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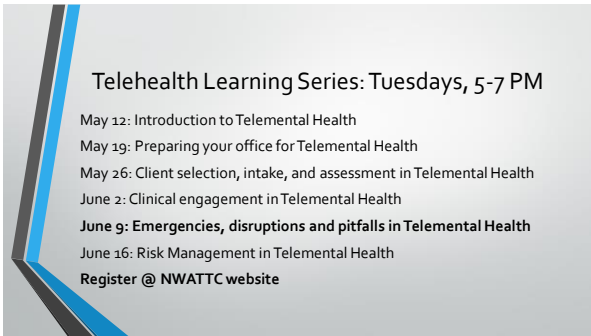
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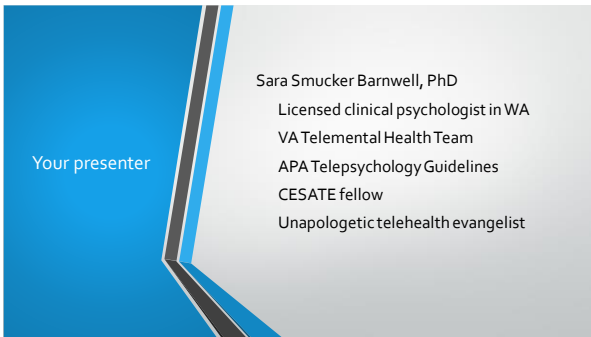
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Learning objectives

- Emergency management
- Technology failures
- Barriers

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Class structure

- Didactic lecture
- Live Q &A at section breaks
- Video demonstrations
- Submitted questions [nwattctelehealth@gmail.com](mailto:nwattctelehealth@gmail.com)
- Live Q & A

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Disclaimers

- During a technology presentation, technology will fail
- Offer best practice recommendations based on clinical work, literature review and regulatory experience
- Identifying personal best practices and guidance in developing area

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**Disclaimers**

- Always review state regulations
- Consult with your own legal counsel
- Consult with your risk management coverage
- I do not provide legal advice nor clinical advice

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**Conflicts**



Provides telehealth training



Known telehealth evangelist

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**Agenda: Emergencies and pitfalls**

- Managing clinical emergencies remotely
- Technology failures
- Other pitfalls
  - Document transfer, payment, insurance

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The balance

- Brief review
- Deep dives
- Your questions answered
- On demand prior classes



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Definitions and examples

(Abbreviated)

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Operational definitions

Telemental Health (TMH):  
The provision of any mental health service using telecommunication technologies

Synonymous with videoconferencing

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### HIPAA

**Health Information Portability and Accountability Act (HIPAA):**

Federal law (*Pub. L. 104-191, 100 Stat. 1936, enacted August 21, 1996*) that aims to make it easier for people to keep health insurance, protect the confidentiality and security of healthcare information and help the healthcare industry control administrative costs

- HIPAA Privacy Rule
- HIPAA Security Rule

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### Protected Health Information (PHI)/ ePHI

- Names
- Full-face photographic images
- Geographical subdivisions smaller than state
- All dates (birth, death, discharge)
- Phone/ fax numbers
- Electronic mail addresses
- Social Security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account Numbers
- Certificate/license numbers
- Vehicle identifiers and serial numbers, including license plate numbers
- Device/ serial numbers
- Web Universal Resource Locators (URLs)
- Internet Protocol (IP) address
- Biometric identifiers, including finger and voice prints
- Any other unique ID numbers, code, or characteristic

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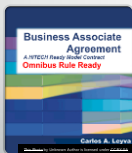
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### Business Associates Agreement (BAA)



Contract between HIPAA covered entity and HIPAA Business Associate (BA) that is used to protect personal health information (PHI) in accordance with HIPAA guidelines.

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**Emergencies**

- Psychiatric emergencies
  - Self harm, violence
- Medical emergencies
- Reporting
- Technology interruptions

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**A brief synopsis**  
Once more with feeling!

