

WEBVTT

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00:00:01.344 --> 00:00:14.515

Thanks again for joining us today. Um, I am Nicole Stargell, and I am an associate professor in the Department of counseling, and finishing my 1st year as the chair of the department as well.

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00:00:14.515 --> 00:00:17.094

So I'm excited to have you here.

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00:00:17.368 --> 00:00:17.818

Um,

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00:00:17.844 --> 00:00:21.684

I have been working to organize this,

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00:00:21.713 --> 00:00:22.283

um,

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00:00:22.344 --> 00:00:25.643

workshop through not only the Department of counseling,

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00:00:25.643 --> 00:00:29.364

but also through the school of education as well as,

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00:00:29.603 --> 00:00:30.083

um,

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00:00:30.114 --> 00:00:33.503

the chapter of Chi Sigma iota,

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00:00:33.503 --> 00:00:35.393

which is our counseling honor society.

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00:00:35.603 --> 00:00:38.814

And our chapter here at Pembroke is the 5 Sigma chapter.

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00:00:38.844 --> 00:00:48.414

So thank you to everyone who is a part of the process today are faithful student members uh,

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00:00:48.444 --> 00:00:54.054

Chris for hosting this session that we're in right now Thank you to the Dean.

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00:00:54.054 --> 00:00:58.524

The associate dean. Everybody in the school of education and and welcome today.

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00:00:59.033 --> 00:00:59.423

Um,

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00:00:59.423 --> 00:01:07.254

so we are going to go through talking about telling mental health counseling and if you were,

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00:01:07.493 --> 00:01:08.123

um,

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00:01:08.153 --> 00:01:11.813

if you have watched our 4 part series on Tele,

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00:01:11.813 --> 00:01:17.724

counseling through for counseling for professional school counseling as well as clinical mental health counseling,

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00:01:17.903 --> 00:01:19.944

then this will kind of be a touch up session,

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00:01:19.944 --> 00:01:20.213

you know,

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00:01:20.213 --> 00:01:24.563

building upon any updates that we've had since that time.

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00:01:24.563 --> 00:01:28.853

When we recorded that the regional development Institute.

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00:01:29.454 --> 00:01:44.034

And also, it'll be a time for us to collaborate for you to potentially ask any questions now that we are seemingly emerging from coven, 19 locked down and kind of adjusting to this new post coven era.

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00:01:44.635 --> 00:01:55.465

That that will probably become our new normal or might already have become our new, normal. Um, so as we go through today, please feel free to type your questions into the chat.

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00:01:55.495 --> 00:02:07.765

Um, you also are, are welcome to unmute yourself and present questions or comments that way as well, but I will monitor the chat and we can go through and have a discussion based presentation.

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00:02:07.974 --> 00:02:11.485

Um, I also have content that we will work through.

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00:02:12.564 --> 00:02:25.974

At a pretty good pace so we're gonna just take time to define telehealth Tele, mental health counseling, explore legal issues, explore some ethical issues and then also discuss some practice considerations.

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00:02:26.094 --> 00:02:37.375

Um, I have a another presentation called elemental health or Tele, counseling and social justice, which really dig deeper into practice considerations.

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00:02:37.375 --> 00:02:45.504

So we'll just do a, you know, touch upon this as it relates to legal and ethical issues in this presentation here today.

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00:02:46.705 --> 00:02:54.055

Okay, so telehealth is defined as when a healthcare provider is in 1 place and a patient, or a client is in another place.

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00:02:54.085 --> 00:02:54.354

So,

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00:02:54.354 --> 00:02:55.585

in the professional counseling,

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00:02:55.585 --> 00:02:58.284

we typically refer to our consumers as clients,

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00:02:58.314 --> 00:02:58.585

um,

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00:02:58.615 --> 00:03:11.305

in other medical professionals they're often referred to as patients and telehealth is something that is recognized as a viable way to provide health services to individuals.

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00:03:11.305 --> 00:03:25.764

And this could range a wide span of health services. I know I've, during during this past year, when I got covid, I did a telehealth session with my doctor, and they told me not much that we can do, because it's a virus right?

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00:03:25.764 --> 00:03:40.525

But, there are some, some medicines and some things that can relieve the symptoms. So, that was an excellent way to use telehealth. Um, because I was sick and my doctor was not exposed to be if you, um, there are times when we need to be in person.

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00:03:40.555 --> 00:03:50.995

And, um, and certainly there are times when we're doing counseling that we need to be in person as well. But, um, depending on the circumstance, and the time that we are.

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00:03:53.514 --> 00:04:03.895

Joining with our, our health professional, oftentimes, telehealth is a really viable and helpful option and we'll go through talking about some of the benefits as well.

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00:04:04.495 --> 00:04:04.794

Um,

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00:04:04.794 --> 00:04:08.604

so then when you extend telehealth or actually,

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00:04:08.604 --> 00:04:12.835

when you kind of reduce telehealth specifically to mental health services,

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00:04:12.925 --> 00:04:15.625

it's when the healthcare providers in 1 place,

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00:04:15.625 --> 00:04:20.365

and the client is in another place and then we administer our therapy,

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00:04:20.394 --> 00:04:22.824

our counseling services through a,

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00:04:22.855 --> 00:04:23.334

um,

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00:04:23.814 --> 00:04:25.435

an electronic platform,

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00:04:25.435 --> 00:04:28.824

so we're not physically in the room with 1 another.

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00:04:29.004 --> 00:04:42.384

However, it still is considered face to face because we are seeing each other right in lifetime. So we're not chatting. We're not emailing although those things do tend to fall under this umbrella of Tele, mental health.

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00:04:42.415 --> 00:04:46.644

So, let me go ahead and move on to this.

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00:04:46.973 --> 00:04:59.814

Next slide here, there's lots of different names for Tele, mental health, um, Tele, behavioral health Tele, counseling, behavioral telehealth, distance counseling and all of those things are referring to this same thing that we're talking about today.

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00:04:59.874 --> 00:05:06.084

So, as I said, um, we can have face to face or asynchronous telehealth.

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00:05:06.329 --> 00:05:13.553

The way that you're seeing me right now for those who are actively in the audience, this is also being recorded for future use.

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00:05:14.392 --> 00:05:24.324

If we were joining together as counselor and client in this moment, and you were live on the screen with me, then that would be considered face to face live telehealth.

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00:05:24.473 --> 00:05:38.334

Um, and then if we were doing asynchronous telehealth, that would be if you sent me an email, and then I sent you a list of referrals or a list of resources, you know, and we're not actively engaged at the same time.

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00:05:38.334 --> 00:05:44.153

But I am providing to you, health services through electronic means. So.

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00:05:44.459 --> 00:05:58.973

1 thing that I think is important to define is that we were already using telehealth far before right? Even if we didn't know it. And so I think Kobe shining a light on something that was really necessary and important.

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00:05:59.004 --> 00:06:06.774

There were a lot of really painful and horrific things that have happened in the covet era. But also, um.

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00:06:07.584 --> 00:06:18.444

Silver lining is that we were already doing Tele counseling and I think maybe a lot of people didn't realize that because anytime you move away from simply scheduling appointments,

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00:06:18.473 --> 00:06:21.084

using any sort of electronic means,

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00:06:21.084 --> 00:06:23.903

which would be telephone or email,

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00:06:23.903 --> 00:06:24.444

then you are,

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00:06:24.473 --> 00:06:29.153

it's you are essentially engaging in telehealth so if I call a client to check on them,

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00:06:29.153 --> 00:06:29.303

like,

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00:06:29.303 --> 00:06:29.663

hey,

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00:06:29.874 --> 00:06:30.713

I know you were,

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00:06:30.713 --> 00:06:31.074

um,

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00:06:31.103 --> 00:06:33.233

suicidal last week and,

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00:06:33.533 --> 00:06:33.774

you know,

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00:06:33.774 --> 00:06:34.673

I told you,

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00:06:34.673 --> 00:06:36.923

I would check in with you every 2 days.

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00:06:37.134 --> 00:06:48.983

Whether that's done via email or via telephone call. That's telehealth. Whether I am sending you a, an email that says, here's a list of referrals. Alright.

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00:06:48.983 --> 00:06:58.314

We talked about your need for wellness and here's a list of referrals for a couples counselor that is Tele, counseling. So.

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00:06:58.738 --> 00:07:09.863

I think that we didn't often recognize that anytime we're using electronic communication for anything, dealing with mental health, aside from scheduling. I'll see you on Tuesday at 530.

