



How to provide Telehealth for Behavioral Health Treatment: Best Practices and Ethical Considerations

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Learning Objectives

Be able to:

- Describe at least 2 reasons for transitioning to telehealth during the COVID-19 pandemic.
- Describe at least 2 ethical considerations for telehealth.
- Describe how to set up a home environment for telehealth.
- List 2 strategies for improving confidentiality during a telehealth session.
- List at least 2 etiquette guidelines for telehealth with BHT.
- Describe at least 2 soft skills
- Describe how to respond when a caregiver is expressing distress.
- Describe how to do a telehealth follow-up.
- List at least 2 good remote work habits.
- Describe at least 2 ways to do parent friendly data collection.

Why Telehealth Now

- In person ABA involves close personal proximity or physical contact (e.g. physical prompts) between people. This is particularly problematic for those individuals who have ASD and comorbid medical conditions (Cox et.al, 2020 – in press).
- As a population individuals with ASD are at higher risk for co-morbid medical problems (Chen et.al, 2013).

“To minimize risk, service providers should consider developing a COVID-19 pandemic risk mitigation plan and implementation policies. The risk mitigation plan may include some of the following elements: regular communication with staff and clients about how to stay safe, telecommuting/telehealth...” BACB statement March 20, 2020

Shelter in Place and Social Distancing

- During shelter in place continuing to provide in person ABA services increases the risk that more people will become ill than if in person ABA services stop.
- Hospitals are ill-equipped to care for individuals with ASD. Keeping clients out of the hospital should be a high priority for ABA providers (Cox et.al, 2020).

“If continuing services is deemed appropriate, the certificant must then determine if services can be delivered in a manner that does not unduly increase the risk of exposure to COVID-19 (e.g., enhanced disinfecting protocols, minimizing numbers and points of contact, using protective gear).” March 20, 2020

BACB statement and Documentation

- Section 1.04(d) of the Code makes it clear that behavior analysts must:
 - Comply with legal requirements, including those related to social distancing and service provision.
 - Recent directives regarding social distancing may create scenarios that are not easily addressed under 4.07(b) of the Code.
 - Essentially, the social distancing requirements could be deemed “environmental conditions [that] hinder implementation of the behavior-change program.”
 - Accordingly, BACB certificants must “seek to eliminate the environment constraints, or identify in writing the obstacles to doing so.” 4.07(b).

Telehealth
medical
rationale

This means that if barriers cannot be removed, the behavior analyst must document those barriers (e.g., requirements to engage in social distancing) in writing for each client.

