



Central East (HHS Region 3)

MHTTC

## Tip Sheet: Group Teletherapy

Best Practices, Skills, and Strategies for Providing Virtual Group Psychotherapy

### Virtual Group Therapy

Group teletherapy takes the principles of traditional, in-person group psychotherapy and applies them to a virtual format. This tip sheet will teach you

- Logistical components of setting up your group therapy sessions
- Best practices for providing group teletherapy
- Benefits of group teletherapy
- Unique challenges to virtual group therapy, along with strategies and solutions
- Resources to learn more

### Setting Up Group Teletherapy Sessions

The following are considerations for setting up your practice. Each of these topics will be explored in more depth later in this tip sheet.

- **Technical requirements.** Group teletherapy requires the therapist and all group members to access the same website or other virtual tool (i.e., Health Insurance Portability and Accountability Act [HIPAA]-approved videoconferencing platform). It also requires all participants to have the internet bandwidth to support a video call.
- **Environmental standards.** For group teletherapy to work, all group members must be willing to meet in an environment that is private and limits distractions for other participants.
- **Logistical issues.** If you work for a large agency, someone may manage logistics for you. But if not, consider the following:
  - **Billing and coding:** Find out what codes you can use to bill for these services. Most insurers now cover group psychotherapy via telehealth.
  - **Licensure:** Make sure all of your group members are permanent residents of states covered by your licensure.
  - **Scheduling:** Confirm or send reminders for appointments the day before or a few hours in advance and include the login link, password, and instructions in the reminder. This may be possible through your electronic health record (EHR) system or scheduling program.

*This is not intended to be legal advice. Check with your compliance department for legal details.*

## Reducing Barriers Through Teletherapy

The recent shift in interest and uptake of teletherapy is a positive step for therapists who provide group therapy services and for individuals who choose to participate in them. Group teletherapy—that is, group therapy conducted via videoconference—allows individuals to participate in groups even when physical distancing, office shutdowns, or other barriers keep them from attending group therapy in person.

Research shows that virtual group therapy is often as effective as in-person group therapy for a number of conditions and concerns.<sup>1</sup>

# Best Practices in Group Teletherapy

## Systems and Processes

As with in-person group therapy, you'll need to spend some time with the members of your virtual group up front to set expectations and help them prepare for their sessions. You can do this through detailed written instructions, a pre-meeting, or both. Topics to cover for virtual group therapy include how to log in, how to turn camera and microphone functions on and off, and how to use a telephone line as backup. This is also a good time to review the norms for group member behavior and participation.

If you are starting a new group, you will also want to prescreen members in the same way you would for an in-person group. You can use this time to gain informed consent, set privacy expectations, and review group guidelines.

Make some decisions about what the norms in your groups will be. For instance:

- **Webcams:** What are the expectations regarding the use of cameras?
- **Mute/unmute:** Should everyone stay muted when they are not speaking? Will the group leader manage muting participants, or will participants control their own microphones?
- **Chat function:** Should you allow both group and private chats? Should the therapist read chat aloud during the call?
- **Screenshare:** Will you need to share your screen, such as for a psychoeducation component of the session? You may consider disabling it if it won't be needed.

## Environmental Setup

These best practices apply to the therapist's environment and can also be shared with group members to help them set up their environments.

- **Sit with a solid background** (e.g., wall, bookcase) if possible. At a minimum, limit distractions, such as dishes and stacks of papers. Use a virtual background if needed.
- **Place light in front of you.** Windows or bright lights behind you will shadow your face.

- **Rest your device on a solid surface.** Balancing it on your lap creates constant, distracting, and possibly nausea-inducing movement.
- **Look straight at the camera.** This may mean putting your laptop on something like a stack of books to raise it.
- **Minimize internet usage** by closing all other websites and apps and asking others in your home to limit or avoid streaming (e.g., Netflix) or other high-bandwidth activities (e.g., gaming). This will help ensure a solid internet connection.
- **Minimize unnecessary noise** such as tapping, clicking, paper shuffling, and typing. If you need to cough or sneeze, mute your line. Close doors and windows to prevent interruptions and background noise.
- **Exile pets, children, and housemates.** Provide your clients with the same degree of privacy and respect that you would in your office.
- **Take care of yourself.** Have a drink, lozenge, or hard candy available if you will need it. Use a cup or bottle with a lid to avoid spills; unwrap candies before each meeting to avoid broadcasting loud cellophane crinkling noise.

## Privacy Tips

- Always use a HIPAA-compliant videoconferencing platform.
- Always require a password for access.
- Do not publicize your group links or password; share them only with authorized participants.
- Use a "waiting room" to manually admit people to the group session.
- Only offer "closed" groups—that is, a set group of pre-screened individuals.
- Set privacy expectations with the group and briefly remind everyone at the start of every session. Alert members that their privacy is not guaranteed.
- Allow members to use nicknames or aliases for sign in; know what they are so you can ensure no unauthorized users join your meeting.
- Disable the recording function in your meeting.

## Group Teletherapy

Best Practices, Skills, and Strategies for Providing Virtual Group Psychotherapy

- **Turn off the ringer** on your cell and desk phones and keep them away from your microphone and speakers. Cell phones can cause interference with microphone.

### Strengths and Challenges

Group teletherapy has many advantages over in-person group therapy. Most of these are based on improved access through the reduction or elimination of both personal and practical barriers. At the same time, there are some challenges to group teletherapy in a virtual setting. However, most challenges can be met with some strategic thinking, advance planning, and minor modifications.