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00:07:09.863 --> 00:07:24.204

um, that is that's Tele, counseling and we should be keeping record of that. And that means record of our phone calls, we should be keeping record of our emails. Anything that is considered Tele, counseling should be part of the client's permanent record.

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00:07:24.204 --> 00:07:38.184

Um, so there was a question about can we, bill for asynchronous telehealth? Not in my experience. No, we so that's 1 of those things we're legally obligated in order to keep record of those things. And that becomes part of the clients.

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00:07:39.744 --> 00:07:48.983

You know, formal record, the referrals that we send to individuals, the client check ins that we do that's all part of the, um, of the clinical record.

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00:07:49.194 --> 00:08:00.264

But we are not it would really depend on the insurance company. Um, definitely, if you were grant funded and they paid you, you know, in you, uh.

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00:08:00.689 --> 00:08:15.413

You were paid for any, any sort of client communication, but typically, no, you're not, um, able to build for asynchronous telehealth. Um, although it does need to be part of the permanent client record documented, you know, a phone call on this day.

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00:08:15.413 --> 00:08:25.764

This is what we discussed, just like, you would a, a case note, just an abbreviated note on that, um, you know, saving those emails. Those are all part of the, the client's file. Um.

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00:08:26.129 --> 00:08:35.249

There have been some leniency on billing for Tele counseling. So that's another kind of silver lining. I would say of this is that, um.

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00:08:35.634 --> 00:08:49.344

When before covet, it could be very difficult to Bill and there were certain rules in Ohio. You had to meet with a client 1 time in person face to face before you could then move on to face to face online counseling with that individual.

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00:08:49.374 --> 00:08:58.823

So, I think that in Ohio they had relieved that duty that requirement of that 1st, in person meeting during.

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00:09:00.053 --> 00:09:11.514

But I believe that that's something that might stay as a, as a no longer a rule in Ohio that you can do synchronous Tele, counseling from from session.

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00:09:11.514 --> 00:09:23.543

1 on, so there has been leniency in some of the rules, the way that we view Tele, counseling and then also health insurance companies have been reimbursing more readily.

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00:09:23.543 --> 00:09:25.134

And and I,

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00:09:25.224 --> 00:09:26.663

I believe the,

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00:09:26.693 --> 00:09:40.134

the word is that that is going to start to become more and more strict companies are gonna try to reduce the percentage or the rate that they're going to reimburse for Tele,

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00:09:40.134 --> 00:09:42.923

counseling versus in person counseling.

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00:09:43.524 --> 00:09:57.144

But we have some significant leverage to advocate for the benefit of Tele, counseling and still, even before cobit, a lot of insurance companies would pay full rate for Tele, telehealth services.

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00:09:57.323 --> 00:10:07.043

And so, so we just have to look at every, every individual insurance company. What are their policies? And what direction are they heading in terms of Tele, counseling?

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00:10:09.653 --> 00:10:10.014

So,

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00:10:10.014 --> 00:10:12.234

in terms of the benefits of Tele,

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00:10:12.234 --> 00:10:12.594

counseling,

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00:10:12.594 --> 00:10:14.543

these are the types of things that we have,

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00:10:14.573 --> 00:10:15.203

um,

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00:10:15.234 --> 00:10:15.563

you know,

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00:10:15.563 --> 00:10:17.364

continued to establish,

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00:10:17.394 --> 00:10:17.604

uh,

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00:10:17.604 --> 00:10:21.624

as we have kind of roughly shifted to Tele,

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00:10:21.624 --> 00:10:27.264

counseling and things that we will continue to hone in on as our research continues.

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00:10:27.533 --> 00:10:40.793

Um, but there are many benefits of Tele, counseling, and there's really not a lot of research to say that it's specifically on helpful for for a specific population, except for crisis.

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00:10:40.823 --> 00:10:45.864

It is it's not a great tool for, for clients who are actively in crisis.

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00:10:46.104 --> 00:10:46.553

Um,

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00:10:46.583 --> 00:10:47.453

and so,

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00:10:47.484 --> 00:10:48.653

if you have a client,

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00:10:48.653 --> 00:10:49.134

who is,

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00:10:49.163 --> 00:10:49.854

is very high,

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00:10:49.854 --> 00:10:52.374

need very high crisis level,

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00:10:52.583 --> 00:10:52.974

um,

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00:10:53.004 --> 00:10:56.394

they probably would need a higher level of care than that,

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00:10:56.394 --> 00:11:01.224

which is offered of elemental health services and we can talk about that in a little bit.

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00:11:01.734 --> 00:11:05.153

But, but safety planning in the.

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00:11:05.514 --> 00:11:18.774

Virtual realm is very similar to that that we would do in in person and, you know, if you kind of step back to reflect, it's a, it's a dangerous situation. If we are, um, as professional counselors.

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00:11:18.774 --> 00:11:26.874

If we're driving a client to, um, maybe say a psychiatric ward, if they do need further evaluation, if they're actively in crisis.

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00:11:27.144 --> 00:11:36.234

Um, and so so really we do just the same thing that we would in person, you know, avoiding extending ourselves beyond our standard of care.

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00:11:36.413 --> 00:11:45.083

But if we had an actively suicidal or homicidal client in our presence, what we would do is access and tap into that higher level of care.

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00:11:45.083 --> 00:11:59.033

So, we would probably 1st call that person's emergency contact and that emergency contact with and assume responsibility for getting them to a safe place, which would potentially be a hospital E. R and inpatient facility that we could recommend.

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00:11:59.274 --> 00:12:13.583

Um, you know, so we don't physically do that often anyway, and I always recommend that we do not do that right? Because that is going beyond our scope of practice, which is we are therapists we're not emergency 1st responders. Right?

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00:12:13.583 --> 00:12:18.953

So, if that primary emergency contact is not able to.

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00:12:19.583 --> 00:12:34.344

Bring this individual to that next step of care then we would have to call authorities, whether that's our local mobile crisis unit or, um, the, the police, that sort of thing. So, so, the same things that we would do in person, we're going to do online.

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00:12:34.884 --> 00:12:35.183

So,

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00:12:35.183 --> 00:12:38.573

I would say that that goes back to this point of Tele,

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00:12:38.573 --> 00:12:42.384

counseling is actually very appropriate for the majority of clients,

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00:12:42.744 --> 00:12:45.024

except for those who need a higher level of care,

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00:12:45.024 --> 00:12:50.214

such as inpatient evaluation or perhaps something like a,

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00:12:50.693 --> 00:12:52.104

a partial hospitalization,

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00:12:52.134 --> 00:12:53.214

something like that.

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00:12:53.573 --> 00:12:56.333

But when we have a client who does happen,

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00:12:56.333 --> 00:12:56.693

so we,

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00:12:56.693 --> 00:12:56.964

you know,

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00:12:56.964 --> 00:12:58.764

we wouldn't want to roll out clients who are,

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00:12:58.793 --> 00:13:07.553

who have significant depression just because they might potentially become suicidal because we'd be able to follow the same protocol as we would if we were seeing them in person,

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00:13:08.063 --> 00:13:09.234

so I think that's a,

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00:13:09.354 --> 00:13:10.374

a distinction we,

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00:13:10.374 --> 00:13:10.854

you know,

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00:13:10.854 --> 00:13:11.124

Tele,

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00:13:11.124 --> 00:13:15.083

counseling is appropriate for individuals who have the potential for crisis,

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00:13:15.114 --> 00:13:19.974

but just not great when they're actively in crisis because they need that higher level of care.

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00:13:20.634 --> 00:13:34.073

So, like, I said, a lot of research out there to support the usefulness and the effectiveness of Tele, counseling, and I can come, I'll go back to that slide here because it does feel relevant. Right now to just talk about that.

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00:13:34.073 --> 00:13:37.913

It's, it's pretty much useful for the majority of clients. Right?

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00:13:37.913 --> 00:13:40.524

If they have access to the technology,

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00:13:40.524 --> 00:13:43.254

a safe place to engage in therapy,

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00:13:43.254 --> 00:13:47.543

where they won't be overheard by significant stakeholders in their lives,

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00:13:48.293 --> 00:13:53.604

then there is a lot of information and we continue to see additional research that says,

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00:13:54.234 --> 00:13:54.894

that Tele,

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00:13:54.894 --> 00:13:55.913

counseling is effective,

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00:13:55.943 --> 00:14:04.403

there's no significant difference between the effectiveness of telehealth and in person services as long as that as long as that individual is appropriate for services,

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00:14:05.183 --> 00:14:09.144

which is gauge not only by their presenting concern,

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00:14:09.714 --> 00:14:11.844

their lack of active crisis.