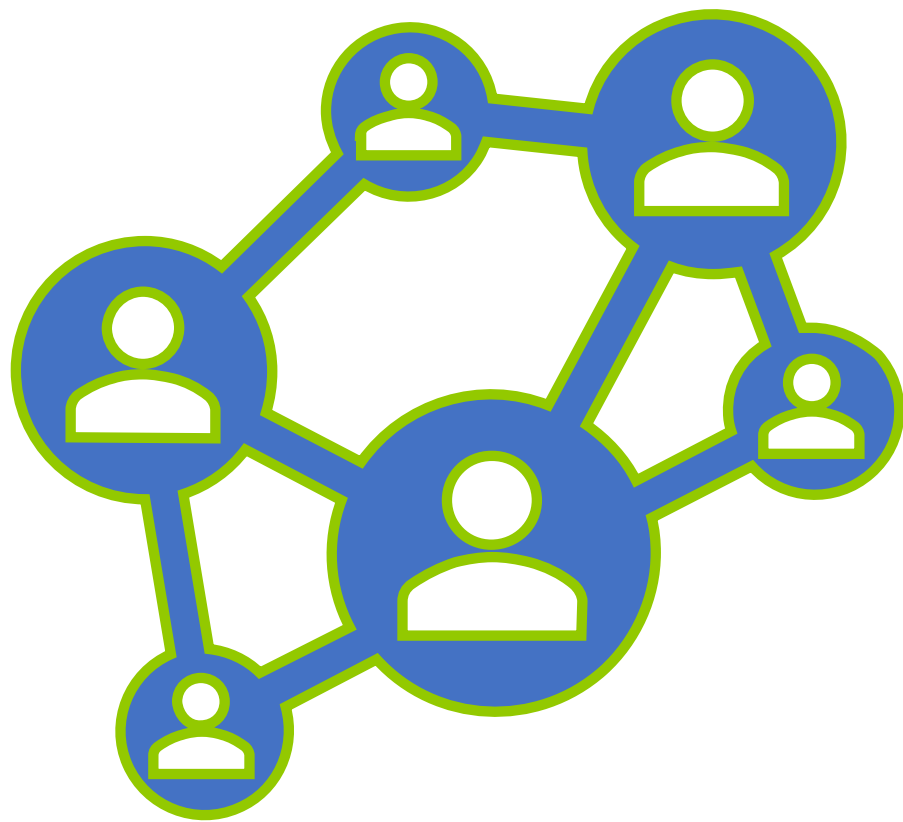


Telehealth for Parent Training Studies

Empirically Justified

- Simacek, Dimian, & McComas, 2017: Parent mediated treatment through telehealth showed improvements in language.
- Lindgren et al., 2016: Compared in-person/home, clinic and telehealth to address maladaptive behaviors for 107 children. Similar results for the 3 groups. Telehealth parent education effective in improving behavior.

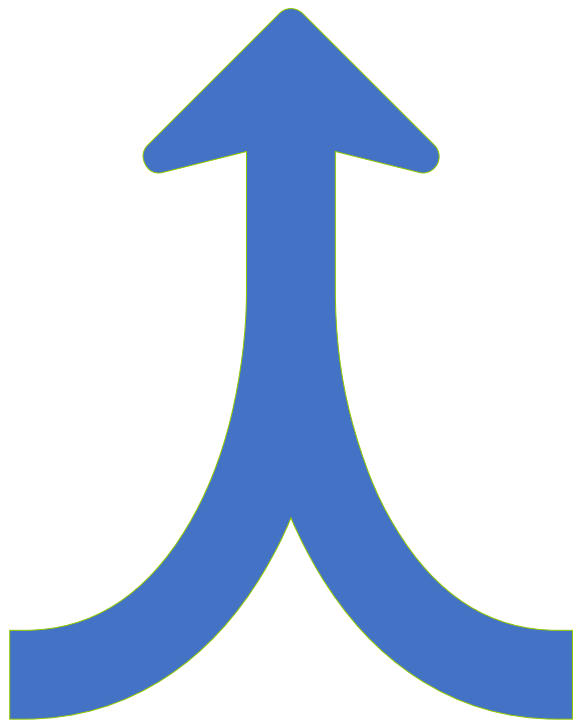




Telehealth and Working Directly with Clients

- Client coaching/education: Very little research.
- Opportunity: There is good clinical reasons to believe that for higher functioning individuals with ASD working directly with through telehealth with the clients can be effective.
- Social skills groups! As a group we have the opportunity to expand what we know about telehealth and group treatment.

Share your ideas!



How to!

Your Space

- Set up a workspace that is as private as possible. Let your family / roommates know that this is a workspace.
- Put pets away. Unless the pet is part of the treatment plan. 😊
- Set up your screen so you are looking straight at the screen not at an angle. This may mean raising the screen height.
- Put something nice/pretty behind you. Hang a piece of material, move a print or bookcase behind you. Ask a family member or friend to test your space. To get feedback do a mock session.
- Set boundaries for yourself – such as not working in your bed, etc. This will help prevent burnout.

Confidentiality

- Use a headset.
- Don't use names on written notes.
- Use a shredder.
- Get a confidentiality screen for your laptop or monitor.
- Try to pick time for telehealth when you have more privacy.
- Do your best.