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**Videoconferencing appointments**



USE A PRODUCT DESIGNED FOR HEALTHCARE, BAA



INFORMED CONSENT, EMERGENCY PLAN



DOCUMENT

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Videoconferencing appointment



- ASSESS APPROPRIATENESS
- CHECK JURISDICTIONAL RULES
- PREPARE YOUR OFFICE

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Videoconferencing appointment



- Determine what services you provide
- What population you serve
- Documentation transfer, communication, payment

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Emergency management

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Emergency management

- Completed suicide 10<sup>th</sup> leading cause of death in US
- 50% involve firearms
- 90% present to healthcare within weeks/ months
- Diverse literature

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Emergency management

- Violence risks reported in therapy
- Abuse reports
  - Past and prior
- Your jurisdictional reporting rules

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Emergency management

- Clinical assessment
- Environmental assessment
- Care assessment

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### Emergency management

- Standardized screening measures
- Thorough intake
  - Past behaviors, hospitalization
  - Informed consent
- Symptoms assessment, monitoring

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### Challenges in emergency management in Telemental Health

-  ASSESSMENT
-  RESPONSE TIME
-  ABILITY TO INTERVENE

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### Challenges

-  BEHAVIORAL OBSERVATION
-  RAPPORT
-  COMMUNICATION QUALITY

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Challenges



ENVIRONMENTAL CONTROL      KNOWLEDGE OF LOCAL RULES, RESOURCES      TREATMENT PLANNING

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Remote emergency management

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Advance planning

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Publications on TMH emergencies

Shore, Hilty, & Yellowlees (2007)  
Turvey et al (2013)  
Luxton et al (2012)

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Research

Research on between session safety management  
TMH manages emergencies safely  
Research on home environments, clinic  
TMH often the standard of care between sessions

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Appropriateness assessment

Your willingness to manage remote emergencies  
Your scope of practice  
Assessment in your practice

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**Appropriateness assessment**

General TMH appropriateness themes, baseline/ ongoing

- Access to care, barriers
- Diagnosis, interest in modality
- Clinical stability, history of emergencies**

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**Appropriateness assessment: clinical stability**

- Prior treatment history
- Reaction to modality
- Risk factors for self harm

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**Appropriateness assessment**

- Appropriateness of environment
- Availability of private space/ technology
- Safety of space
- DV, exposure to violence, others

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Informed consent

Discuss benefits and risks of modality, including:  
Potential for diminished emergency response  
Jurisdictional reporting rules

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Informed consent

Review specifics of mandated reporting  
Review specifics of reaction to suicidal/ violent ideation  
Introduce your assessment practices

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Emergency plan

 DOCUMENT PLAN IN ADVANCE	 DISCUSS WITH CLIENT
 BENCHMARK EXPECTATIONS	 DISCUSS QUESTIONS

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### Clinician safety

Telehealth increases clinician safety  
May increase willingness to manage emergencies  
Carefully consider impacts on rapport

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### Vignette: Dr. Red

Practice focuses on life transition, anxiety and stress  
Some training in suicide assessment and response  
Factors in quarantine

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### Considerations

EXPERIENCE IN TMH      BANDWIDTH

WILLINGNESS TO MANAGE CRISIS

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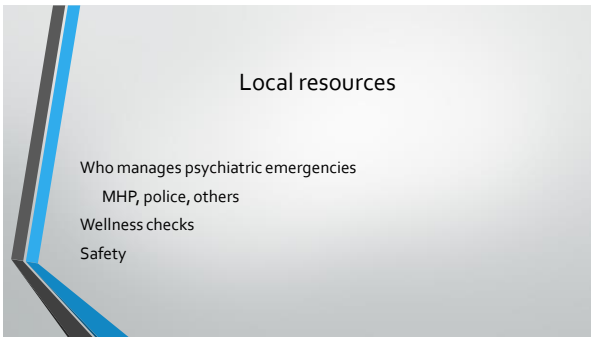
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Treatment planning

