

Adaptations to Practice

Adhering to Ethics Code during Covid-19 Crisis

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Avoiding Harm

To see or not to see....

Potential risks and expected benefits

- Some patients may want to see or demand that the therapist see them in-person
- Assess case by case risk and benefits (suicidal, homicidal, etc..)
- Use clinical judgment
 - Patient history, type of treatment, patient progress and more to determine if in-person or telehealth is the best option
- Consult with colleagues
- Call the Ethics Hotline





- ▶ Take steps to reduce the spread of COVID-19 in your office
 - ▶ New Office Policies Should be Posted and Discussed
- ▶ Wear a mask for the entirety of the session,
 - ▶ Unless the patient has a documented medical reason to not wear one
 - ▶ What if patient refuses?
 - ▶ Suggest telehealth
 - ▶ Therapist can wear a more protective mask
 - ▶ Refer to someone else
 - ▶ Take a break from treatment with patient (after thorough assessment)

New Office Policies

Based on CDC and WHO guidance, APA recommends taking precautions in your practice, including:

- Arrange office seating in the waiting room and in therapy/testing rooms to encourage physical distancing. Consider removing the chairs in the waiting room, positioning them far apart or placing “do not sit here” signs.
- If feasible, open windows or take other steps to increase ventilation.
- Wear a mask and ask your patients to do the same. You should keep some in the office for those who may not have one.
- Schedule appointments at intervals to minimize having too many people in the waiting room.
- Ask patients to come into the office five minutes before their appointment time, not earlier.
- Keep hand sanitizers that contain at least 60% alcohol in the office, the waiting room and check-in counter.
- Post notices encouraging people to wash their hands and to avoid touching their face.
- Tell patients and office staff to stay home if they have a fever, shortness of breath or a cough, or have been exposed to someone who shows signs of COVID-19.
- Avoid hugging or handshaking.
- If you use a credit card station, sanitize it after each use. If staff runs the credit cards, they should wear gloves.

Documentation and Maintenance of Records

Adapt documentation practices

Decision-making

- Clinical progress (e.g. risk of suicidality or homicidality)
- Discussions about benefits and risks
- Why did you determine telehealth or in-person is clinically appropriate?
- Does patient has access to internet and platform?
- Is the treatment effective using telehealth? Why did you determine it is or isn't?

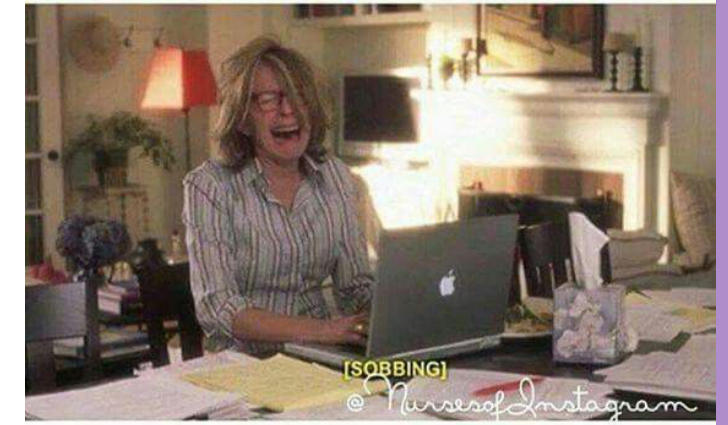
Teletherapy

- Document what telehealth services were used
- Fee structure (e.g., based on the type of services provided, charges or fee reductions for service interruptions)

In-Person

- Patient/ therapist followed state and county Covid 19- office guidelines
- Social distancing guidelines were implemented
- Masks were worn by client and therapist for entirety of the session or if not, why?

WHEN IT'S TIME TO GO



BUT YOU STILL HAVE TO DOCUMENT

Informed Consent

- Informed consent requires the patient to voluntarily participate after knowing and weighing the potential risks and benefits
- Your informed consent should be amended or an additional informed consent should be provided and reviewed with patients, whether conducting sessions via telehealth or in-person

Telehealth Informed Consent

- Potential benefits and risks (e.g. limits to patient confidentiality) that differ from in-person sessions.
- Confidentiality, how therapist will secure and suggestions for patient
- Secure internet connection, not public Wifi
- Policies if patient is late or no-shows if different from in-person
- Back-up plan in case there are technical problems
- Safety plan and emergency contact in case of emergency
- Any changes in fee or insurance coverage
- Statement regarding if telehealth is no longer appropriate and sessions in-person need to be resumed.

