TC Technology Transfer Centers Funded by Substance Abuse and Mental Health Services Administration



TELEHEALTH LEARNING AND CONSULTATION (TLC) TUESDAYS

April 28: Telehealth Troubleshooting



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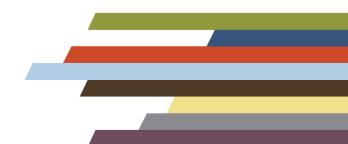




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At the time of this presentation, Elinore F. McCance-Katz served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of Nassar, Costello, and Wolf-Prusan and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred. Additionally, Nassar, Costello, and Wolf-Prusan and Wolf-Prusan have no financial, personal, or professional conflicts of interest in this training.



Presenters



Carl Nassar, Ph.D., LPC, CIIPTS

Carl took the long road to a counseling career, beginning as a professor of Engineering at Colorado State University, where he built a million-dollar research laboratory; won awards from IBM, the State of Colorado, and the University; and taught nationally and internationally, all on his way to earning tenure. Carl then left the engineering field, earned new degrees in counseling psychology, and ran a very successful private practice for a decade, winning Counselor of the Year Awards from the Colorado Counseling Association. Most recently, he spent the last seven years starting and then building what's become the state's largest outpatient behavioral health organization, employing hundreds of individuals.



JK Costello, MD, MPH

JK Costello is a physician/consultant who develops population health models for substance use disorder. He works with publicly-funded health care and public health systems to improve addiction prevention, treatment and recovery. He helps expand medication-assisted treatment (MAT) in Colorado jails, develops valuebased payments for MAT for Medicaid health plans, and, improves recovery options in rural Colorado. He is an expert on the payment and regulatory landscape for substance use disorder treatment.

Presenters



Leora Wolf-Prusan, EdD

Leora Wolf-Prusan is the Director of Partnerships & Learning at the Center for Applied Research Solutions (CARS) where she supports the agency's teaching and learning portfolio, serves as the Region 9 School Mental Health field director for the Mental Health Technology Transfer Center (MHTTC), in addition to many other facilitation projects. Previous roles include a national field director of a SAMHSA initiative (ReCAST), technical assistance for the Student Mental Health Program for California's Community Colleges, CalWorks and more. Other prior work includes serving as an educator coach and consultant in a variety of education settings primarily focusing on college and career-going culture and student support systems.

Why did COVID-19 – NOT – Netflix cause us to switch to telehealth?

Reasons for Transitioning to Tele-Therapy (Pre COVID-19)

- Usually a simple reason
 - e.g. clients move and want to maintain a therapeutic connection

• Many benefits for unique groups

- Rural individuals, isolated individuals, and busy individuals
- The scientific case
 - Hundreds of studies and metastudies say it is as effective as inperson therapy

BUT... Slow Growth (Pre COVID-19)

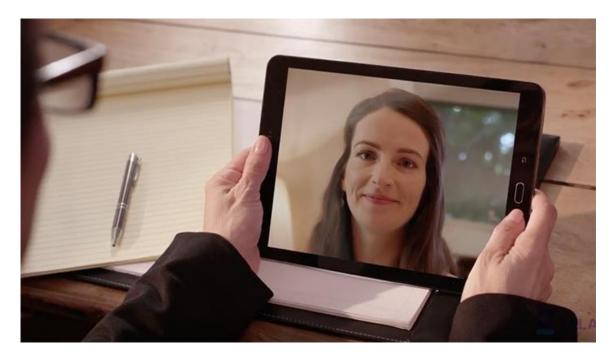
 Even with all these good reasons, and a lack of access in rural areas, still only 2% to 5% of our sessions were telehealth

What is going to be the New Normal?

Will we see people coming to therapy wearing a mask?



Will people prefer to continue telehealth?