YOUR SCOPE OF PRACTICE

APPROPRIATENESS OF CARE

YOUR AWARENESS OF RESOURCES NEAR CLIENT

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Treatment planning

Ethical abandonment  
When there is no good referral  
Investment in advance  
Broad v. focused outreach

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Vignette: Dr. Blue

Treats clients with dual diagnosis  
Wants to serve client who has traveled across state borders  
History of violent ideation

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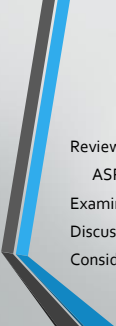
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### Considerations

- Review current state temporary practice guidance
  - ASPPB website
- Examine differences in reporting requirements
- Discuss with client
- Consider formal assessment

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### Administrative issues

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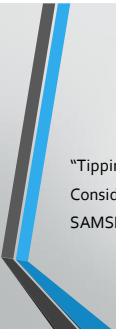
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### Emergency planning

- "Tipping point," your algorithm
- Consider use of evidence-based assessment measures
- SAMSHA resources

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Emergency planning

- Clear roles and responsibilities
- Protocols for in session
- Between hours

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Emergency planning

- Inform clients of what will happen
- Who will be involved
- Transparency on decision tree

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General clinical issues

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Clinical factors



CLINICAL ENGAGEMENT      OBSERVATIONAL DATA      AWARENESS OF STRONG AFFECTIVE STATES

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Clinical factors

- Impacts on clinical relationship
- Reporting difficult information
- Your awareness of the local process
- What will happen

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Verification

- Beginning of each sessions
- Contact information
- Alternate contact information
- Location

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Information



WHO IS IN THE HOME

WHAT RESOURCES ARE LOCAL

WIDER COMMUNITY

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Your experience



Prior training in risk management and response

Willingness

Risk v. benefit

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Assessment

Consider formal training/ measures

- Suicide risk assessment
- Violence risk assessment
- Exposure to violence/ family violence