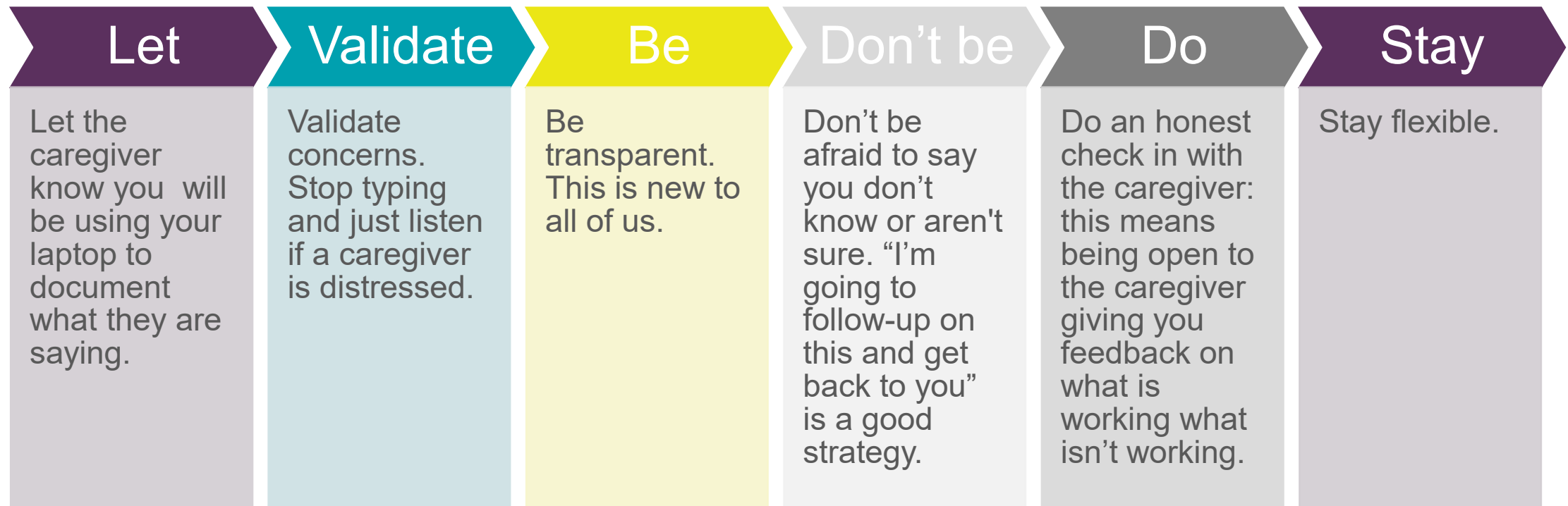


Etiquette

- Review client information before the sessions.
- Let the caregiver/client know if you need to look or step away from the screen
- Dress the part – try scarves.
- Start and end on time
- Let the caregiver/client know how long the sessions is expected to last (“e.g. we have an hour to ...”).
- End with next steps
- Remember what your mother taught you: “please and thank you”

“Soft Skills”

Soft skills are those skills that help develop the telehealth relationship



Dealing with Distress: What not to do!

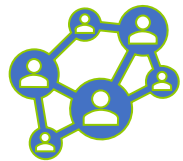
- Try to get back to the task.
- Interrupt.
- Say, “stay calm.” or “calm down.”
- Say something that would be considered defensive (e.g. “I never said that!”).
- Give false hope.





Dealing with Distress: What to do!

- Turn to the screen and listen.
- Consider that you may not be able to stick to the agenda. “Let’s put the data aside for a bit and talk about this.”
- Consider that there may have been a misunderstanding, “It looks like I wasn’t being clear about ...” Ask how what would have worked better for the caregiver.
- Make empathic comments, “This is hard.”
- Ask if the caregiver needs some time and reschedule if needed.
- Give achievable hope. “It must be hard to set aside the idea that Johnny will talk like his brother, but the work we are starting with PECS will help him communicate what he wants and needs, it’s not the same as talking but Johnny will be able to communicate with you.”
- Get support for yourself.



What to do if you are really worried

- Reach out to your CCM.
- Let the caregiver know you are reaching out to the CCM and that the CCM will contact them.
- “I’m worried about what you just shared with me. I’m going to reach out to your clinical case manager, she/he is a social worker / marriage family therapist so you can get some support. Other parents have found (name of the CCM) very understanding and helpful and I’m sure you will too.”

