**Telehealth and Missionary Care -** Be Afraid, but not too Afraid

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| ISSUE | | RESOURCE – KEY QUESTIONS | ACTION PLAN |
| PowerPoint of presentation | [www.TraumaResilience.com](http://www.TraumaResilience.com) select “Training Materials” | |  |
| GROUND RULES:  Review guidelines , policy statements re: Telehealth | Telehealth must satisfy as high a clinical standard as face-to-face  Guidelines of your national AND state professional board  <http://www.apa.org/practice/guidelines/telepsychology.aspx> | |  |
| Screening criteria | * Which clinical issues do I want to exclude from telehealth? * What evidence exists supporting telehealth for this diagnosis? * Can an emergency plan be established with this client to be safe? * Can telehealth be used securely, safely, and privately in this case? * Is there sufficient internet access and bandwidth available? | |  |
| Verify client identity | Establish procedure to protect private telehealth communication | |  |
| Licensure issue   * Out of state * International | The client’s location is relevant for licensure issues   * Are there licensing requirement in the client’s location? * Consider a collaborative consultation arrangement instead   [www.apapracticecentral.org/advocacy/state/telehealth-slides.pdf](http://www.apapracticecentral.org/advocacy/state/telehealth-slides.pdf) | |  |
| Telehealth training | Get training in the therapy techniques and equipment to be used  Telemental Health Institute, Zur Institute, and others | |  |
| NOTES  Policies and Procedures | 1. Refer to standards and statements on telehealth on the   website of your professional organization   1. Glean from larger telehealth providers in your state 2. Adjust Schaefer’s P & P after review of your state’s   Policy statement (see [www.TraumaResilience.com](http://www.TraumaResilience.com) ) | |  |
| Informed Consent | Having IC for VideoConferencing is the professional standard  of care in USA (may use our template in [www.TraumaResilience.com](http://www.TraumaResilience.com) ) | |  |
| Collaborate with field-based professionals and leaders | In what way would this apply to the clients I presently videoconference with in an international setting? | |  |
| Internet Security | Is my internet security software solid and up-to-date?  Does my telehealth software have quality passwords or encryption? | |  |
| Choice of telehealth technology | Which technology options match the unique needs of my clients’ resources, location, safety concerns, and diagnosis? | |  |
| E-mail security | Get informed consent and stick to logistics, not therapy.  If sending health information, strongly consider encryption.  Encrypt message content, stored messages, internet connection.  (Axcrypt, Virtru, Hushmail, and others) | |  |
| Secure internet connection | Connect through secure websites (https:\\) or use a VPN  (We are using Private Internet Access as our VPN) | |  |
| Secure file sharing | Use a HIPAA compliant cloud based file sharing provider or encrypt the files you share that contain PHI | |  |
| Videoconferencing provider | Does your VC software provider state that they are HIPAA compliant?  Does it store or access the PHI in messages?  (Review list on telehealth.org/video/ (Telemental Health Inst.) | |  |

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