The switch with COVID-19 and beyond

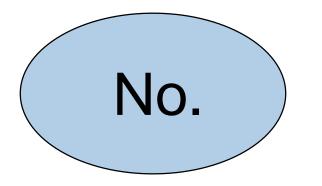
Physical distancing and Government Regulations forced the sudden move to 100% tele-health

Post COVID-19 we are anticipating 20% of clients will choose to continue using telehealth

- Once you try it, and like it, you keep it.
- Clients will tell their friends



Do you hire differently if you want therapists to do tele-therapy?



The research is conclusive: The most important thing in the therapy session is the quality of relationship with the provider

 This is more important than technique or delivery method

We hire people who have the relational skills to be a strong clinician.

• We haven't seen the use of telehealth diminish the quality of the therapeutic connection

One Key Skill Does Matter

A key relational skill that matters is how individuals manage anxiety

When providing telehealth sessions it matters how you manage technology anxiety



How can you manage technology anxiety?

Be transparent and don't fall into shame

Maintain your kindness and gentleness towards your client and yourself

As best as you can set yourself up for success:

- Practice with family and friends using different technologies and connections
- Troubleshoot with people you can be vulnerable around

When a problem happens:

- Keep the focus on the client but acknowledge what is happening
- If it is a major issue let it be an issue and address it

How can you set yourself up for success in session one?

Telehealth requires three things:

- a device
- an internet connection
- and a private space

Hold an introductory session with your client before your first therapeutic session

• This can be 10 minutes and can be done by yourself or support staff

An introductory session requires a time investment on your part

• You might lose a little money in the short term but this will save headache and lost revenue in the long-run

How can you use waiting rooms to support clients?

Waiting rooms are great until client anxiety sets in because you are running behind

• Keep your clients informed of changes

Texting clients is a great way to communicate unexpected delays

- Some examples:
 - "We'll begin at 10:10 instead of 10:00. Apologies."
 - "Running a few minutes late for our 10am session. Will text you as soon as I'm available and can login. Sorry."

How can you ensure safety during sessions?

- Have the session you can have
 - Don't focus on what you can't control and be flexible

- Know where the client is
 - Ask to see the room the client is in
 - Ask if the room is private
 - Ask them to tell you if those things change





More Safety Considerations

Discuss things with clients ahead of time when things are safe

- Discuss use of safe words and how you should respond
- Show clients how to use the messaging feature in the platform you are using
- Slow things down if they feel unsafe



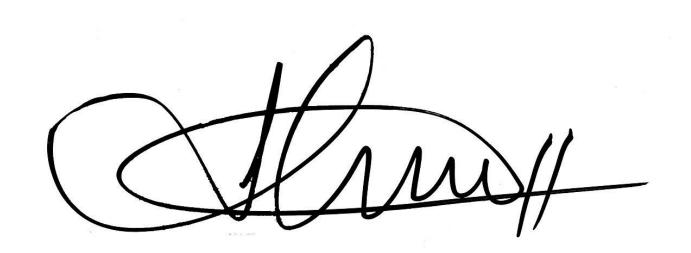
Consent forms-- content

- Tons of sample consent forms for telehealth can be found online
- Common aspects:
 - Normal demographics (client name, <u>client location</u>
 - Description of telehealth services
 - Benefits and risks
 - Witness signature for verbal online conserver to the second of the

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Consent forms-- completion

- Ways to sign online
 - Online document signing
 - Fax
 - Snail Mail
 - Verbal with witness



How can you effectively run groups on Zoom?

Webinar, meeting, or standing meeting?

 Webinar better for didactics, meeting better for interaction between group members; standing meetings have less customizability

Waiting Rooms

- Universally available
- Definitely use for group therapy

Breakout Rooms

- Not available on some healthcare-specific platforms
- Can pre-set subgroups before meeting
- Can jump between groups or have multiple co-hosts jump





How can you increase joining and therapeutic alliance?

The internet doesn't limit your ability to feel your client or your client's ability to feel you

• Empathy is internet proof

If you care your client will feel it and will want to share their story



How can you increase your capacity to handle ambiguity?