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00:14:12.024 --> 00:14:19.163

But also, by their willingness to engage in Tele, counseling, not everybody wants to do it and not everybody has the.

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00:14:19.318 --> 00:14:33.028

Injury of a safe, quiet place and the technology to use for Tele counseling. So it certainly is not appropriate for everybody but it is not limited based on a 1 specific diagnosis. Um.

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00:14:33.533 --> 00:14:44.903

I guess I'm thinking about some, an individual who is actively psychotic individuals might say, like, why can't I can't do Tele, counseling with them. They, they, their needs are too great.

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00:14:44.933 --> 00:14:55.403

And, um, if we kind of mull over that idea in my head, um, when individuals are actively psychotic, I believe that they are less likely to come into a clinic.

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00:14:55.433 --> 00:15:04.614

They are probably less comfortable in person with a therapist, and they have a greater amount of control if I am, um, you know, accessing them through technology.

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00:15:04.854 --> 00:15:18.624

Um, Additionally, if they were in my office, it probably would be just as difficult in order to kind of connect with them. Because individuals who are actively psychotic often, have fleeting ideas are often, not really present in the here.

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00:15:18.624 --> 00:15:32.094

And now and so, um, I, I don't know that being in person would make it any easier to connect with that individual. Right? So, there are benefits of Tele, counseling, and it's our responsibility to use our professional knowledge.

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00:15:32.124 --> 00:15:39.894

And also our individual assessment skills with each unique individual to determine if they're appropriate for our services.

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00:15:40.673 --> 00:15:54.264

So, coming back to this previous slide, additional benefits of Tele, counseling is the accessibility, the individual does not need to drive into session related to that. We don't need to do a whole lot of preparation.

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00:15:54.264 --> 00:16:05.903

So, if I need you to drive to a counseling appointment, I probably need at least a half hour, um, you know, kind of cushion built in before and after so that I'm able to drive myself there park, walk in, you know, that sort of thing.

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00:16:06.173 --> 00:16:20.364

Um, and so it really, um, decreases the, the burden on an individual. Additionally, when I don't have to actually physically go somewhere, that reduces my, um, my exposure individuals aren't going to see me going to counseling.

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00:16:20.573 --> 00:16:32.303

Not that go into counseling is a bad thing at all. But we know that there's still stigma in the, in the United States across the globe related to mental health. However.

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00:16:32.609 --> 00:16:47.514

That is another silver lining of cobit is that mental health has become a forefront issue um, in terms of the way that we view it the way that we acknowledge it. It seems as though, I can only speak for American society because that's where I'm situated.

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00:16:47.693 --> 00:16:57.173

Um, but certainly it doesn't go a day that I don't that I watch the news at 6 o'clock and at least once mental health is brought up and that's a new thing right?

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00:16:57.203 --> 00:16:57.504

Um,

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00:16:57.714 --> 00:16:58.073

I think,

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00:16:58.073 --> 00:17:02.543

because we have gone through such a traumatic experience,

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00:17:02.813 --> 00:17:03.053

um,

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00:17:03.053 --> 00:17:04.044

in the United States,

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00:17:04.044 --> 00:17:05.874

and across the globe with Kobe 19,

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00:17:05.993 --> 00:17:06.534

and also,

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00:17:06.534 --> 00:17:11.423

we just happened to be right at that intersection where people were starting to believe that mental health is real,

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00:17:11.423 --> 00:17:11.634

you know,

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00:17:11.634 --> 00:17:12.653

just in general,

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00:17:12.804 --> 00:17:14.544

and then compounded with the fact that I,

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00:17:14.693 --> 00:17:18.894

I think each and every 1 of us experienced some sort of a mental health consequence,

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00:17:19.104 --> 00:17:19.403

um,

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00:17:19.433 --> 00:17:21.173

related to cobit 19,

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00:17:21.173 --> 00:17:22.884

it would almost be impossible.

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00:17:22.884 --> 00:17:32.933

If somebody did not, um, it was like, that perfect intersection where people really started to believe, like, oh, mental health is real and it doesn't mean that there's something wrong with you or that you're weak.

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00:17:33.294 --> 00:17:44.784

It just means that, you know, life is a very stressful and difficult thing, and the psychology, and the, the human experience is incredibly complicated and challenging. And so we know that therapy is effective.

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00:17:45.023 --> 00:17:48.413

And there's a lot that we can do with Tele, counseling.

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00:17:48.689 --> 00:17:52.378

In order to address those needs, um.

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00:17:52.378 --> 00:18:05.723

And so also 1 additional benefit, and it also can be an ethical risk is that I see my clients backgrounds, I see what's going on in their personal lives right? Sometimes a child will pop into session. Right?

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00:18:05.723 --> 00:18:18.713

And so I have to be careful that we're not talking about anything that is inappropriate for this youth to hear. I really we have a lot of, um, ethical responsibility to ensure that our clients are in a private uncomfortable space.

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00:18:18.983 --> 00:18:27.203

Um, and so being able to see clients, personal lives is such a huge benefit and it's also a huge ethical responsibility for us.

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00:18:27.473 --> 00:18:34.193

Um, I had a client who was 19, and their dad would pop into session sometimes.

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00:18:34.193 --> 00:18:42.503

And it was always an excellent opportunity to engage and connect with this key stakeholder in that individual's life.

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00:18:42.534 --> 00:18:43.104

And so,

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00:18:43.104 --> 00:18:43.463

you know,

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00:18:43.463 --> 00:18:47.784

if that individual 19 years old was coming to see me at the office,

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00:18:47.784 --> 00:18:50.933

there's no way dad would have that opportunity just pop in and say,

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00:18:51.144 --> 00:18:54.413

I love you and what can I do to help,

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00:18:54.473 --> 00:18:55.134

you know so,

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00:18:55.134 --> 00:19:01.163

it it can be really touching to be able to access a client's personal lives and see those dynamics.

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00:19:01.163 --> 00:19:08.364

And again we have this responsibility that if we are in most sessions, we are talking about private things. I need to.

198

00:19:08.729 --> 00:19:18.713

To remind this client, like, hey, I know your dad pops in sometimes. Where's he at? Or is it private? Are you sure nobody's listening? Right? That's our ethical responsibility.

199

00:19:18.953 --> 00:19:32.663

Um, I am very flexible with my clients, you know, we, um, we tried to make sure that we get them into the safe as quiet as space, but they're gonna have interruptions. Like I said, their kid's gonna bust in the door.

200

00:19:32.663 --> 00:19:47.334

Their dog is gonna bust in the door, but it's our responsibility as the professionals to ensure that interruptions are not on account of our end of things. Right? So, we need to have the door closed in our professional office. Perhaps the sound machine at the door.

201

00:19:47.334 --> 00:19:55.374

So anybody else who lives with us? Um, if we're providing Tele, counseling from our home office is not privy to any client information.

202

00:19:55.374 --> 00:20:00.173

So that's a huge ethical imperative for us just as it would be,

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00:20:00.173 --> 00:20:00.413

you know,

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00:20:00.413 --> 00:20:03.894

that is 1 additional consideration that when we're at an office,

205

00:20:03.894 --> 00:20:05.634

we don't have to worry about those things,

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00:20:05.634 --> 00:20:12.653

because it's all professionals and we all know to how to maintain confidentiality and privacy in our individual office spaces,

207

00:20:12.653 --> 00:20:13.884

so just,

208

00:20:13.884 --> 00:20:14.093

you know,

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00:20:14.093 --> 00:20:19.854

kind of translating those things that occur in the face to face accounting realm into this Tele,

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00:20:19.854 --> 00:20:20.693

counseling realm.

211

00:20:20.909 --> 00:20:33.354

So, as I said, Tele, counseling has been found to be effective with various populations, and we can't really pinpoint a specific diagnosis, or presenting concern that is not effective for Tele, counseling.

212

00:20:33.384 --> 00:20:48.023

We can just kind of say, it's not effective for individuals who don't have a safe place, you know, if an individual is involved in an abusive relationship, and they can only access counseling in the house where the partner could here, that's not going to be safe.

213

00:20:48.084 --> 00:20:48.564

Right?

214

00:20:48.594 --> 00:20:48.983

Um,

215

00:20:49.013 --> 00:21:03.203

and so we're gonna have to explore other options for that individual again there 1 thing that came up during specifically is individuals accessing services from their cars because the car is a private place,

216

00:21:03.203 --> 00:21:04.344

where nobody can hear you,

217

00:21:04.943 --> 00:21:05.723

but that can,

218

00:21:05.784 --> 00:21:07.554

that can come with some dangers as well,

219

00:21:07.554 --> 00:21:11.963

where is that car parked and are you in a safe area?