In-Person Informed Consent

- Potential benefits and risks in-person sessions.
- Statement regarding if in-person is no longer appropriate from a risk/benefit situation

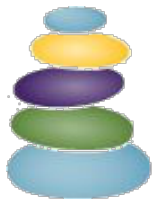
Maintaining Competence

- ▶ Do not extend outside the realm of training, experience, and abilities
 - ▶ Being in a Global Pandemic is outside the realm of many therapists' experiences
 - ▶ Telehealth is outside the realm or most therapists' training and experience
- ▶ **Get Training in Telehealth**
 - ▶ Telehealth for Mental Health Professionals: 2-Day Distance Therapy Training from PESI
 - ▶ Board Certified TeleMental Health Provider credential from the Center for Credentialing and Education (CCE)
 - ▶ Telemental Health Certification from Person Centered Tech
- ▶ **Maintain Boundaries.....**



Interruption of Psychological Services and Terminating Therapy

- Continuity of care is paramount
- Consider referring patient: Refer to another colleague if you cannot see in-person, and the patient can not access telehealth
- Consultation and documentation



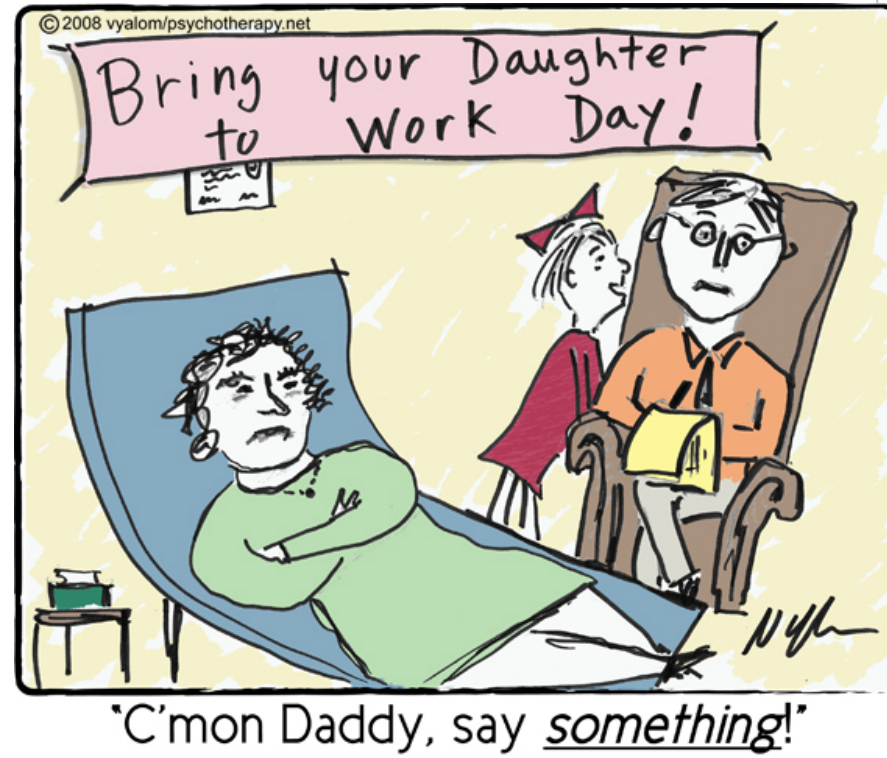
Confidentiality

- In-person

- If deciding to do treatment outside, consider where you will do this to best to keep client's confidentiality.

- Telehealth

- Where you conduct Telehealth - can others hear?
- Internet security
- Platform security - what platform are you using and what safeguards are you using to protect the patient
 - Example: Zoom - password, waiting room, separate zoom meeting numbers



Public Health Responsibility, Contact Tracing, and Confidentiality

- When a person tests positive, the Dept of Health (either state or local) is going to contact the positive person and ask for a list of people and contact information with whom they have had contact within a certain period of time
- A therapist who tests positive or has a client test positive will be told who to contact and what names to provide to the Dept. of Health
- Not a HIPAA violation to provide the name of exposed people
- Do not need to provide any details about treatment - just name and contact information
- Consult colleagues and an attorney
- Document

Ethical Dilemma: Duty to report

- During a session, a patient stated that the media is exaggerating the threat of coronavirus, and that he is going out with groups of friends, and having large parties without masks or social distancing?

Do you have a duty to report?

- **This does not qualify under “duty to warn or protect” because the patient has “not made an immediate threat of imminent physical harm to an identifiable third party”**

Personal Problems and Conflicts

Take care of yourself

**Do you mean to tell
me a stress ball isn't
for throwing at people
who stress you
out?**



Keep informed

Be aware of changing state and county changes

Be aware of recommendations from public health officials, professional societies, and regulators

Read your emails from DORA

Consult colleagues and your attorney

Thank you.