Remember – The art of therapy is being able to hold space with kindness and empathy

Your client will follow your lead – when you are uneasy so is your client

• Manage your anxiety

Plan and practice as much as you can but...

Don't worry so much about getting it exactly right

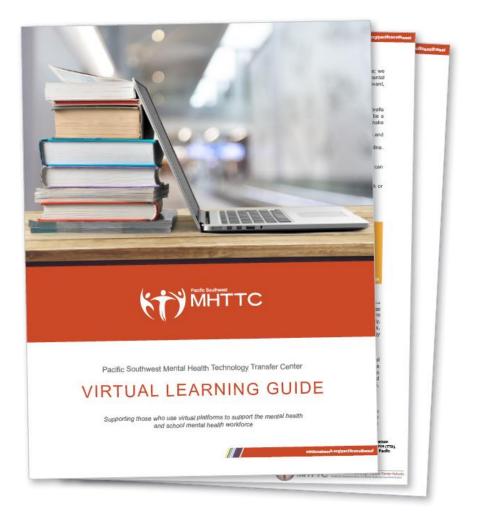
• People come to therapy not because you are perfect, but because you care

Pacific Southwest MHTTC's Virtual Learning Guide

A free resource guide to assist with all the basics of telehealth

Download the guide

https://mhttcnetwork.org/centers/ pacific-southwestmhttc/product/virtual-learningguide



Welcome! A guide to the Guide

5 Sections

- 1. Technology Guidance
- 2. Virtual Facilitation Strategies
- 3. Content Guidance for Content Creators
- 4. Facilitation Guidance
- 5. Learner Guidance

Resources & References

3 Main Points

- Delivery & Design: Both Matter; Equally
- Virtual & In Person: Both Matter; Equitably
- We Are Also Learners!

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Section 1: Technology Guidance

Tech learning tips Physical set up Tech set up Selecting platforms

Top 5 Virtual Learning Technology Tips

- 1. Create guides with visuals to the platforms you use. They'll come in handy when you send out an invitation, start a virtual learning experience, and will help codify the "how tos."
- 2. Don't assume anything: make everything explicit, even the small stuff.
- 3. Technology can make even the most confident feel incompetent, and/or frustrated. Be ready to navigate these feelings in yourself and others.
- 4. Age doesn't mean anything: someone being "young" or "old" doesn't have anything to do with participant capacity in leading or absorbing learning via a virtual platform.
- 5. Digital equity is foundational: don't assume everyone has wifi, hotspots, or a safe and quiet place to learn or teach. Differentiate access to learning as much as possible by determining and mitigating limitations that individual participants may have, and structure the learning to maximize and leverage the skills and contributions each participant brings to the virtual learning space.

Platforms for Peer Learning - A Checklist

Physical Set Up - A Checklist

Technology Set up - A Checklist

Top Tips!

Physical Setup

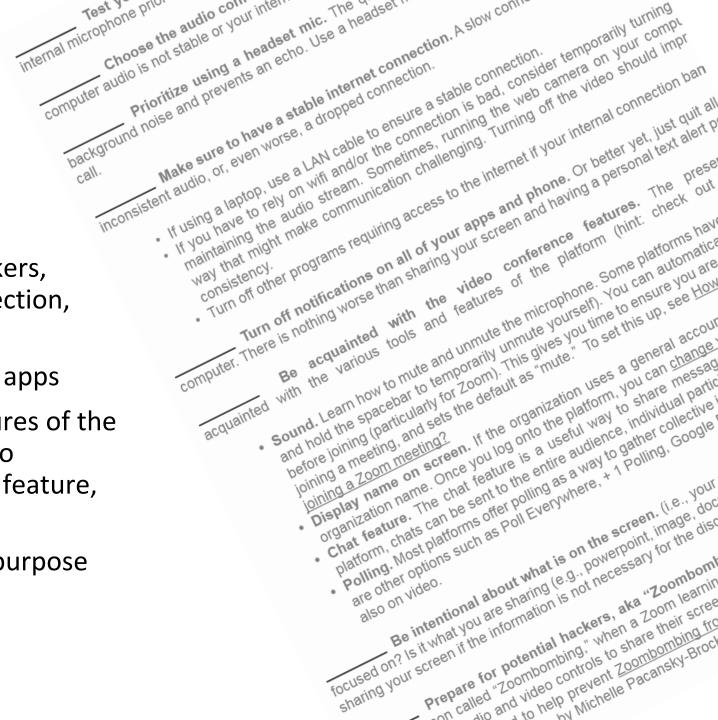
- Beware of your surroundings...behind you, in front of you, and outside of your immediate area.
- Have your talking points, notes, and a hardcopy of the presentation in front of you.