220

00:21:11.963 --> 00:21:22.163

So so, I think that again, we want to be as flexible as possible with clients, but we have to ensure that under no circumstances. Are they in a public place like mcdonald's where others could hear them?

221

00:21:22.193 --> 00:21:35.753

Even if they say they don't care, that is not ethically okay for us to say, okay, you know, we, it is our ethical responsibility to say you've got to be somewhere private. Nobody is able to hear our conversation.

222

00:21:35.753 --> 00:21:46.854

That's very important to the process. And also to protect you, because you might not care right now, but we don't know who is there and who could hear this information and how they might use it. So that's that's a no, no.

223

00:21:47.094 --> 00:22:01.794

And also, if they're going to be in their vehicle to make sure that they're in a safe spot, and also safe in that vehicle, because sometimes cars get hot. You know, so I, as much as possible, I tried to say, no, we can't do a session in a car.

224

00:22:01.973 --> 00:22:08.933

Um, especially now that things are opening back up I would say that's a prime candidate for a referral for in person services. Right.

225

00:22:08.963 --> 00:22:20.453

Um, and then if barriers block them, then we have to use our best ethical judgment to say, how am I best going to be able to serve this individual they're not able to access in person services and so.

226

00:22:20.759 --> 00:22:32.788

Where is that compromise? And how do I ensure that I'm balancing this ethical imperative to provide them with the services they need with our ethical imperative to ensure that clients are in a safe private location.

227

00:22:35.574 --> 00:22:45.624

Okay, so just a little bit more research saying that elemental health appears to be comparable. Um, the North Carolina board uh, even before had a statement.

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00:22:45.624 --> 00:22:58.733

That said that they don't view Tele, counseling as any different than in person counseling and every ethical re and legal responsibility as well as every privilege like privileged communication is able to, uh.

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00:22:59.159 --> 00:23:03.023

Is able to address, um, use Tele counseling.

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00:23:03.743 --> 00:23:17.064

So, I had another comment that said I've had to close out sessions when parents were trying to make another child, um, to take another child to work or meeting yes if individuals log in and they're in an unsafe place. Like, I, you know, um.

231

00:23:17.548 --> 00:23:30.298

mcdonald's the waiting room, we just have to ensure that that individual is safe. Right? Like, are you actively in crisis? If not? We need to schedule another appointment where you can be private.

232

00:23:32.308 --> 00:23:42.719

Okay, so although it's more confidential in 1 way, because I don't have to go to an actual session. Um.

233

00:23:42.719 --> 00:23:55.314

I also risk confidentiality due to technology, and that's where HIPPA comes in and our responsibility to know technology and to kind of be the experts. And so that is your ethical responsibility.

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00:23:55.314 --> 00:24:05.304

If you're going to do Tele, counseling, you really have to be an expert in in the technology. So we're going to talk about that today. Um, there was a question. What are their challenges arrive from?

235

00:24:05.304 --> 00:24:15.384

Tell accounts, counseling appointments how can you guarantee that the client is being totally open? Well, you know, we've got, we will continue to go through the risks here.

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00:24:15.683 --> 00:24:22.673

Challenges that arise and really I think that the largest challenge is, um, having a preemptive safety plan.

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00:24:22.703 --> 00:24:35.963

So whereas within person clients, we might wait until there's a crisis or indication of some sort of suicidal homicidal ideation until we create a safety plan. And the safety plan is not a safety contract.

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00:24:35.993 --> 00:24:45.953

I don't suggest using safety contracts, because that's a contract that says I promise not to kill myself. Right? And then I sign, but if I am dead, that signature doesn't mean much.

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00:24:45.953 --> 00:24:55.104

Right, and what it shows is that the clinician knew that this person was in danger and the only action they took was to have them sign this piece of paper. So that's not good.

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00:24:55.104 --> 00:25:08.423

We don't use contracts anymore, but safety plans we do use, which means this is how I know I'm in crisis. These are some indicators. This is my 1st resource. My contact person. This is my 2nd resource mobile crisis.

241

00:25:08.423 --> 00:25:22.223

This is my 3rd resource, the 911. so, it lists out the resources. If I am starting to feel this way, here are my coping skills and so it is it's a safety plan. That helps an individual.

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00:25:22.223 --> 00:25:24.173

No, these are the next steps.

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00:25:24.173 --> 00:25:29.874

This is my emergency contact person and so I think that that is not necessarily a challenge,

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00:25:29.874 --> 00:25:36.443

but it's definitely a shift from the way that we might do in person counseling is we would only create a safety plan of that individ,

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00:25:36.443 --> 00:25:40.463

individual indicated some sort of safety concern but in Tele,

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00:25:40.463 --> 00:25:40.614

counseling,

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00:25:40.614 --> 00:25:42.144

I suggest doing a safety.

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00:25:42.719 --> 00:25:47.189

In session 1, with every client related to that, um.

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00:25:47.483 --> 00:25:56.784

In simple practice is the, the software that I use, there's a place for an individual to enter their emergency contact information. Right?

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00:25:56.814 --> 00:26:06.894

But it occurred to me 1 time when I was needing to contact an emergency contact is I didn't actually have the clients written permission to contact that person. They provided me with their information.

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00:26:06.894 --> 00:26:20.784

And so what I added into my professional disclosure statement is, I give you consent to contact my emergency contact if I were to become an immediate danger to myself or others. So, that way, that's just something to think of.

252

00:26:20.784 --> 00:26:32.243

And it kind of made me feel like dizzy thinking about it because I'm like, for years I've been gathering emergency contact information, but I never, actually had express written permission to use it. So that's a side note here.

253

00:26:32.243 --> 00:26:43.223

But that's 1 challenge I would say is that I would say we need to have a safety plan in place with every single client from day 1, because with them, not being physically.

254

00:26:43.558 --> 00:26:56.338

In with us, if they were to log out, we need to have that contact information. Um, where are they located? So, that's the 2nd part is we verify a client's location at the start of every single session.

255

00:26:56.723 --> 00:27:10.614

So that is that's different when we're in person, we know where they're at. Right? And if they leave, we can probably tell the authorities, like, what vehicle they were in their home address. Right? But when we're doing Tele, counseling, we have to verify what current location they're at.

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00:27:10.644 --> 00:27:24.534

And who is that emergency contact that we're going to locate? Because, in person, it is a little bit harder for them to get away from us before, at least giving us a, a, an emergency contact information. So that's that's the difference.

257

00:27:24.564 --> 00:27:35.094

You know, that we have to do when we are doing counseling. Now, the 2nd, part of the question was, how can you guarantee that the client's being totally open? Well, we can never guarantee that.

258

00:27:35.634 --> 00:27:48.534

And so we, we do our best to build that therapeutic relationship. But we can't guarantee that they're and we're not detectives right? So part of our job is to hear the client story and validate it from their point of view.

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00:27:48.534 --> 00:28:03.173

So, but we can certainly create that therapeutic relationship that safety the same way that we would in person write your body language. You can see me, you can see that. I'm paying attention to you. You can see that. I'm leaned in and carrying, you know, I'm not out here.

260

00:28:03.354 --> 00:28:16.584

I'm not on my phone. I'm not looking up. Right I'm using the same skills aside from, like, my, my body posture and that, but I have this open posture. We build the relationship in the very same way, right?

261

00:28:16.584 --> 00:28:29.213

By validating the client by using intentional and appropriate self disclosure. Um, and so so that's the thing is, we can never guarantee the client is being totally honest, but that's also we're not detectives.

262

00:28:29.213 --> 00:28:39.983

So, we are certainly going to do our best to understand things from the client's perspectives and build that strong therapeutic relationship.

263

00:28:41.933 --> 00:28:55.193

Although it is convenient, although Tele, counseling is convenient. It can take away from the ability to observe and monitor behaviors and actions that don't line up with what the client is saying. Gotcha. Um, so, yes, I think it's a double edged sword on 1 hand.

264

00:28:55.193 --> 00:28:58.074

We don't have the full body language.

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00:28:58.074 --> 00:28:58.644

Right,

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00:28:58.673 --> 00:29:00.473

but in another way,

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00:29:00.473 --> 00:29:02.963

if the individual says that they're doing X,

268

00:29:02.963 --> 00:29:03.114

Y,

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00:29:03.114 --> 00:29:03.443

and Z,

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00:29:03.443 --> 00:29:07.104

we can actually kind of physically see their home and see if they are actually doing those things,

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00:29:07.104 --> 00:29:11.753

see them interaction with their significant other or their parents you know so so,

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00:29:11.753 --> 00:29:12.683

yes um,

273

00:29:12.834 --> 00:29:15.054

we can't see the physical body language,

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00:29:15.054 --> 00:29:16.253

but we can see the face.

