Convenience of Care
- Increased Revenue
- Greater Availability
- Fewer Missed Appointments
- More Flexible Hours
- Growth for your Practice
- No commute
- Decrease Overhead
- Compliance

FIRST SESSION

- Authenticate patient identity- drivers license
- HIPPA notice of privacy practices
- Consent for treatment that includes telemedicine services (Verbal documented)
- Clear procedure for emergencies

TIPS AND TRICKS WITH TELEHEALTH

- Eye contact and tracking
- Lighting
- Adequate soundproofing
- Freedom from interruption and disturbance
- Adjust camera for natural eye contact
- Check in at the start of each visit for sound and video
- Notify the client of what to do if the video doesn't work

LIVE DEMO

- Breakthrough – using VSEE

CONCLUSION

"He who is not courageous enough to take risks will accomplish nothing in life."

Mohammed Ali

"If we wait until we are ready we will be waiting for the rest of our lives."

Lemony Snicket

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