



Online consultations

what to
know

and



where
to start

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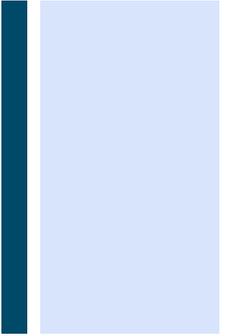
About the EFPA Project Group on eHealth

- 17 active members, from 15 countries & EFPSA (in alphabetical order)





What to expect?



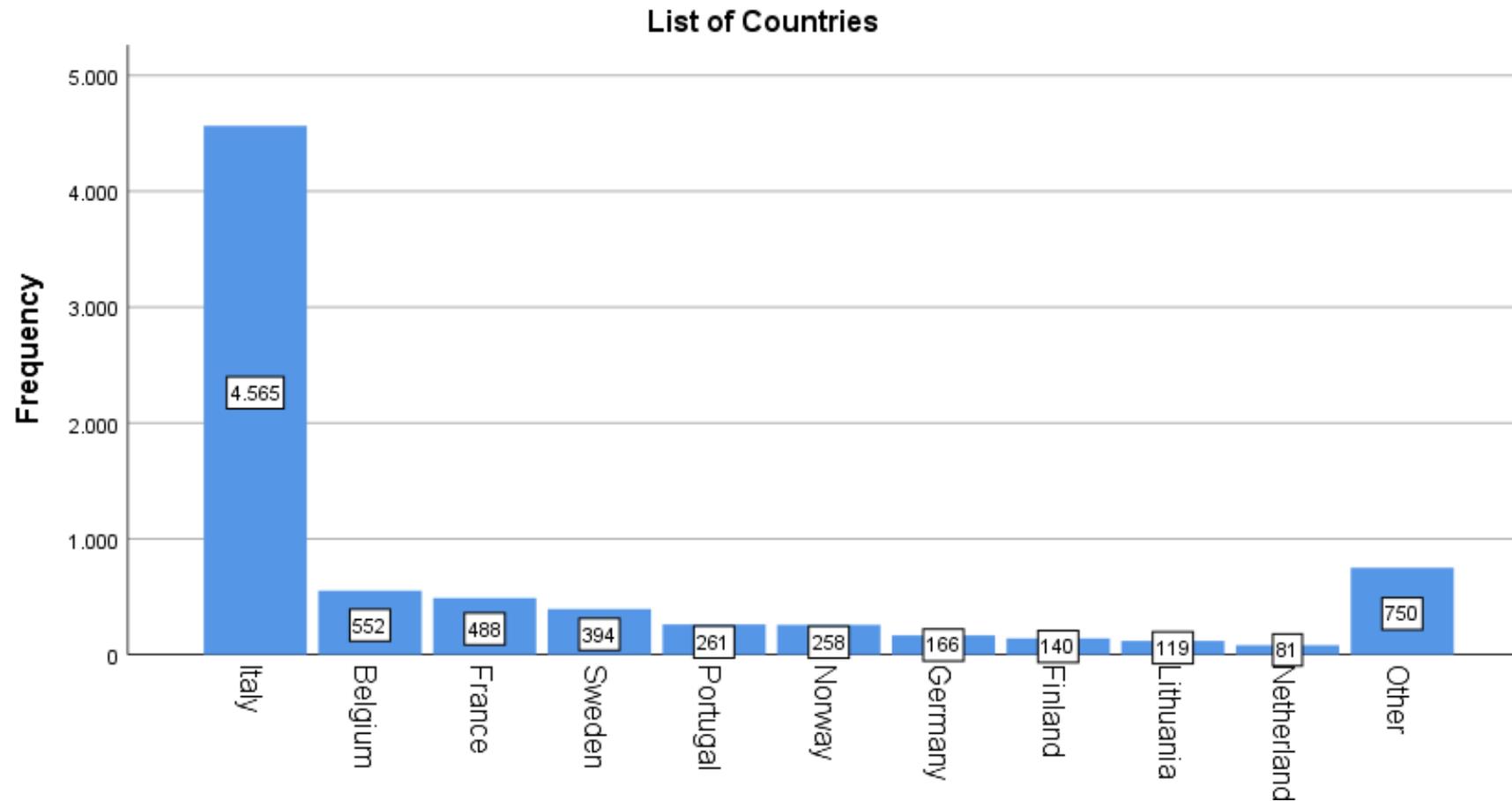
- COVID-19
- Acceptance of online consultations
- The benefits and pitfalls of online therapy
- How and what you need to get started with online therapy
- How to communicate online with your patients, plus concrete tips and tricks.
- Q&A