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00:29:16.284 --> 00:29:29.453

So, I even kind of contemplated would I rather be in in session with a client with a masculine, or would I rather be Tele, counseling with no mask? And I would say that more so than the body language, I need to see their face their mouth. You know.

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00:29:29.453 --> 00:29:40.943

So, so it is convenient. But we also are able to see a good portion of their nonverbal aside from their lower half, their, their physical body movements.

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00:29:41.153 --> 00:29:45.203

But we can, so, yeah, we can't see a foot shaking right that sort of thing.

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00:29:46.074 --> 00:29:59.243

But we can definitely, um, we can definitely see their emotions on their face and see if those are matching up with what they're telling us, you know, there's no way for us to monitor if they actually leave session and do what they say they're doing.

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00:29:59.243 --> 00:30:03.804

But Tele, counseling actually gives you a somewhat better view into, um.

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00:30:04.108 --> 00:30:11.189

That that a full picture in in a lot of ways. Um, yeah, so we do have to.

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00:30:11.189 --> 00:30:15.808

Have a level of trust in relationship with our clients. Yep. Um.

282

00:30:16.463 --> 00:30:30.864

Okay, so, um, Here's another question it's Friday if the client. Oh, no. Okay. So if the client is in danger to sell for others, we don't need a release to reach out to their emergency contact. No, we do not. That is absolutely correct.

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00:30:30.894 --> 00:30:32.933

We say in our professional disclosure,

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00:30:33.413 --> 00:30:37.104

that the only time our confidentiality is broken is in,

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00:30:37.134 --> 00:30:37.523

you know,

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00:30:37.523 --> 00:30:44.604

in terms of if the individual's in immediate danger to sell for others if the abuse or neglect of child,

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00:30:44.634 --> 00:30:45.354

elderly,

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00:30:45.384 --> 00:30:50.153

somebody with intellectual disability or who's otherwise unable to care for themselves,

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00:30:50.634 --> 00:30:52.433

or in a court order,

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00:30:52.433 --> 00:30:53.513

signed by a judge.

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00:30:53.544 --> 00:31:08.304

So you are absolutely correct that we have in our professional disclosure statement that if those 3 things no, no, no you didn't. Misunderstand that. Those 3 things. We can breach confidentiality. But do we ever say in what way?

292

00:31:08.334 --> 00:31:18.473

We don't and you we don't have to say, in what way because it's always gonna be like, the whatever is working is most relevant. Like, it might be mobile crisis. It might be calling the police.

293

00:31:18.683 --> 00:31:32.634

It might be calling that emergency contact um, but I did add that extra layer of protection specifically, um, contacting your emergency contact right? Because they did provide it to us. So it indicates that that is who they would want us to contact.

294

00:31:32.634 --> 00:31:37.253

1st, but what if they say, you know, actually, I would have preferred that you kept it private and called the police.

295

00:31:37.584 --> 00:31:51.473

Right. Or called mobile crisis I didn't want you calling my mom and bringing her into this. And so that's why I added just that extra layer of protection. You're not doing anything wrong by reaching confidentiality when we meet any of those 3 standards.

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00:31:51.653 --> 00:32:03.804

Um, but I just kind of added that extra layer of, like, oh, do you want me to call your emergency contact? Like, I've got it on the safety plan. I've got it in my my form from you but how do you know?

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00:32:03.894 --> 00:32:14.544

I just wanted that express permission that once we are in that situation, that cause I don't have to call emergency contact, I could go straight to the authorities and that might be preferred preferable for some people.

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00:32:14.544 --> 00:32:29.183

So, that's just a side note, just something to think about, um, it's always best to have as much consent as possible. Um, and then another quick point is that 3rd point of a court order signed by a judge that is not a subpoena from an attorney.

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00:32:29.183 --> 00:32:41.693

So, a subpoena is a request from an attorney so I think that those terms are used interchangeably often and that is not completely accurate. It has to be a court order signed by a judge.

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00:32:41.723 --> 00:32:50.693

So, that would be something that, in, through some proceedings, a, an actual judge, not an attorney has or not an attorney not a lawyer.

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00:32:50.999 --> 00:32:56.124

The judge has decided that they are summoning our records and then at that time,

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00:32:56.124 --> 00:33:01.104

I would say we should secure legal counsel and we are still,

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00:33:01.134 --> 00:33:01.763

um,

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00:33:01.794 --> 00:33:11.064

under privileged communication to the extent that we would only need to diverge what is relevant and requested specifically by the judge so we don't just have to hand over our whole file.

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00:33:11.273 --> 00:33:16.703

Um, we might be able to write a summary letter of how many times the client has seen us. And how many um, you know, what.

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00:33:17.034 --> 00:33:31.584

General areas we've worked on what diagnosis has been issued that sort of thing. So that's just a quick note that applies to all legal and ethical concerns. Whether we're doing Tele, counseling, or in person counseling is that it's not a subpoena. We don't have to respond to subpoenas.

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00:33:31.584 --> 00:33:37.104

We must respond to a court order signed by a judge and before you do. So, I recognize I recommend that. You, um.

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00:33:37.409 --> 00:33:41.249

Obtain legal council. Okay.

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00:33:44.273 --> 00:33:59.034

So here are primary resources for us as counselors we would use the ACA, code of ethics and the NBC policy for the provision of distance, professional services. Um, and so these are the 2 that you should use the 2 resources you should use.

310

00:33:59.423 --> 00:34:00.233

Um,

311

00:34:00.413 --> 00:34:04.374

and I will send out this PDF when I,

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00:34:04.374 --> 00:34:04.614

um,

313

00:34:04.614 --> 00:34:09.173

send out the information and so you'll have those links and then also,

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00:34:09.443 --> 00:34:09.773

um,

315

00:34:09.804 --> 00:34:11.454

we do have the regional Tele,

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00:34:11.454 --> 00:34:16.074

counseling initiative on our Pembroke counseling Department website.

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00:34:16.074 --> 00:34:30.353

And it also includes those links as well as a sample study plan. Um, and I can send the, I believe I have the link in here and if not at the end, I will, um, stop sharing. And I'll get that link in post pasted in the chat for you as well. Okay.

318

00:34:30.353 --> 00:34:41.664

So, states that Tele, counseling provides unique or presents unique ethical concerns. What? We just talked about, um, you know, technology continues to advance what we can do as professionals.

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00:34:41.873 --> 00:34:45.893

Um, and also we are going to.

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00:34:46.494 --> 00:34:56.784

Really kind of hone in, on that idea the telecom. So he doesn't just happen via video. It's everything aside from scheduling and logistical information that occurs via telephone email, chat video.

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00:34:56.813 --> 00:35:10.914

So, that in itself, I think is a really important eye opening thing that a lot of individuals didn't recognize before Co bed. Um, but we are under, you know, bound by HIPPA when we're using any form of technology to do anything other than logistics with our clients.

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00:35:10.943 --> 00:35:14.514

And records of that should be kept in the client's permanent file.

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00:35:15.983 --> 00:35:28.134

Um, it's also important to back up our data, you know so, when I say permanent file, where is that file cap if it's cloud based, do we make backups of it? Um, if it is paper based, are we making, you know, backups of that?

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00:35:28.134 --> 00:35:35.844

So, um, just remembering that we need to keep access to our data for 7 years, is what? Um.

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00:35:36.623 --> 00:35:47.994

Recommends when talking about your so we talked about insurance 3rd party payers and having to check with them if they will reimburse Tele, counseling services.

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00:35:47.994 --> 00:35:53.994

But another thing that we really need to do is to determine whether we are going to, um.

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00:35:54.893 --> 00:36:07.103

Where we are insurance, our malpractice insurance is covered by, uh, Telecom for Tele, counseling for the most part. Yes, it is. They, you know, see it as the same thing as providing in person treatment.

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00:36:07.103 --> 00:36:14.994

But I really do recommend that you contact your insurance provider to ensure that your malpractice insurance covers your Tele, counseling practice.

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00:36:17.574 --> 00:36:32.364

So ACA says the counselors to engage in Tele, counseling must understand the laws and regulations of both, um, my location where I'm practicing from, and the client's place of residence. So this is a, uh, a big issue that has become very relevant lately.

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00:36:32.393 --> 00:36:39.983

And I think it's highlighted by that counseling compact, um, that we have seen coming through in, which will still be, um.