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In real time

- ASSESS SAFETY (FOR CLIENT, OTHERS)
- TRANSPARENCY IN MAKING REPORT
- SUPPORT PERSON

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In real time

- Contact appropriate resources
- Remain on the line
- Follow up

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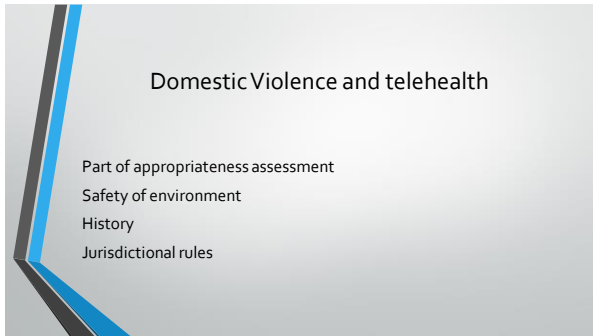
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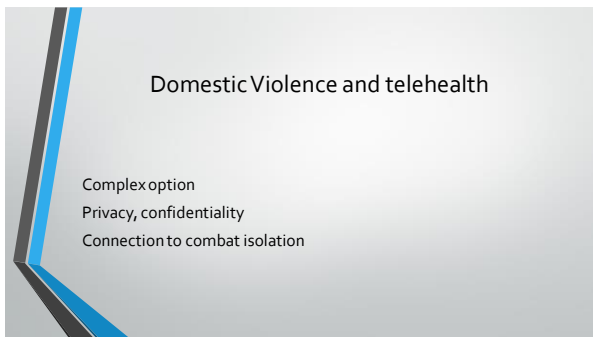
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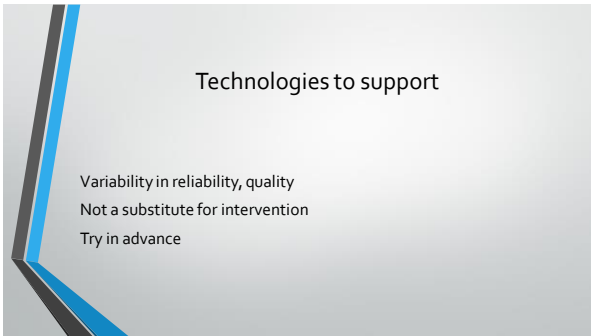
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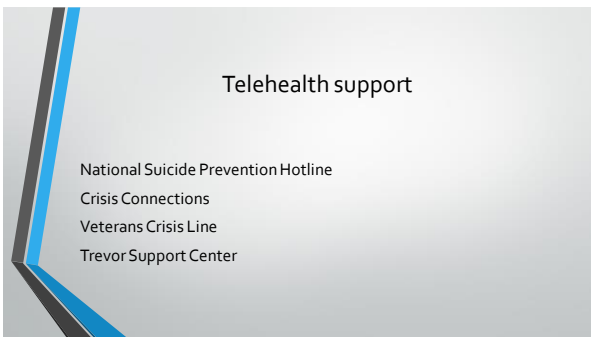
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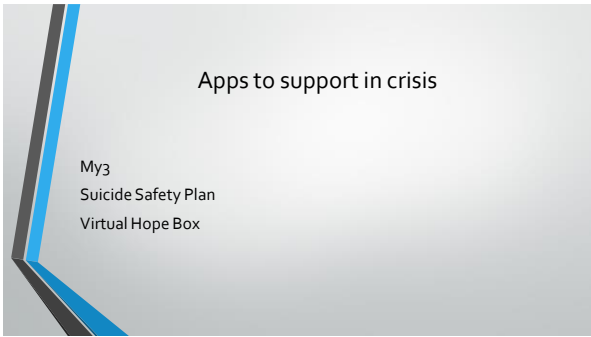
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### When the tech fails



- Informed consent
- Advance planning
- Who offers technical support

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### Environmental factors

- Interruptions to privacy, confidentiality
- Lighting
- Noise
- Angles

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### Call drops

- Check Internet
  - Availability, speed test
- Reestablish through primary platform
- Make alternative platform available
- Reduce bandwidth
  - SD, not HD; austere background

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Call quality poor

- ✓ Pixelation
- ⌚ Delay
- 🔊 Audio quality

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Call quality poor

- Reduce bandwidth
  - SD, not HD
- Consider swapping audio to telephone
- Change platforms
  - Alternate video, telephone

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Sound muted

- Check system level volumes
- Check application level volumes
- Who can hear who
  - Alternative platform
  - Telephone

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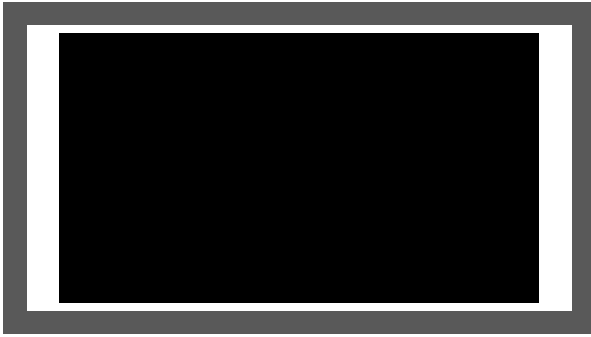
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Vignette: Dr. Pink

Providing therapy to client for relapse prevention  
Client becomes upset  
Hangs up

