



## *Brief Practice Guidelines for Telemental Services*

The same ethical and professional standards that are required when providing in-person mental services apply to telepsychology and telepsychiatry services. The use of telecommunication technologies in the delivery of psychological services is a relatively new and rapidly evolving area, and therefore providers

are encouraged to assess the appropriateness of utilizing these technologies prior to engaging in, and throughout the duration of telepsychology/telepsychiatry practice.

MySunnySky has prepared the following brief guide to assist you in delivery telepsychology/telepsychiatry services.

### **1. Before you start tele-mental service, learn applicable regulations and laws.**

A. You must hold an active license in the state the client is located and services are delivered.

B. Verify your licensed state's requirements for telepsychology/telepsychiatry:

- Whether an initial or periodic face-to-face meeting is required?
- Whether referral from or coordination with the patient's primary care is required?

**2. Obtain a signed Informed Consent** that specifically addresses the unique concerns related to the telepsychology/telepsychiatry services you provide. Provide patient with a 'HIPAA Notice of Privacy Practices'.

**3. At the beginning of a video-based mental health treatment with a patient, the following steps shall be taken:**

**A. Identity Verification.**

- The name and credentials of the professional, qualifications, licensure information, and, when applicable, registration number and where the patient can verify this information.
- The name and age of the patient shall be verified. Professionals may ask patients to verify their identity more formally by showing a government issued photo ID on the video screen.
- For services with the patient at a remote healthcare institution, the verification of both professional and patient may occur at the host clinic.

B. The **location** where the patient will be receiving services by videoconferencing shall be confirmed and documented by the provider.

C. Provider shall assess carefully the **environment** in which videoconferencing is used to make sure

- Both provider's space and client's room shall be appropriately designed with audio and visual privacy.
- The rooms shall be well lit.
- Ask client to make necessary adjustments of the computer camera to maximize call quality.

D. Determine and advise patient of procedure for managing emergencies, including availability of emergency services in the community (nearby Emergency Department, Crisis Stabilization Services).

#### **4. Follow best practices for managing prescriptions**

Verify your state's requirements for prescribing via telemedicine.

Prescribe medications only after establishment of a doctor-patient relationship and adequate examination and assessment.

Make sure the physician's DEA registration is active and valid for the location from which the physician is prescribing.

Consider having controlled substances prescribed by the client's primary care physician with consultation from the tele-psychiatrist.

Where uncertainty exists about a client's prescription history or risk for abuse, check the client's prescription patterns using the state's Prescription Drug Monitoring Program (PDMP).

## **5. Risk management.**

### **A. Regular assessment of the progress of clients/patients.**

Providers are urged to monitor and assess regularly the progress of their client/patient when offering telepsychology/telepsychiatry services in order to determine if the provision of tele-mental services is still appropriate and beneficial to the client/patient. If there is a significant change, such as evidence of severe distress, suicidal ideation, in the client/patient, providers make reasonable effort to take appropriate steps to adjust and reassess the appropriateness of the services delivered via telecommunication. Where it is believed that continuing to provide remote services is no longer beneficial or presents a risk to a client's/patient's emotional or physical well-being, providers are encouraged to thoroughly discuss these concerns with the client/patient, appropriately terminate their remote services with adequate notice and refer or offer any needed alternative services to the client/patient.

### **B. Link wherever possible to primary care (referral, care coordination, management of medications)**

### **C. Identify crisis plan and location of emergency services in case of emergency.**