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00:36:41.693 --> 00:36:53.634

Oh, um, governed by the state in, which we hold a professional counseling license, but through that compact, um, there's currently 10 states North Carolina is working to become a part of this compact.

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00:36:53.664 --> 00:37:04.853

We would be able to register and practice in those other states. That are part of the, um, of the compact. And then what would essentially happen is they would report back to our board.

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00:37:05.034 --> 00:37:09.384

Um, if there are any sort of concerns, and then our board would take care of it.

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00:37:09.384 --> 00:37:10.733

Because the problem was,

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00:37:10.943 --> 00:37:11.333

um,

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00:37:11.364 --> 00:37:12.893

if I'm practicing Tele counseling,

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00:37:12.923 --> 00:37:14.994

I'm located in the state of North Carolina,

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00:37:14.994 --> 00:37:17.994

but my client's located in the state of California when,

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00:37:18.023 --> 00:37:20.333

and if an ethical concern comes up,

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00:37:20.364 --> 00:37:25.434

which board is going to take care of it because the board in California is going to say,

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00:37:25.434 --> 00:37:25.764

well,

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00:37:25.793 --> 00:37:28.793

they're not licensed with me and the boarding Carolina is going to say,

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00:37:28.793 --> 00:37:28.914

well,

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00:37:28.914 --> 00:37:30.534

they weren't practicing in Carolina,

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00:37:30.713 --> 00:37:31.043

right?

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00:37:31.043 --> 00:37:43.884

So, there was a very dangerous place for clients to be in where that and that is you're practicing outside of your jurisdiction. If you are not practicing, where both you and the client are residing.

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00:37:43.914 --> 00:37:57.384

So, what you actually need to do as a professional is the easiest thing to do is, I'm, I'm practicing in the state of North Carolina with clients who are located in the state of North Carolina. Right? That's the simplest way to put it.

348

00:37:57.414 --> 00:38:02.244

Um, but we certainly have those times went with Tele, counseling, especially, um.

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00:38:03.324 --> 00:38:17.454

Clients might be in a different state, like, say that they got sent home from college, and they, their families in Ohio, but they were attending, um, counseling, or they were attending school down in Carolina. Um, so now they're my client, but they're up in Ohio.

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00:38:17.454 --> 00:38:28.614

Am I still able to see them and you have to go you have to look at the board's rules for North Carolina and North Carolina says that counseling occurs both where the client is located and where the counselor is located.

351

00:38:28.733 --> 00:38:40.583

And I'm only licensed in in North Carolina, and since the client is located in Ohio, I'm no longer able to to serve that individual. It gets even stickier. If that individual just went home for the holidays. Right?

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00:38:40.583 --> 00:38:45.023

And they want to have a session while they're in Ohio and that actually is,

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00:38:45.054 --> 00:38:45.414

I think,

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00:38:45.414 --> 00:38:48.353

where a lot of professionals really dug into the Tele counseling,

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00:38:48.353 --> 00:38:48.744

just,

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00:38:48.773 --> 00:38:49.313

um,

357

00:38:49.344 --> 00:38:50.393

Pre coven is,

358

00:38:50.393 --> 00:38:50.574

like,

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00:38:50.574 --> 00:38:56.304

I see my client once a week in person when they travel for business or pleasure I like to do a Tele,

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00:38:56.304 --> 00:38:59.213

counseling session with them just so that we don't lose our progress.

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00:38:59.333 --> 00:39:09.114

However, it does make the question of, you know, where the client is located. What does that mean their permanent address? Or does it mean where they're at physically? During that actual session.

362

00:39:09.684 --> 00:39:22.014

And so, I believe that was kind of the impetus for this, this counseling, um, compact because you could, you know, the board only says where the client is located. They don't offer a definition of what that actually means.

363

00:39:22.014 --> 00:39:36.985

And so, um, we, as professionals found ourselves in kind of alert, you know, not knowing exactly how to handle that. What? I think a lot of professionals see, as 1 of the most beneficial things of Tele, counseling is that maintenance between sessions when somebody does go out of town.

364

00:39:37.224 --> 00:39:47.304

Um, and, you know, same for us as professionals. If I am on a business trip to Ohio, am I still able to cancel my Tele, counseling clients? Where does that mean?

365

00:39:47.335 --> 00:39:52.525

I'm located in Ohio physically, or it doesn't mean my practices in Ohio.

366

00:39:52.554 --> 00:40:02.724

Um, so it's, it's a, it's a difficult thing that I really don't have an answer to but jurisdiction is a huge consideration that we must make for Tele, counseling.

367

00:40:02.934 --> 00:40:13.014

And, like I said, I believe that the, the easiest way to do it is to be strict about, you know, I'm located in North Carolina you're located in North Carolina, that's your permanent address.

368

00:40:13.045 --> 00:40:18.445

And so, um, so I'm able to council you using my North Carolina license.

369

00:40:19.949 --> 00:40:33.840

Here's what, um, the Carolina board says, it has no separate view per se with regard to the provision of services. Um, as long as we are operating within the, the limits of our license and, um.

370

00:40:34.224 --> 00:40:48.594

And getting supervision as necessary so that's that's what they would say for us. And again, it's just to highlight. Well, I haven't highlighted this. You're practicing under whatever license you use in order to offer face to face services.

371

00:40:48.625 --> 00:40:55.224

So you can't offer Tele, counseling without that license. That would allow you to offer in person counseling services as well.

372

00:40:55.530 --> 00:40:59.670

All right, so we talked about, um.

373

00:41:00.085 --> 00:41:15.054

Jurisdiction and, um, therapy happens where the client is located. Um, and the definition of that is, um, a little bit sticky. So, my recommendation is to follow both where the person's permanent residences as well as where they, at a time of service.

374

00:41:15.269 --> 00:41:27.030

Okay, so this is just a slide about the counseling compact and you can Google it and look for more it's across the nation in North Carolina is working to join it.

375

00:41:27.030 --> 00:41:40.320

So, the ACA, code of ethics also says that counselors take reasonable for precautions to ensure confidentiality of information transmitted through any electronic means.

376

00:41:41.369 --> 00:41:53.849

So, we are bound by HIPPA specifically. Our protected health information is what we need to protect. Right? So that would be our case notes client, identifying information. Um, the standard.

377

00:41:53.965 --> 00:42:08.514

Encryption is 256 bit encryption and that doesn't necessarily mean a lot on its own. Um, however, as we continue to go deeper into this idea of encryption, just know that HIPPA compliant encryption level is 256 bit.

378

00:42:08.514 --> 00:42:16.824

And that's something that you could ask your tech people, or, um, the person who runs whatever platform you are using for your email.

379

00:42:16.824 --> 00:42:29.875

Um, and so what encryption means is that when data is transferred from 1 place to another via email via chat, um, in a live video session, that is encrypted in its pathway.

380

00:42:29.875 --> 00:42:43.224

So, when it when that information is transmitted from from 1 individual to the next, that is scrambled in between so that if it were to be intercepted, it would be unusable or unreadable.

381

00:42:43.224 --> 00:42:50.335

And it is only unscrambled. Once it successfully reaches its destination. So, we are responsible for using encrypted.

382

00:42:56.010 --> 00:43:10.344

Communication and that would mean a HIPPA compliant, uh, video platform system HIPPA, compliant electronic health record system HIPPA, compliant email and also text messages are not HIPPA compliant.

383

00:43:10.375 --> 00:43:23.244

Your telephone is HIPPA compliant so an actual phone call? Yes, that is HIPPA compliant. Those that is already taken care of, um, through the it's called a conduit. Um.

384

00:43:23.784 --> 00:43:34.974

Exception in which, um, the cable providers, so, like, um, individuals who Pro so, spectrum provides my Internet. They are the conduit exception.

385

00:43:35.005 --> 00:43:49.585

They are, um, automatically allowed or, you know, kind of approved through, um, through HIPPA. So, uh, that would be the person who provide your cable. The person who provide your phone service, 80 T or that sort of thing.

386

00:43:49.585 --> 00:43:57.864

Of course, they do have access to that information. Um, but they are part of the conduit exception. So, what we really need to look at are, um.

387

00:43:58.315 --> 00:44:00.054

Are the emails the,

388

00:44:00.085 --> 00:44:01.644

the video platform,

389

00:44:01.644 --> 00:44:15.894

the electronic health record platform and also I'll take a side note to just reiterate that text messages are not HIPPA compliant phone calls are but text messages are not because they are not encrypted as they're translated from cell phone to cell phone,

390

00:44:16.105 --> 00:44:19.434

and so what you can do is you can download a HIPPA,

391

00:44:19.465 --> 00:44:20.454

compliant,

392

00:44:20.485 --> 00:44:20.815

um,

393

00:44:20.844 --> 00:44:21.804

texting service.