Top Tips!

Tech Setup

- Test your technology... speakers, microphones, internet connection, and access to the platform
- Turn off other programs and apps
- Be acquainted with the features of the platform you are using...audio (muting), display name, chat feature, polling, sharing
- Know the audience and the purpose



Reflection Question

» Knowing that many mental health and school mental health professionals may be new to virtual learning, what technology navigation tips are essential to both the presenter and learner's success?

Section 2: Virtual Facilitation Strategies

Part 1: Setting up facilitator for success

Part 2: Ensuring accessibility

Part 3: Purpose Drives Platform - Matching Your Learning Outcomes to The Learning Modality and the Technology

Part 1: Setting the Facilitator Up for Success

Part 2: Ensuring Accessibility

Reflection Questions

- » What presenter tips require practice for you?
- » For which presenter tips do you need more information or skill support?



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Participants are usually part of an affinity group (a grant, a work position, an identity position) and the facilitator's job is to:

- a. Open the session (welcome, purpose, outcomes, introductions, connector, norms)
- b. Provide guiding questions to bridge and build discourse between and across participants or between participants and a presenter
- c. Close with summary and organization of the conversation, next steps, thank yous, and close out

Note that as a facilitator, your voice should be the least heard except for the opening and closing. Your job is to set participants up for engagement.

KEYNOTES/PRESENTATION

Participants are usually joining to gain knowledge and information and the presenter's job is to provide content and direct instruction. These usually take the form of a webinar. See Designing Interactive Webinars for more tips about webinar engagement.

COACHING & CONSULTING

Participant(s) are joining to receive individualized, intensive support on a practice, skill, dilemma, or inquiry. This could also include collaboration, in which the coach/consultant works on a document (e.g. a school's trauma-informed policy), or with a team or individual.

- a. Coaching implies that the participant is engaged in thought-partnership; the coach assumes that the participant has the solution to their own challenge and the coach provides reflective guidance. See Costa & Garmston (2002)'s guidance for coaching questions. This model is suitable for on-going interactions.
- b. Consulting implies that the participant is seeking concrete advice, solutions, or an answer to a particular question. Consulting is usually a one-time, short-term interaction.

Part 3: Purpose Drives Platform – Matching Your Learning Outcomes to The Learning Modality and the Technology

WORKSHOPS

While workshops are recommended for in-person, virtual workshops (usually recommended for 60-90 minutes) can be effective, though this is the most difficult form of virtual learning. We recommend that you lead a virtual workshop with a co-trainer.

For other ideas of how workshops flourish online and other platforms that support success, see: <u>Remote</u> workshops: collaboration done virtually or Running a Virtual Workshop - Ashley Crutcher

Reflection Questions

- » Which platforms does your organization have access to? What's missing? What should you keep?
- » How might you make this chart reflective of your own organization's usage and availability?
- » When putting the chart together, how might you do so with input from both presenters, participants, and technology staff?
- » How might you integrate social media platforms in the chart? What platforms do your populations of focus use?
- » What other tips do colleagues need in selecting their modality?

Contact Info

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Q&A With Presenters







Carl Nassar, Ph.D. LPC, CIIPTS

JK Costello, MD, MPH Leora Wolf-Prusan, EdD

Thank you for joining us for TLC Tuesday

More training to come from our national MHTTC/ATTC offices: Follow Training Updates