### Advantages of Group Teletherapy

- Removal of barriers to participating in in-person group therapy, such as transportation and childcare issues.
- Better access for people with disabilities, illnesses, injuries, mobility issues, or other concerns that make office visits difficult.
- Improved opportunity to engage in group therapy for individuals with agoraphobia or other phobias, those who are uncomfortable

in close physical proximity to others, those with environmental allergies or sensitivities, and those who for other reasons might have been reluctant to try group therapy.

- Multimodal communication options (i.e., oral, visual, in chat) that may balance participation more evenly than in-person groups.
- Increased privacy for those who don't want to be seen going to therapy.
- Reduction in no-shows—because of the many advantages listed above, therapists have reported anecdotally that they have a much lower rate of clients who miss their group therapy appointments.

---

**The rising popularity of teletherapy is a great opportunity for therapists. It enables providers to take their skills in group therapy and offer them to a wider population of individuals seeking group therapy services or to maintain an ongoing therapy group when circumstances make it difficult or impossible to meet in person.**

---

Challenges	Solutions
<i>Changes or limitations in group cohesion.</i> Some research shows that participants in group teletherapy feel less group cohesion than those who attend in-person groups.	This may require the therapist to spend more time working on group dynamics than perhaps would be typical for in-person groups.
<i>Privacy concerns.</i> Some group therapy participants may be <i>more</i> concerned about their privacy, as they don't know who may be able to see or hear them on the other side of someone's computer screen.	Communicate privacy expectations clearly with your group members. Recommend using headphones or earbuds and the smaller and more portable screen of a smartphone if possible. If a member feels they cannot protect others' privacy within reason, group teletherapy may not be the right fit for them at this time.
<i>Technology issues such as lack of stable internet connection or competition with others over bandwidth, computer/devices, or phone.</i> Particularly in group sessions, differences in connection quality can create uneven opportunity for participation.	Prep your clients in advance with strategies for reducing burden on their internet connection (e.g., shut all unnecessary browser windows, don't stream or download files during the meeting). Make full use of tools like the "raise your hand" function available in many videoconferencing platforms.

## Group Teletherapy

Best Practices, Skills, and Strategies for Providing Virtual Group Psychotherapy

### Helpful Resources

American Psychological Association Guidelines for the Practice of Telepsychology:  
<https://www.apa.org/practice/guidelines/telepsychology>

Association of Marital and Family Therapy Regulatory Boards Teletherapy Guidelines (PDF | 440 KB):  
<https://amfrb.org/wp-content/uploads/2017/05/Proposed-Teletherapy-Guidelines-DRAFT-as-of-09.12.16.pdf>

Connecting Online | American Group Psychotherapy Association (AGPA): <https://www.agpa.org/home/practice-resources/connecting-online>

Clinical Innovations in Telehealth Learning Series | Mental Health Technology Transfer Center (MHTTC) Network:  
<https://mhhtcnetwork.org/centers/global-mhhtc/clinical-innovations-telehealth-learning-series>

Fundamentals of Telemental Health: An Introduction to Telemental Health | Northwest Addiction Technology Transfer Center: <https://www.youtube.com/watch?v=SX1Jp23tJqc>

How to do group therapy using telehealth | American Psychological Association: <https://bit.ly/3eBCm88>

Introduction to Telemental Health | Office of the National Coordinator for Health Information Technology (ONC):  
<https://www.healthit.gov/resource/introduction-telemental-health>

Medicare Telemedicine Health Care Provider Fact Sheet | Centers for Medicare & Medicaid Services:  
<https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>

Telemedicine | Medicaid.gov: <https://www.medicaid.gov/medicaid/benefits/telemedicine/index.html>

*This publication was prepared for the Central East Mental Health Technology Transfer Center by Advocates for Human Potential, Inc., under a cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA). All material appearing in this publication, except that taken directly from copyrighted sources, is in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. Do not reproduce or distribute this publication for a fee without specific, written authorization from the Central East Mental Health Technology Transfer Center and Advocates for Human Potential, Inc.*

*At the time of publication, Elinore F. McCance-Katz served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of the Central East Mental Health Technology Transfer Center and Advocates for Human Potential, Inc., and do not reflect the official position of the Department of Health and Human Services (HHS), SAMHSA. No official support or endorsement of HHS, SAMHSA for the opinions described in this document is intended or should be inferred.*



<sup>i</sup> Morland, L. A., Hynes, A. K., Mackintosh, M. A., Resick, P. A., & Chard, K. M. (2011). Group cognitive processing therapy delivered to veterans via telehealth: A pilot cohort. *Journal of Traumatic Stress, 24*(4), 465–469.  
<https://doi.org/10.1002/jts.20661>; Mariano, T. Y., Wan, L., Edwards, R. R., & Jamison, R. N. (2019). Online teletherapy for chronic pain: A systematic review. *Journal of Telemedicine and Telecare*. Advance online publication.  
<https://doi.org/10.1177%2F1357633X19871746>;

Dunstan, D. A., & Tooth, S. M. (2012). Treatment via videoconferencing: A pilot study of delivery by clinical psychology trainees. *The Australian Journal of Rural Health, 20*(2), 88–94.  
<https://doi.org/10.1111/j.1440-1584.2012.01260.x>;

Ogden, P., & Goldstein, B. (2019). Sensorimotor psychotherapy from a distance. In H. Weinberg & A. Rolnick (Eds.), *Theory and practice of online therapy: Internet-delivered interventions for individuals, families, groups, and organizations* (pp 47–65). Routledge.  
<https://doi.org/10.4324/9781315545530>