394

00:44:21.804 --> 00:44:35.994

I think 1 is called spruce some of them you need to pay for. But my general suggestion would be no text messages. Um, and that's what I stick to as well email, telephone call. Those are HIPPA compliant, but we also need to look at is your landline.

395

00:44:36.715 --> 00:44:46.344

Is is HIPPA compliant as long as it's a true landline if it's digital. So, like, even if you have a house phone, if it's digital and not a true landline, then that's not HIPPA compliance.

396

00:44:46.344 --> 00:44:52.375

So you have to make sure that your landline is, in fact, a traditional landline and not a digital landline.

397

00:44:54.385 --> 00:45:06.864

Okay, I see a question here are there any suggestions for HIPPA compliance telehealth platforms for videos and others um, cost effective and not technically overwhelming. My favorite is dot me. It's what I use.

398

00:45:06.894 --> 00:45:19.914

So, um, simple practice is a really good, um, electronic health record system, and they, um, offer for an additional fee. They offer a HIPPA, compliant video platform. Um, but the 1 that I use.

399

00:45:19.914 --> 00:45:34.735

That is free is don't me. It's very simple. You can't share your screen and you can't with the free version you can't share your screen and you can't add more than 1 call or at a time. Right? So, if I've got, um, client at NC state.

400

00:45:35.130 --> 00:45:49.284

Dad in Charlotte and me on the call as well I can't leave all 3 of us in right. But, um, the free version, you can pay a little bit for the upgraded version where you can loop in multiple people.

401

00:45:49.465 --> 00:46:03.985

Um, but the free version does give very high quality. Very good um, HIPPA, compliance services. So, the thing that you need to know about HIPPA is anything that's HIPPA compliant. We'll provide you with a business associate agreement.

402

00:46:04.045 --> 00:46:05.364

It's a BA,

403

00:46:05.695 --> 00:46:08.005

and for Darcy,

404

00:46:08.485 --> 00:46:09.655

you get a BA,

405

00:46:09.655 --> 00:46:11.844

you can download it once you download the software,

406

00:46:11.844 --> 00:46:12.655

create an account,

407

00:46:12.655 --> 00:46:14.934

there's a top left button where you can download your,

408

00:46:15.894 --> 00:46:16.344

um,

409

00:46:16.375 --> 00:46:17.425

any sort of like,

410

00:46:17.425 --> 00:46:19.824

simple practice or electronic health record system.

411

00:46:19.855 --> 00:46:29.005

They will provide you with a BA, um, if you download spruce or some sort of a HIPPA compliant texting, they will give you a BA.

412

00:46:29.005 --> 00:46:39.773

So that is what you're looking for, any sort of platform or process that you use to transmit any sort of protected health information. You need to have a BA.

413

00:46:41.905 --> 00:46:42.445

Okay,

414

00:46:43.614 --> 00:46:44.485

so,

415

00:46:44.514 --> 00:46:44.875

um,

416

00:46:44.875 --> 00:46:46.704

in terms of the computer that you use,

417

00:46:46.704 --> 00:46:47.454

you should have,

418

00:46:47.454 --> 00:46:47.784

um,

419

00:46:47.815 --> 00:46:51.144

a computer that is specifically for your Tele,

420

00:46:51.144 --> 00:46:52.554

counseling records,

421

00:46:52.764 --> 00:46:53.125

um,

422

00:46:53.184 --> 00:46:55.945

and use and at the very least it should be like,

423

00:46:55.945 --> 00:46:58.135

its own separate login that has a,

424

00:46:58.135 --> 00:46:58.675

um,

425

00:46:58.735 --> 00:47:00.894

a trusted and safe password,

426

00:47:01.195 --> 00:47:01.855

um,

427

00:47:02.215 --> 00:47:05.695

you can use a tablet you can use a cell phone,

428

00:47:05.934 --> 00:47:06.565

um.

429

00:47:07.079 --> 00:47:19.914

So, the iPhones are automatically encrypted and the recommendation is to use the 6 digit password over the 4 digit passwords. So, the 4 digit password on iPhones, those are not HIPPA compliant.

430

00:47:19.914 --> 00:47:33.925

If you do any sort of emailing or communication with your clients from your cell phone. You need to upgrade to that 6 digit password and you can do that in settings. Androids are not automatically HIPPA compliance.

431

00:47:33.925 --> 00:47:41.275

So you would need to, um, Google, how to encrypt your, uh, your mobile phone. If you're not an iPhone user.

432

00:47:41.579 --> 00:47:52.710

We just talked about the platform and getting a BAA again, your cell service provider, your Internet service provider they are exempt from HIPPA due to the conduit exception.

433

00:47:52.710 --> 00:48:06.594

Um, they are just conducting to transmitting the information from 1 point to another and so you don't need a BA from them you do need to be a, from whatever email you are using so regular free Gmail, not HIPPA compliant.

434

00:48:06.625 --> 00:48:09.625

Um, you can pay for a HIPPA compliant.

435

00:48:09.960 --> 00:48:13.710

Gmail account, and they will give you a BAA for that.

436

00:48:14.909 --> 00:48:18.090

Again, texting is not HIPPA compliant.

437

00:48:18.090 --> 00:48:22.800

But you can download some sort of a service that gives you a BA.

438

00:48:22.800 --> 00:48:35.760

So that you can use text messaging if you must but I don't really suggest it. Every text should then become part of the, the permanent client record. And so that can become cumbersome. I would just suggest sticking to email and phone.

439

00:48:35.760 --> 00:48:48.329

Hard mail definitely. Hippa compliance. So the good old U. S Postal service. Absolutely. Put a standpoint an envelope that is Hippo compliant. There. It is a federal offense to tamper with somebody else's mail.

440

00:48:49.494 --> 00:49:04.284

All right, and then any sort of storage that you're using. So again, if you're using an electronic health record system, make sure you got that BAA and if you're using hardware, like a JumpDrive or an external hard drive, make sure that it is, um, password protected.

441

00:49:06.715 --> 00:49:17.335

Any paper files, you need to have locked up and this just reminded me also that if you are accessing Internet from an Ethernet cord, that plugs into your computer, you're good to go.

442

00:49:17.514 --> 00:49:29.335

If you were accessing Internet from a router, which takes you plugged the Ethernet cord into the router and then the router beams it to WI. Fi, which is what the majority of us use that router needs to be password protected.

443

00:49:29.364 --> 00:49:44.155

And what that means is, when you log in, you're gonna have to have a password. It's not gonna be an open network. So you should never be canceling clients using an open network, and you should never be storing client files on or accessing a cloud based service.

444

00:49:44.514 --> 00:49:50.094

Using any sort of an open Internet network, it should always be, um.

445

00:49:50.369 --> 00:50:04.585

Password protected, and if you can't do that, then you should be using a VPN and a VPN is like a virtual private network. So it takes, um, any sort of open, uh, WI, fi network and it makes it private.

446

00:50:04.585 --> 00:50:07.014

So that the information again is encrypted.

447

00:50:08.909 --> 00:50:20.994

Yes, text for appointment. Notifications is fine. You don't need record of that. So, logistical stuff that has nothing to do with therapy. It's not a referral. It's not a work sheet. It's not a check in um, you're fine.

448

00:50:20.994 --> 00:50:24.864

You're exempt from HIPPA just for logistical issues.

449

00:50:27.235 --> 00:50:39.085

Okay, so we already talked about this 6 digit password. Encrypted landlines are secure. Um, your desktop should be password protected. Your hard drive should be encrypted and password protected.

450

00:50:39.085 --> 00:50:45.175

If you're using, um, an external hard drive or an, uh, 1 the on the computer hard drive.

451

00:50:47.519 --> 00:50:50.699

Business associate agreement.

452

00:50:50.699 --> 00:51:03.059

Conduit exception to the phone Internet provider is fine use the password protected router um, use a VPN. If you're on any sort of an unprotected on password, protected, wireless network.

453

00:51:05.010 --> 00:51:16.110

Um, fast food, I do have that on there, because perhaps somebody is in their vehicle in a safe mcdonald's parking lot. Um, a hotel is probably a.

454

00:51:16.110 --> 00:51:27.929

A time when you would be on an unprotected network, and you should be using a VPN, and you can get a VPN from your Internet provider. So, you know, contact spectrum and they can help you with the VPN or you can find 1 via Google.

455

00:51:27.929 --> 00:51:31.019

Okay.

456

00:51:31.019 --> 00:51:37.980

So, we've gone over these things that's just a little bit of additional information. Um.

