

Behavioral Health Telephone and Video Services: Nuts and Bolts

Letting Patients Know Their Session Will Be Virtual

Call scheduled patients (pre-screening patients for high-risk condition or if they are over 60 before calling. Staff will need to ask additional questions and refer to RN triage, if necessary):

"Hello [patient], this is [staff] from [organization X], calling about your behavioral health visit scheduled for [date and time]. As you may be aware, coronavirus is present in the community and as part of our efforts to keep both you and our providers healthy, we'd like to offer you a telephone call or video visit instead of an in-person behavioral health visit. What are your thoughts about that?"

(If you cannot reach the patient, note this and make a plan to reach out again at least 2 hours before their visit).

If no: "Would you like to reschedule for another time in the future?"

If patient prefers to reschedule: "Given the nature of the current pandemic, I am not certain when we can guarantee an in-person visit, but I am happy to schedule you for an in-person in [ONE MONTH] and we will confirm closer to that date. *[Go ahead and schedule].*"

"Please remember, if you feel like you are in crisis and need to be seen urgently, in-person, please call or go to [local MH emergency services]."

"I'd also like to give you the County warm line/hotline. We are encouraging all patients, especially older patients or those with underlying medical conditions, to avoid unnecessary travel during this time, to reduce the likelihood of becoming infected or infecting others."

If you have time, ask: "How are you handling everything right now?" and "What are you doing to care for you and your family's health right now"? If they say all 3: Wash hands frequently, cover cough/sneeze with elbow, and stay home, as much as possible, reinforce: "That is great, so glad to hear. You can also help stay healthy by going for a walk everyday outside and getting enough sleep every night, limiting news checking to just one trusted source, and just a few times a day. All these things can help our emotional health too."

If yes: "Your provider/I can call you for a phone visit or we can help you set up a virtual video visit using the Zoom app on your computer or smart phone. Which would you prefer?"

If phone: "Ok, I'd like to confirm that this is the best number to reach you? Please expect a call from a blocked number between [20 minutes before or after scheduled time] and plan to be in a quiet, private space."

Then staff should, make a note in the appointment details if the appointment will be via zoom or telephone so the provider knows.

If Zoom: "Ok, [review download instructions on attached handout. You will instruct the patient to download the app and provide the provider's unique 9 digit code to enter the meeting]. Please expect your provider to be there [20 minutes before or after scheduled time], and plan to be in a quiet, private space."

Then staff should, make a note in the appointment details if the appointment will be via zoom or telephone so the provider knows.

Prepping for Your Video or Telehealth Session:

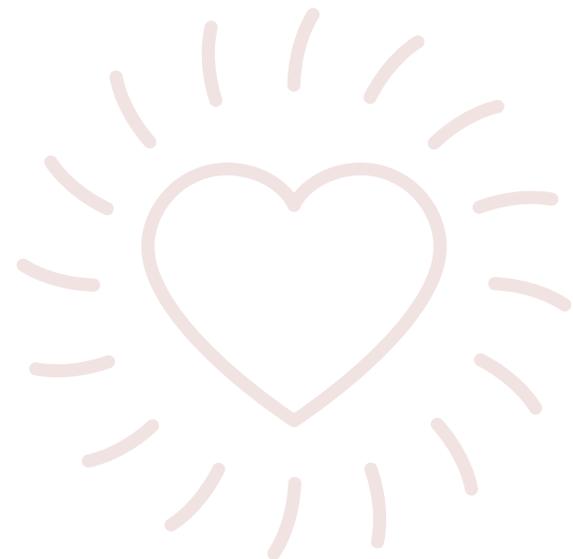
1. Set-up a dedicated space for virtual patient visits: If you are at the clinic, this is easy. If you are doing visit from home, it can be more of a challenge (especially with our kids out of school!). For those who have experience in working out of their home, we know being in our dedicated workspace helps us get into "work mode". For BH professionals, this means we trigger our mind to get present and 100% focused on the patient. So, if you are at home, this place is ideally it is somewhere free from distractions and private.

2. If you are using video:

1. Make sure you are dressed as you would be in the clinic (at least from the waist up ;)
2. Ensure the background is somewhat neutral; avoid visuals of anything that would impair patient confidence in you. You can also use a virtual background.
3. Test out the camera to make sure it is at your eye level.
4. Test out the microphone on your computer.

You can always use your phone for the audio on your video call if you need better sound.

3. Block your number, if necessary: If you don't have a designated work phone and you are calling the patient from your personal number, remember to dial *67 or block your number in the smart phone settings. You may also want to give your patients the heads up that you will be calling from a blocked number.



The Session:

Obtaining Verbal Consent: For all virtual services, we need to obtain verbal consent. There is no rigid script for this and, as we know from our work in integrated settings, we are typically much more concerned about confidentiality than our patients are. The important thing is that it is simple and short. Here is an example:

"Since we are doing therapy on the phone/over video, the same confidentiality rules apply as in-person [explain this if necessary, re: first visit]. But, because we are over the phone/video, I also need to make you aware that:

1. You can verbally withdraw consent to do this type of therapy at any time
2. That while we are using a HIPPA compliant/approved mode of protected communication, it is possible for a breach because of technological complications...
3. I understand that if I am in need of emergency mental health services, the protocol for [organization X] is still the same (explain if necessary)

Do you consent to continue our session?"

Charting and Billing: All charting and billing is done as you normally would. The only difference is adding a note about the verbal consent. To do this, create a stock phrase to paste into the visit note:

"This visit was conducted with the use of interactive audio and video telecommunications system that permits real time communication between the patients and the provider. Patient consent for virtual visit obtained on DD/MM/YYYY"

and the following information:

Originating site: [note offsite or clinic location]

Distant Site: Patient's home

Telehealth consulting provider: [Name]

And the reason:

This Telehealth visit is intended to take the place of a face-to-face visit and the services included have been deemed by the provider to be medically necessary and appropriate to be delivered via virtual/telephonic communication. These services cannot be safely delivered in a face-to-face encounter due to circumstances related to the COVID-19 pandemic.

The Session:

What to do if there is a crisis over the phone/zoom when patient is at home: You will complete a risk assessment, as usual. If you are concerned about safety, you will:

1. Confirm patient's phone number and current location
2. Ask if there is another person in the home that can come onto the call.
3. Explain you are worried about the patient and want to get them help; share with the significant other what you recommend.
4. Tell them you would like to put them on a brief hold, so please do not hang up (use conference feature on your phone).
5. Call 9-11 or mobile crisis.

What to do if you need translation and you are working from home: If you are using an iPhone or other smart-phone, you will need to use the conference feature on your phone to call the translation line.

Please make sure you have this number handy.

For strategies to ensure high quality session using videos, see the document "Considerations and Tips for Video Sessions for Clinicians" on www.emorrisonconsulting.com, under "Tele-Health".