COVID-19 context

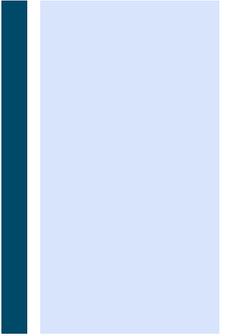


- Survey with 8858 respondents across EU and world





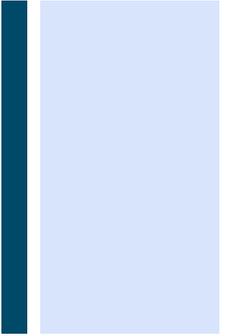
COVID-19 context



- 82% uses online consultations or intended to do so in near future
- For 66% of those who relied on online consultations, this was their first time
- Overall, 9% of all respondents has had some sort of training



Telepsychology



- Provision of psychological services using telecommunication technologies (APA, 2013)

- Telepsychology includes :
 - Written exchanges (chat, emails, SMS)
 - Voice exchanges (phone, VOIP, avatars)
 - Video-conference

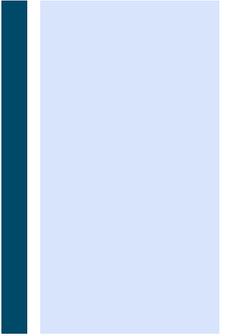


Remote embodied relationship





Framework in Telepsychology



- Deontological/Ethical aspects (especially about personal data protection)
- Methodological aspects (what kind of technology ?)
- Clinical aspects (indications-contraindications)
- Terminology (presence, telepresence, acceptance)



Some common questions from psychologists



- Are online consultations appropriate and effective for different target groups (e.g., different types of mental illness, different age groups)?
- **Are online consultations suitable for different elements or specific types of therapy?**
- How to get a stable & secure connection for online consultations?
- **Which software platforms can be appropriate and which ones are safe & GDPR proof?**
- **How to manage payments?**
- How can we increase acceptance and help our clients with using online consultations?
- **Can a therapeutic alliance develop online? And how can I promote connectivity and trust?**

For more specific information about your country, you can consult the website or contact details of your psychological association: <http://ehealth.efpa.eu/covid-19/faq-on-online-consultations/>



Can a therapeutic alliance develop online? And how can I promote connectivity and trust?



TIPS for alliance promotion in online consultation:

- You can promote trust by being very transparent in what you will be doing and what they can expect.
- It is important to let the client know in time when you are getting close to the end of the consultation so you can work towards a natural end of the conversation.
- Use of non-verbal communication:
 - You can exaggerate your facial expression a bit so that is more clear to the client.
 - You can state more explicitly what you see (or don't see).
 - If the room, microphone, and situation allows for it, you can ask participants to sit a bit further away from the camera so that you can see their whole body. This can help you read non-verbal signals (e.g., agitation) better.
 - Silences are experienced differently online as compared to face to face, so you might not want to let silences linger for too long.



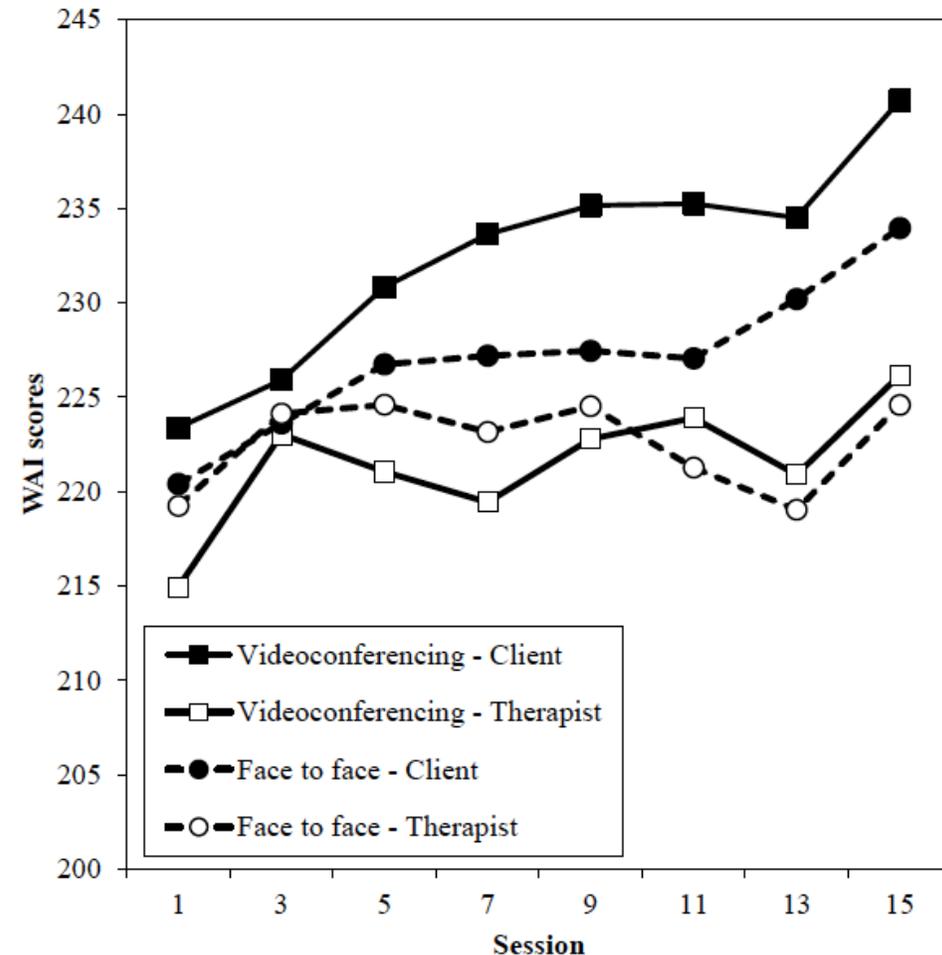
How do patients perceive therapeutical alliance?

