Coping with COVID-19

CONDUCTING THE TELEHEALTH SESSION

Life has changed dramatically for all of us since the emergence of COVID-19. To continue serving the most vulnerable people during this very challenging time, ICL has shifted services to telehealth sessions – by phone or video – wherever possible.
TIPS AND STRATEGIES

We wanted to address frequently asked questions and common elements involved in conducting sessions with clients by phone or video.

But as always, your patience, flexibility, and professional integrity will be your best guide.
THE TELEHEALTH SESSIONS
Basic Principles and Guidelines

• Patience, honesty and flexibility are key.
• Make clear you understand clients’ fears and hesitation.
• Acknowledge this will feel different, for some it may be initially awkward.
• Some people will be more comfortable with this use of technology.
• For others this may be the first time using a laptop or computer or doing a video call.
• Culture might play a role in how your client reacts to you on a phone or video session.
• Use supervision to explore any resistance to using this new model – your client’s or your own.
• Keep in mind the importance of goal setting and of always providing a sense of hope.
**TELEHEALTH TIPS:**
**SCHEDULING THE SESSION**

Make sure the person is able to do telehealth (working phone, internet access, comfortable with technology).

A session will typically be 30 to 60 minutes depending on client needs. Find a mutually agreeable time and advise on standing policies re cancellation or rescheduling.

Explain how a phone or video call session will work and anything they can do ahead of time, including finding a quiet place to have the session with as few distractions as possible.

You may want to ask your client to set an agenda for the session, perhaps by writing ahead of time things they want to talk about such as medications, family relations, even hopes and wishes.

**TELEHEALTH TIPS:**
**PREPARING FOR THE CALL**

For all telehealth sessions:
- Find a quiet and private space and maintain your professionalism at all times.
- Limit distractions i.e. put phone on silent, close other computer programs.
- Make sure you have client’s contact information.
- Always be guided by your professional ethics even though you are in a non-traditional situation.

For video calls:
- Make sure your audio and video work prior to the start of the session.
- Observe how you will appear on the other person’s screen; be aware of the background.
- Have a back-up plan if video is not working (e.g. switch to phone session).
TELEHEALTH TIPS: THE CALL

- Obtain verbal consent for a telehealth session and document consent in the record.

- Respond to any concerns about security (i.e. session is not being recorded; session will not be searchable on Internet).

- Check in on audio and visual quality; mutually agree to speak up if quality becomes poor.

- Acknowledge that the session may feel different. It may be necessary to build a different sense of trust.

- During a video session, you may be looking into your client’s home – be aware of how that may effect the way you work together.
THE CALL: ESTABLISHING TRUST AND A COMFORT LEVEL

Telehealth sessions at this time of COVID-19 will require specific considerations. It may be more important than usual to allow your client to vent their feelings of powerlessness and loss of control at this time. Empathize with them regarding the situation while trying to give practical advice – talk about social distancing and other things they can do to feel more in control.

• Be present. If taking notes during the session, do so discreetly (e.g. don’t type loudly).
• Assure your client this is a safe environment; remind them of the guarantee of confidentiality.
• Reflect back what you hear, that is especially important here.
• On video session, pay attention to non-verbal cues and facial expressions; when appropriate don’t hesitate to probe.
• Even in a telehealth session, silence can be a valuable tool, leaving space for the person to connect to what they are feeling.
• Use motivational interviewing by asking open-ended questions.
• You might ask about risk factors that may have changed due to COVID-19.
• Use ICL’s trauma and recovery-oriented principles – you may be surprised how willing individuals might be to open up.
• To enhance the comfort level, you might engage in talk about their interests, i.e. religious or spiritual, movies or television.
• You will no doubt discuss the current crisis – be understanding of their concerns and that you have concerns as well.
• Maintain your objectivity in the face of someone who may have a lot of rage, sadness or disorganized thoughts.
TELEHEALTH TIPS: CONCLUDING THE SESSION

- Be mindful of how you end the session and what your client may need from you.
- Offer a five-minute warning that the session is nearing the end.
- Wrap-up and summarize the session; it may be helpful to set clear action steps for follow up.
- Record the support the person needs before the next session (e.g. reinforcement for safety planning or case management services).
- Make a plan for the next time you will connect.
Conducting a session by phone or video call will no doubt raise questions and concerns that will take time to resolve.

At the same time, working this way may open up opportunities for growth and learning for you and your client and a chance to explore how as a clinician you might use telehealth to the greatest advantage.

So take the opportunity to bring concerns that come up in telehealth sessions to your supervision.

Examples of subjects that could be raised:

• Reflect on your own feelings about telehealth, that you might initially be uncomfortable with it.