Responsibilities of Mandated Reporters



Understand the signs and symptoms of abuse & neglect



Report all reasonable suspicions and/or knowledge of abuse & neglect.

Rights to Confidentiality and Immunity

- You must identify yourself but you are protected
- “Mandated reporters are required to give their names when making a report. However, the reporter’s identity is kept confidential. Reports of suspected child abuse are also confidential. Mandated reporters have immunity from state criminal or civil liability for reporting as required.” 11166[c]).



The Power of the Follow-up

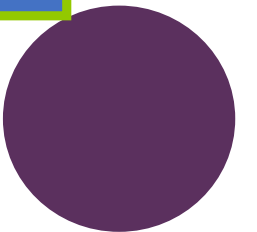
Next steps

Reinforcement

Emotional validation

Email/Text Follow-ups

- Next Steps.
- Reinforce!
 - What went well: caregivers respond to social praise too!
- Emotional validation
 - Acknowledge caregivers' attempts even if things did go so well.
 - Acknowledge struggles.
- These communications are also part of the client medical record.



Example Follow-up Email

Emotional
validation
Reinforce
skills

- Linda, thank you for taking the time for our session today. You mentioned you were feeling a little overwhelmed which is understandable. Despite feeling overwhelmed you reinforced Juan's asking just the way we talked about.
- I appreciate you letting me know how hard it's been to take data on temper tantrums. Let me know at our next session how data strategies we talked about today work. I included these in an attachment.
- One last thing, it was really great to see how Juan looked up at you during our session. And he did it twice! You may not have noticed the second time as you were focused on the goal instructions. Considering Juan rarely looked at you when we started it's so clear your hard work is making a difference. I look forward to hearing how things are going on Tuesday. Let me know if you have any questions before we meet.

Progress
as a
reinforcer

Example 2

- Hi Daniel,
- It was great meeting with you today. I wanted to recap our discussion and provide some follow-up for Thursday's meeting.
- We talked through the new behavior plan for Gabriella and discussed ways you can incorporate her siblings when she is having a meltdown.
- We went over the new goal for dinner time skills (sitting at the table, keeping her food on the table) and some strategies for keeping a consistent dinner routine.
- We discussed your concerns about Gabriella lacking social opportunities during SIP and brainstormed activities she could do with her siblings.
- I look forward to meeting with you again Thursday at 10:00 A.M.! Let me know if for any reason you need to reschedule.

Setting next
steps

Example 3

Social
reinforcement

- Hi Monique,
- Thank you for your time today – I am so happy to hear how well homeschooling is going and how you are implementing ABA strategies to keep Dante on task and engaged. We talked today about wanting some “homework” to practice with since we are only meeting once weekly right now.

Next steps

- For this week, try giving Dante a five-minute warning when screen time will end (it’s OK to use a timer if that helps!). Then give him a one-minute warning, then a countdown from ten. If he responds well, after a couple of days fade the ten second warning, then the one-minute one, etc. Eventually all he will need is the five-minute warning and maybe a timer!
- I’ll look forward to hearing how it went next Wednesday at 2:00 P.M.! Take care.

Emails/Texts and the Medical Record

- Keep it professional.
- Before you send ask:
 - If my client's medical record was released how would this communication be viewed?

“The Privacy Rule allows covered health care providers to communicate electronically, such as through e-mail, with their patients, provided they apply reasonable safeguards when doing so. See 45 C.F.R. § 164.530(c).”



Telehealth: Operational Tips for Assessment

Assessment Process

Conducted via telehealth by a BCBA or licensed mental health provider:

- Assess client ability to attend/respond to skill acquisition programs.
- Assessment of caregiver ability to facilitate the skill acquisition program and the behavior intervention plan(s). (Rodriguez, 2020 in press).

Skill Assessment

Prepare the caregiver by providing caregiver education with the goal of orientating the caregiver to:

- Caregiver role.
- What will happen during the assessment and what you will be doing during the skills assessment.