457

00:51:37.980 --> 00:51:50.429

And we do, we have about 5 minutes left, so please continue to send questions to me. Um, you know, if you have any in these last few minutes, I think we've gone over I think, a good, um.

458

00:51:50.429 --> 00:52:00.900

Good amount of information today. So if when you are accepting payment, uh, you should use again a HIPPA compliant payment.

459

00:52:00.900 --> 00:52:11.755

Structure and so, um, Square online is, uh, is a free way to accept HIPPA, compliant, um, payment from individuals. They can do paper checks.

460

00:52:11.784 --> 00:52:18.594

They can sometimes pay through their E, um, the the electronic electronic health record. Um.

461

00:52:18.929 --> 00:52:22.469

Program, but also.

462

00:52:22.469 --> 00:52:34.344

You can, you can pay, um, for a HIPPA, compliant payment services, but Square is definitely HIPPA compliant. Now, what I will say is square will send you like that little card reader.

463

00:52:34.344 --> 00:52:47.215

It's like a a white square that you plug in and then you can swipe a card. That's not HIPPA compliant. You can upgrade and pay for, like a 50 dollar HIPPA compliance. Swiper. But if you're doing Tele counseling, you don't need the actual swiper.

464

00:52:47.215 --> 00:52:56.664

So, you just don't use that you just log in online, it's cloud based and you can send clients invoices through Square. It's a free account. So, that is what I recommend for that.

465

00:52:56.909 --> 00:53:01.710

Okay, okay so, um.

466

00:53:02.724 --> 00:53:16.914

Yes, no, that is a huge struggle. Michelle, and that's where I feel like, um, Tele, counseling is like, a little bit safer in that way because if we do Tele, counseling with anybody under the age of 18, we should have a 18, uh, you know, an adult present in the home.

467

00:53:16.914 --> 00:53:28.135

And that's something that we have to confirm every single time is who is in the home with you because we should not be doing Tele, counseling without, um, you know, for individuals under 18 without them in the home.

468

00:53:28.494 --> 00:53:33.474

And typically what I suggest, whether it's parents who are.

469

00:53:33.780 --> 00:53:48.414

If in the home with them, or whether it's in person, um, is that we reserve the last 10 minutes of session for a parent to come in and child to give them an update because that way it maintains the child's autonomy.

470

00:53:48.414 --> 00:54:01.014

They're able to tell their parents what they want them to know, and the parent is satisfied in kind of being involved. And I say the last 10 minutes, because that kind of keeps it, you know, limited. Whereas if we start the 10 minutes, um.

471

00:54:01.349 --> 00:54:16.045

Then, sometimes that can go over. So I suggest the last 10 minutes. So the parent can or the child can update the parent. And, um, yeah, I wouldn't. What I would do is, I would schedule a Tele, counselling session to bring mom and child together a parent and child together.

472

00:54:16.074 --> 00:54:29.695

Um, I wouldn't I wouldn't provide as much as possible. I wouldn't provide that information without telling the child. Um, unless there was something that the parent really needed to know. So that is that's a huge struggle. Yes.

473

00:54:29.724 --> 00:54:31.494

Gmail can be made HIPPA compliant.

474

00:54:32.755 --> 00:54:47.695

You just have to contact them, and it would be a paid professional account as opposed to the free Gmail accounts that we use it. Typically, they'll give you like a domain name. You know so, mine's like counseling dot com. Um, but it's actually a Gmail account, and it's the paid professional version.

475

00:54:49.619 --> 00:54:51.235

Yeah all right.

476

00:54:51.264 --> 00:54:51.894

So,

477

00:54:52.195 --> 00:54:52.824

um,

478

00:54:52.885 --> 00:54:54.264

so that was definitely,

479

00:54:54.264 --> 00:54:59.965

I think a good overview of our ethical and legal responsibilities in,

480

00:54:59.965 --> 00:55:00.445

um,

481

00:55:00.474 --> 00:55:01.045

the Tele,

482

00:55:01.045 --> 00:55:01.735

counseling,

483

00:55:02.034 --> 00:55:02.755

um,

484

00:55:02.784 --> 00:55:06.594

space and what I will do is.

485

00:55:06.659 --> 00:55:12.360

Show you as well let's go ahead and.

486

00:55:12.360 --> 00:55:22.949

Open up and I will, I'll email out this presentation as well. Um, so that you have the link, but I did want to show you, um.

487

00:55:23.695 --> 00:55:37.014

If I can our Tele, counseling regional development initiative, because I know, you know, we've got we had 15 minutes or an hour or so to go through a lot of information. And boy did that time fly.

488

00:55:38.005 --> 00:55:38.875

But.

489

00:55:39.119 --> 00:55:43.170

In the meantime, I could show you here.

490

00:55:43.170 --> 00:55:47.460

I can my browser's a little bit slow, so.

491

00:55:48.989 --> 00:55:54.480

I hope for the best here, but if you are interested in Tele, counseling.

492

00:55:54.480 --> 00:56:02.369

Open up a web browser type in Tele.

493

00:56:02.755 --> 00:56:05.275

Counseling let's try,

494

00:56:05.275 --> 00:56:06.474

not Tele,

495

00:56:06.474 --> 00:56:08.664

counseling and it's called the regional Tele,

496

00:56:08.664 --> 00:56:12.474

counseling development initiative and so when you come here,

497

00:56:12.744 --> 00:56:15.925

there's 8 free contact hours on Tele,

498

00:56:15.925 --> 00:56:21.264

counseling specifically and it's for recorded 2 hour sessions.

499

00:56:21.264 --> 00:56:25.375

The 1st, 1 is on equally ethical and legal considerations.

500

00:56:25.375 --> 00:56:39.804

So, different than the 1 we're talking about today, I think today, I really dug into, like, the practical components, whereas this is kind of was more of a, a global overview of things to consider, um, and then practice considerations.

501

00:56:39.804 --> 00:56:54.085

And then 1, to our webinar on Tele, school counseling and 12 hour webinar on clinical Tele, mental health counseling. So if you are interested in that, like I said, you can get 8 free contact hours. And then here at the bottom are our resources.

502

00:56:54.085 --> 00:57:06.894

So, here's the link to the MBC policy. There's the link to ACA, code of ethics. Here is a example professional disclosure statement. Here is, um.

503

00:57:09.030 --> 00:57:18.179

The safety plan, Where's the safety plan at? Emergency response plan right there? So lots of good information here and I'm going to go ahead and put this in the.

504

00:57:18.179 --> 00:57:24.030

The share tab as well. Okay. Um.

505

00:57:25.650 --> 00:57:33.480

So, um, yes, you will get C, you will get 5 contact hours for today's, um.

506

00:57:34.465 --> 00:57:40.764

Age Walter counseling workshop and then with this, you can get 8 additional, um, as you go through them.

507

00:57:40.795 --> 00:57:53.304

Uh, you you follow the steps to watch the video, fill out a quiz and when you, when you successfully pass that quiz, then we process it on our end. And, um, we'll email you a, um.

508

00:57:53.550 --> 00:58:03.179

A certificate, so if you have not already completed that telehealth training, that's 88 contact hours right there. And those are free as well.

509

00:58:03.985 --> 00:58:15.715

All right, well, thank you so much for joining me today it's always a pleasure to talk about this such important information. Um, I hope that some of you access the regional Tele, counseling initiative.

510

00:58:15.985 --> 00:58:16.284

Um,

511

00:58:16.284 --> 00:58:20.635

and we will go ahead and take a break and we'll be back in 20 minutes,

512

00:58:20.664 --> 00:58:21.324

um,

513

00:58:21.385 --> 00:58:24.864

for Dr acres to present on us,

514

00:58:24.894 --> 00:58:25.434

um,

515

00:58:25.494 --> 00:58:28.735

a professional development panel,

516

00:58:28.945 --> 00:58:29.454

um,

517

00:58:29.485 --> 00:58:31.824

for clinical mental health counselors.

518

00:58:31.824 --> 00:58:44.994

So, I look forward to seeing you in just a little bit and I'll go ahead. I'll leave my room open. I'm just gonna stop my video and mute myself. So have a great lunch. And we'll see you back either here or in.

519

00:58:47.394 --> 00:59:01.644

In my main room, so we're in krista's room right now in my main room, I'm going to present on responding to racism with Tanya, and Dr Mark is going to be in shadi's room, um, presenting on loss and grief.

520

00:59:01.675 --> 00:59:08.574

So, um, so we're sure to have a great afternoon once we get back from lunch, I hope everybody has a great lunch break.