• Be aware of your own fears and concerns about COVID-19 and how those may influence your sessions.
DEALING WITH SPECIAL CIRCUMSTANCES part 1

As in any treatment session, you may pick up on signs of distress. If you’re aware your client may be at high risk for any dangerous behavior including suicide ideations, make sure you have the information you’ll need to contact police or EMS including the client’s current address and phone number. Look out for non-verbal clues of distress – if your client is acting differently or their appearance has changed; and verbal clues such as use of dark language.

Intervention with clients at risk:

• For a client at imminent risk, call 911
• For those not at imminent risk, work collaboratively to create a safety plan:
  • Ensure that the client has a copy of the safety plan: obtain permission to email or text it to the client. For clients with a smart phone, the safety plan app is a great resource: [https://apps.apple.com/us/app/suicide-safety-plan/id1003891579](https://apps.apple.com/us/app/suicide-safety-plan/id1003891579)
  • Identify triggers, coping strategies, social supports, professional help, methods for making their environment safe.
• Try to identify a social support in the home or in the community who can be contacted to support the client’s safety during a crisis.
DEALING WITH SPECIAL CIRCUMSTANCES part 2

• Assessing and managing suicidal risk via telehealth is very similar to the in-person process:
  • Ask directly about recent suicidal ideation and behaviors.
  • For clients expressing suicidal ideation, ask about plan, intent, and means.
  • The Columbia-Suicide Severity Rating Scale (C-SSRS) Screener provides a good template for this conversation: https://cssrs.columbia.edu/the-columbia-scale-c-ssrs/cssrs-for-communities-and-healthcare/#filter=.general-use.english
  • Identify protective factors that can be strengthened (connection to others, coping skills, personal, cultural, or spiritual beliefs).
  • Try to identify a social support in the home or in the community who can be contacted to support the client’s safety during a crisis.

• General resources for clients at risk:
  • NYC Well (free, confidential, crisis intervention, information and referral) https://nycwell.cityofnewyork.us/en/ 888-692-9355
  • Mobile Crisis (in-person assessment for clients experiencing a psychiatric crisis who are unable or unwilling to access help in the community) https://nycwell.cityofnewyork.us/en/providers/mct-referral/
  • National Suicide Prevention Lifeline (free, confidential crisis support) https://suicidepreventionlifeline.org/ 800-273-8255
  • The Trevor Project (free, confidential support for LGBTQ youth) https://www.thetrevorproject.org 866-488-7386
ABOUT COVID-19: DISCUSSING WITH YOUR CLIENT

Review rules for social distancing.

• Limit close contact with others as much as possible (at least 6 feet).
• Only leave your home for essential travel (food, medicine - consider delivery services).
• Do not gather in groups.
• If you need to leave your home, cover your nose and mouth with a cloth face cover (bandana, scarf).
• Clean hands often with soap and water or alcohol-based hand sanitizer.
• Avoid touching your eyes, nose, or mouth.
• Cover your nose and mouth with your bent elbow or a tissue when you cough or sneeze.

Significant concerns related to health and safety around COVID-19 may well come up in your session.

• Go over signs and symptoms of COVID-19: Shortness of breath; cough; fatigue; fever (ask if have a thermometer); dizziness; loss of appetite; body aches; chills.
• Urge clients to speak to their primary care doctor if they have persistent symptoms.
• Confirm that your client knows how to reach the local hospital, clinic, and/or medical professional (PCP) to get appropriate support and care.
• Make sure your client knows when to use 911 for an emergency.
At ICL, self-care is always of paramount importance

The situation we find ourselves in today is clearly unprecedented. As clinicians, as human beings, as people who others count on in so many ways, living with COVID-19 puts enormous pressure on all of us. That’s why it is absolutely critical to remember to take care of yourself at this time – physically, mentally, and spiritually – so that we can best meet the needs of our clients and all of the people we love and care about.

We want to encourage you to use the many tools available for managing stress and sometimes overwhelming emotions that as we know, if unattended, can lead to greater despair, even hopelessness.
Find ways to take care of yourself

- Mindfulness, mediation or yoga can help – choose from many zoom classes now offered online.
- Call a friend, maybe someone you haven’t been in touch with for awhile.
- Watch a silly movie.
- Cook a delicious meal.
- Bring laughter into your life – it IS the best medicine.
- For a confidential session with someone from our employee assistance program, CCA@YourService is available 24/7.
- And stay in touch with your colleagues at ICL. We are here for you.

Look for other self-care ideas on Starnet, the ICL intranet https://iclinc.sharepoint.com/sites/ICLS StarNet/SitePages/Wellness.aspx
ICL helps people living with mental illness, substance use and developmental disabilities lead healthier and more fulfilling lives. Our services are built on four-pillars of care – person-centered, trauma-informed, recovery-oriented, and an integrated health model. We break through traditional silos of service and look at the whole person and their full range of health and behavioral health needs.

Through our innovative residential and community-based services in some 100+ programs across the city, we provide people with the support to be better, feel better and live better.

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