Ask the caregiver to;

- Gather any required materials and reinforcers.
- Prompt their child to attend to the screen.
- Run several client goals with the caregiver and child to evaluate the child's and caregiver's abilities. Importantly this will help you determine how much support and education the caregiver will need.

Parent ABA Data Sheet

Date:

Start Time:

End

Use

Prompt

PP

Partial Physical Prompt

FV

Incorrect Response

Full Verbal Prompt

PV

G

Gesture Prompt

Visual Prompt

PO

Data
Collection!

Instruction:
Response:

Data (+/-/Prompt abbreviation)

Data Collection for Telehealth



Be flexible!



Keep in mind that caregivers are likely juggling a mix of work, homeschooling, child routines, and above all – stress.



This is not the time to introduce a complex data collection method for most caregivers



Be creative! – Modify your current methods to fit the abilities and bandwidth of the caregivers



Be willing to take some extra time to analyze caregiver-collected data and interpret to make treatment decisions.

Data Collection Differences Parent Education vs Parent Led

- Parent Education: Parent may or may not take in real time.
- Parent Led: Parent takes data in a formal way.

Parent Led ABA Data Sheet

Name: _____ Date: _____ Start Time: _____ End Time: _____

Scoring Key

+	Correct Response			-	Incorrect Response		
FP	Full Physical Prompt	PP	Partial Physical Prompt	FV	Full Verbal Prompt	PV	Partial Verbal Prompt
M	Model Prompt	G	Gesture Prompt	Vls	Visual Prompt	Pos	Positional Prompt

Data

Goal:	Instruction: Response:					
Target	Data (+/-/Prompt abbreviation)					% Correct/Trials
						%

Suggestions for Parent Education Data Collection:

- Fill in parts of the ABC descriptive data sheet for the parent. Provide “select” option opposed to full narrative.
- Caregivers video an activity or behavioral incident – review together via telehealth appointment and take data together.
- Simple tallies – how many times did the behavior occur today?
- Simple Scatterplot – when is the behavior occurring the most frequently?
- And always: Refrigerator Behavior Plans!

Taking Care of Yourself

If you get sick or burnout you won't be able take care of others.