Evidence indicates that clients report that the **therapeutic alliance is equivalent to face-to-face therapies** (Berger, 2015)

Therapists tend to hold negative beliefs about the use of VCP

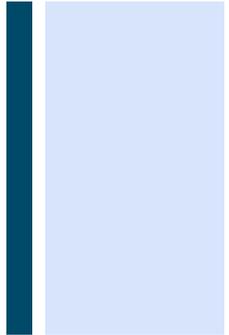
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Tip for therapists: trust the patient and the Online Consultation setting more





Which software platforms can be appropriate and which ones are safe & GDPR proof?



Under this Notice, covered health care providers may use popular applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, Zoom, or Skype, to provide telehealth without risk that OCR might seek to impose a penalty for noncompliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency. Providers are encouraged to notify patients that these third-party applications potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications.



RECOMMENDED



ACCEPTABLE



NOT RECOMMENDED



NOT RECOMMENDED



Mobile messaging

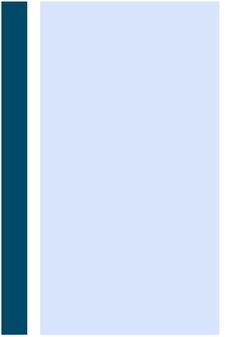
It is absolutely fine to use mobile messaging to communicate with colleagues and patients/service users as needed. It is also fine to use commercial, off-the-shelf applications such as WhatsApp and Telegram where there is no practical alternative and the benefits outweigh the risk.

The important thing, as always, is to consider what type of information you are sharing and with whom. And as much as possible limit the use of personal/confidential patient information.



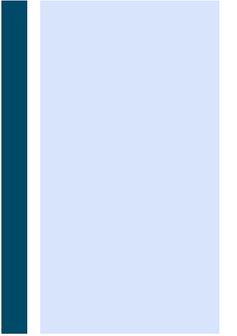
Are online consultations suitable for different elements or specific types of therapy?

- Yes!
- Allows for the use of technology in session (e.g., showing a video) that can be adapted based on the clients' developmental stage and needs
- Can utilize whiteboards to write or draw in, so that you can share information as if in session
- Sessions can be recorded for repeated viewing by the client when they need them (both have to agree first)
- Gives us a glimpse of patients life outside of the session and may provide useful information and may help shape the intervention



+ How to manage payments?

- Better to make it clear from the beginning how it will be done
- Probably better to have the client pay prior to the session
 - Electronic payment:
 - via bank transfers or to personal bank accounts
 - via credit cards e.g. Square, Strip ή Ivy Pay, Paypal, Revolut
 - Some platforms ask the client to store their information for continued use (inform the client and agree ahead of time).





Recommendations



Psychotherapists

- Acknowledge reluctance.
- Exert caution with vulnerable clients.
- Monitor progress and tailor treatment.
- Assure personal guidance for self-help.
- Avoid excessive burden.
- Seek sufficient continuous education.
- Opt for peer intervision & supervision.
- Have protocols available for crises.
- Be aware of applicable regulations.



Health services and regulatory agencies

- Evaluate routine care effectiveness.
- Create (inter)national guidelines.
- Clarify who is to be held responsible.
- Make intervention switching easy.
- Provide reimbursement.
- Set quality criteria for professionals.
- Provide adequate working conditions.
- Assure continuity of IT systems.



Developers

- Develop multidisciplinary.
- Tailor to the target population.
- Comply with legal regulations.
- Maintain ethical standards.
- Involve end users.
- Consider an evidence-based approach.
- Provide robust evaluation evidence.
- Account for adoption inequalities.





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