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Considerations

Client history  
Agreed upon plan  
Support person  
Context

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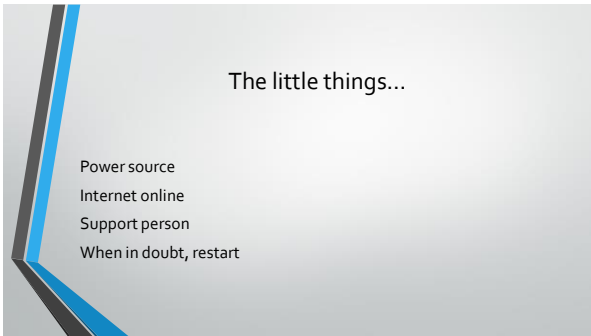
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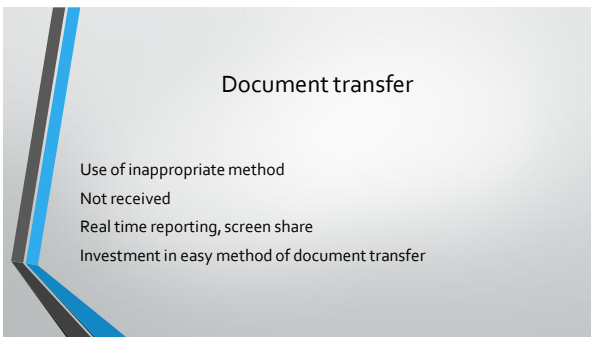
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Payment

- Payment method
- HIPAA permits
- Integration
- Nonpayment
- Cards on file, associated fees

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Insurance

- Many executive orders requiring coverage
- Parity
- They will expire
- Consider what this will mean
- Video v. telephone

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Live Q & A

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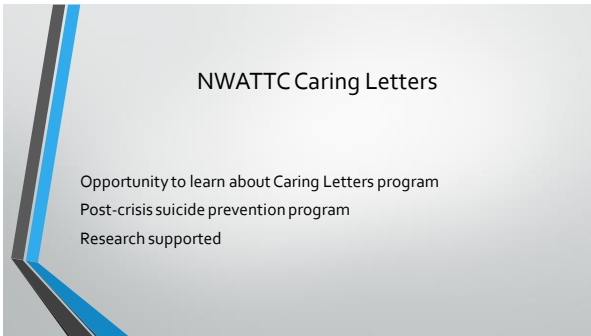
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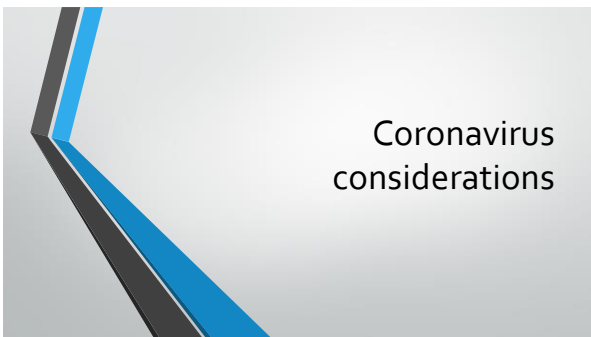
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Emergency response and COVID-19

- Initial data to suggest increase in suicidal ideation
- Impact on risk factors
  - Isolation, treatment availability
- Domestic violence
- Interpersonal violence

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Emergency response and COVID-19

- Willingness to seek emergency care
- Safety of emergency services
- Care as usual

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That's a good question

Previously submitted questions

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When clients prefer phone

- Be aware of reimbursement
- Distractions
- Boundaries
- Engagement

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Caller ID

- Blocked numbers
- Phone line
- VoIP, apps

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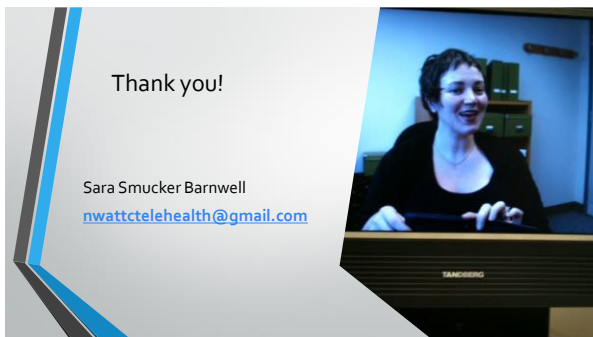
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