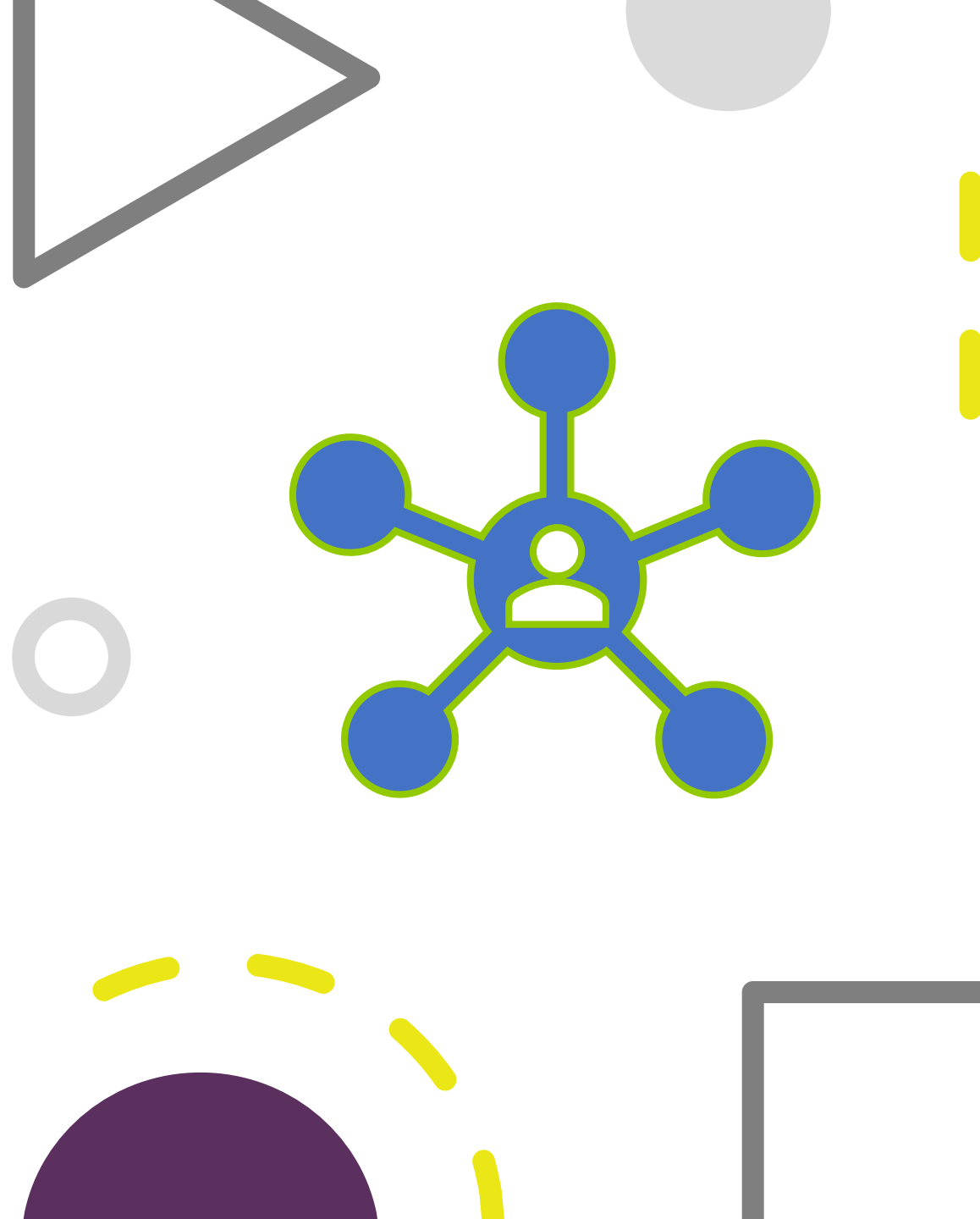
” Personal Basics

Tips

- Get enough sleep and eat healthy food. If you're working long hours, schedule both.
- Make time for mindfulness, meditation, prayer, journaling, or quiet reflection.
- Keep up with your hobbies if possible – reading, favorite TV series, crafting, etc.

Good Telehealth/Remote Work Habits

- Set up a schedule and give yourself breaks.
- Set up office hours for responding to emails and text. Let parents know your office hours.
- Make your workspace nice and inviting.
- Set boundaries for work. Work in your workspace.
- Get a work buddy to share how your sessions are going (e.g. how to change around your workspace etc.).
- Support each other!



Connecting with Coworkers



Hallway Huddles: Spontaneous 10-minute drop-in sessions on Microsoft Teams (or other instant message system) that can be placed on your calendar (similar to someone just stopping by your office).



Kitchen Connects: Phone conversations on Microsoft Teams (or other instant message system) while you're grabbing a bite or on a coffee break that last 15 minutes or less.

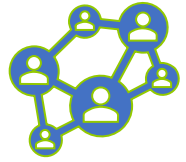


Mobile Meetings: Walking meetings by phone – 15 to 30 minutes.



Healthy Meetings

- Healthier meetings:
 - Use video so you can see others.
 - At least once a week make a meeting fun. Ask everyone to wear a scarf or hat to a meeting; ask attendees to introduce pets (for those without a pet ask them share a picture of former pet or even someone else's pet).
 - Light banter normally occurs at in-person meetings and helps connect people. Use the chat feature for banter and Q&A feature for questions.
 - Do a health check: ask everyone how they are doing by using colors (green- feeling good; yellow – have concerns; red- feeling distressed). You can follow-up with team members as needed. Welcome your team members following up with you when you're feeling red.



Be Social

- Be social:
 - Try a virtual happy hour with family, friends or co-workers.
 - Share pictures and memories with family members.
 - Write a letter. For older family members who may not be into social media write a letter. Writing a letter can also be a calm contemplative mindful practice.
 - Schedule phone calls with family and friends.

We are in this
together!

