GUAM BEHAVIORAL HEALTH AND WE	LLNESS CENTER	
TITLE: Tele-Mental Health Services	POLICY NO: CL-AP-11	Page 1 of 3
RESPONSIBILITY: Clinical Services	AN TABLE TO THE PART OF THE PROPERTY OF THE PART OF TH	
APPROVED BY: Mclumil	DATE OF ORIGINAL APPROVAL:	
THERESA C. ARRIOLA, DIRECTOR	LAST REVIEWED/REVISED:	

PURPOSE:

To establish a standard operating procedure in conducting Tele Health services and provide a guideline to staff on mental health best practices in clinical videoconferencing.

POLICY:

- A. Guam Behavioral Health and Wellness Center is using information and communication technologies (tele mental health) to provide a range of behavioral health services as appropriate to its active consumers living on Guam that could not come to GBHWC for a face to face follow up. The following are criteria for the use of tele mental health;
 - 1. Tele mental health will only be provided to active current GBHWC consumers, needing follow up care, counseling and or medication management.
 - Behavioral health care providers, who are trained to conduct tele mental health, shall make the determination when to use tele mental health versus a face to face services.
 - 3. Based on the need, a support person, family member or caregiver at the site where the consumer is located shall be identified to function in the role of facilitator and emergency contact during a clinical videoconference.
 - Behavioral health care providers shall establish an emergency protocol with the consumer, and will have an open line for emergency contact number to call in case of emergency during clinical videoconferencing.
- B. In accordance with Guam Bureau of Health Care Financing Administration (BHCFA) policy 2020-05 for Medicaid and MIP programs during COVID 19 emergency declaration, GBHWC tele mental health can be provided via telephone and live chat modalities as allowed by BHCFA and deemed clinically appropriate by the provider.
- C. GBHWC's behavioral healthcare providers shall follow the same standard of care for traditional face to face encounter, maintaining the same level of professional and ethical discipline, clinical principles and guidelines in the delivery of care in tele mental health such as consent processes, patient autonomy, and privacy.
- D. An informed consent shall be obtained prior to providing tele mental health services; this could be either written or verbal if signing the Consent Form AD-PA-105.1 is not feasible prior to the encounter. Consent form outlines risk and benefits, privacy and confidentiality, prohibition of audio and video recording as well as photographing of consumers and providers. (reference Informed Consent Policy)
- E. Tele mental health rooms for videoconferencing shall be designated private for the duration of the service or video teleconference and no unauthorized access shall be permitted. Every precaution shall be utilized to ensure the privacy of the consult and the

confidentiality of the consumer. Consumer's permission shall be obtained for any other staff to be present during the session.

- F. GBHWC shall provide tele mental health best practices training to its behavioral health providers and peer support specialist as well as training on equipment; features, set up, use, maintenance, safety considerations, infection control, and troubleshooting prior to providing videoconferencing based mental health services.
- G. Documentation of each tele mental health encounter evaluation, consultation and prescribed treatment shall be thoroughly documented in the consumers' electronic medical records.

DEFINITIONS:

Interactive telecommunications system "means multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication between the patient and distant site provider. Telephones, facsimile machines, and electronic mail systems do not meet the definition of an interactive telecommunication system (42 CFR § 410.78 Telehealth services).

<u>Telehealth</u>: Refers to a broader scope of remote healthcare services that use electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include videoconferencing, the internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications (HealthIT, n.d.)

Tele Mental Health: refers specifically to the provision of mental health care remotely. Also known as videoconferencing-based mental health services that uses information and communication technologies to deliver mental health services. The use of technology for strictly informational purposes (e.g., website that provides information about programs and available services) is not considered providing services via the use of information and communication technologies. Tele mental health includes mental health assessment, treatment, education, monitoring, and collaboration.

<u>Facilitator</u>: any designated personnel that can provide assistance with accessing the tele mental health services from remote location

Remote site: Identified where consumer is located accessing tele mental health services provided by GBHWC.

Originating site: Where tele mental health originates and identified as GBHWC tele mental health room.

<u>Behavioral Health Care Providers</u>: Include Psychiatrist, Psychologist, Social Workers, Counselors, Psychiatric Nurse Practitioner, Psychiatric Nurse, and Care Coordinators.

<u>Peer Support Specialist:</u> These are individuals who have lived experience with a mental health condition or substance use disorder, trained, certified and prepared to assist with recovery by

helping a consumer set goals and develop strengths. They provide support mentoring and guidance.

PROCEDURE:

- 1. Prior to start of each session all necessary technology and or equipment shall be check if functioning properly at GBHWC originating site and remote site.
- 2. Equipment that touches any part of the body such as headphones, and microphone is properly sanitized between each use at the originating and remote site.
- 3. An emergency contact person (e.g. caregiver, family member) at the remote site where the consumer is located shall be identified to function as facilitator if necessary prior to start of the video teleconference session.
- 4. Facilitator in the remote site shall introduce the consumer to be seen, provide relevant clinical data and vital signs pertinent to the encounter if available and or appropriate, prior to the start of the session.
- 5. Once the consumer is in the telehealth room, participants in the session shall be identified, those at originating GBHWC site and remote site. The clinical provider shall introduce him/herself, followed by the consumer and other participants or facilitator in the room prior to each session.
- 6. In the event of an emergency or crisis, during videoconferencing, telehealth staff shall follow standard crisis protocol, and shall call the facilitator/emergency contact person.
- 7. Any medication prescribed by the Psychiatrist shall be sent to GBHWC pharmacy and should be picked up by consumer.
- 8. After each session the clinical provider shall write the progress notes, document the encounter including medication prescribed and recommendation in the electronic medical record (AWARDS).
- 9. Any special instruction to the consumer pertaining to medication shall be relayed to the care giver in the remote site if appropriate and/or necessary.

REFERENCE(S):

- 42 CFR section 410.78. (n.d.). CMS Telehealth services. Retrieved from https://www.law.cornell.edu/cfr/text/42/410.78
- American Telemedicine Association, American Psychiatric Association. (2018). Best practice in videoconferencing-based telemental health. American Psychiatric Association.
- Bureau of Healthcare Financing Administration. (n.d.). BHCFA policy no 2020-05: Telehealth claims review and processing policy in response to emergency declaration due to the novel corona virus (COVID19). Government of Guam Department of Public Health and Social Services.
- CARF International. (2020). *Behavioral health standards manual 2020.* Tucson: Commission on Accreditation of Rehabilitation Facilities.
- HealthIT. (n.d.). What is telehealth? How is telehealth different form telemedicine. Retrieved from Office of the National Coordinator for Health Information Technology: https://www.healthit.gov/faq/what-telehealth-how-telehealth-different-telemedicine

ATTACHMENT(S):

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REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

Policy Title: Tele-Mental Health Services Policy

Policy No: CL-AP-11

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