

PURPOSE

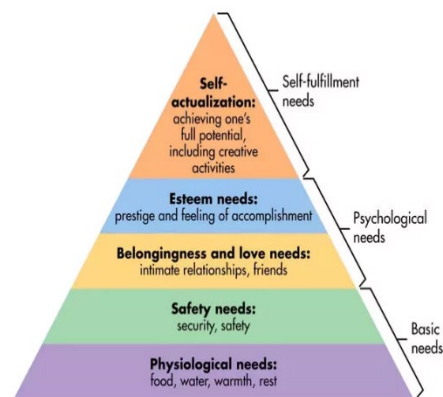
The purpose of this document is to offer general guidance and possibly augment existing practices related to telehealth in lieu of in-person home visiting services. This guidance includes telehealth definition, information about, participant enrollment using telehealth, considerations for screening, consideration of federal and local regulations and self-care strategies. The increased need for social distancing has created the necessity to interact in creative ways using different modalities. Telehealth use has been increasing and modalities differ. Telehealth includes, but is not limited to, videoconferencing, telephone, text and email. The pandemic has created the need to maintain connection while delivering vital services that were traditionally delivered in the home.

The Health Resources Services Administration (HRSA) defines telehealth as “the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration”.

As the use of telehealth increases, establishing and maintaining person-to-person connection is the primary bridge for continuing to engage program participants. Delivering support through telehealth can compromise that connection and consequently the relationship. Deep connection creates the opportunity for empathy, respect and a shared commitment. Therefore, it is critical in all interactions, especially when engaging in telehealth, to keep in mind cultural norms, verbal and nonverbal cues, cadence, and management of silence.

Families will not be able to engage in a meaningful telehealth interaction if Maslow’s hierarchy of human needs are deficient, missing or in jeopardy. See graphic of Maslow’s Hierarchy below.

Maslow's Hierarchy of Needs



[Saul McLeod](#), updated March 20, 2020

Telehealth can serve as the means to identify and address these needs. As part of establishing a connection, it is essential to assess families' needs prior to attempting to engage in telehealth visits to share program information. Having this baseline background information will assist with planning a telehealth visit which ultimately supports program goals.

PURPOSE OF TELEHEALTH CONTACT

In planning for telehealth interactions/communications, the objective of the interaction is important. Crucial questions to ask include:

- Deliver program content?
- Conduct care coordination activities?
- Offer psychosocial support?

Providers need to understand the objective of the interaction to determine if program requirements and participant needs are being satisfied. The delivery and design of telehealth should be based on the intent or outcome, which means the duration and approach to delivering support should be determined by the intent of the interaction. For instance, if care coordination is the intent, providers should design the care coordination for telehealth based on the federal and local policies and/or regulations which impact billing. However, if the intent is to deliver program content, providers should explore and determine what content is required based on individual model guidance.

ASSESSMENT

Assessment is the process by which information is gathered and a course of action is determined. Without this essential first step the most urgent and primary needs may not be discovered or addressed. This effort applies to both the home visitor who may be unaccustomed to providing home visits via telehealth and the participant who needs services. Assessments should follow your agency's policies and procedures

1. Staff Assessment
 - Determine if there a knowledge deficit related to conducting telehealth visits?
 - Determine what skills are needed and/or what skills require additional development
 - Determine the most efficient method to assess skill and provide professional development and support in a consistent approach
 - Determine the best modality to offer professional development which include but is not limited to the following:

- Videoconferencing
 - Webinar
 - 1:1 support
 - Peer coaching
 - Shadowing peers on telehealth interactions/communications
2. Family Assessment of current telehealth interaction/communication
- Determine what is most important for the client/family in the current telehealth interaction/communication. Consider the following as a part of your assessment:
 - Screen for IPV, mental health, child abuse and neglect, etc.
 - Type of psychosocial support, if needed
 - Program content, what is most appropriate for this contact and what can be emailed, mailed or sent by text
 - Care Coordination, is there a need and are services available?

TELEHEALTH SCREENING

Screening is an important part of the home visitor's assessment. As assessment may be limited to only what the home visitor hears during a telephonic interaction, it is important to remember that ordinarily most assessments are completed by speaking with clients. In a telehealth visit this should be no different. Forms used for screening purposes can still be completed via telehealth. These forms can include but are not limited to postpartum depression and general health screenings. Consult directly with your local agencies' policies and procedures for information related to screening.

TELEHEALTH ENROLLMENT

Maintaining access to services is essential during this pandemic. Telehealth provides the opportunity to continue to enroll new families and provide education, resources and support. Enrollments are the first opportunity for the client to meet the home visitor and for the home visitor to initiate the relationship.

During the enrollment visit, the home visitor learns about the family's needs and explains how the program can benefit the family, before enrolling. If telehealth enrollments are allowable by the model, please refer to model guidance and your agency's policies and procedures. Enrolling clients via telehealth can present its own challenges, however the following a few tips the home visitor can enroll clients via telehealth successfully.

Tips:

- Call potential participants the day the referral is received, if possible, to discuss your program and the support being offered. Be prepared to answer any questions the client or family may have regarding this support
- Offer Facetime or other video conferencing for “intro” visit, which is done after initial call to referral. It's nice to put a name with a face
- Offer to send picture of the new home visitor if Facetime or other video conferencing is not an option
- Be sure to explain that your program primarily offers support in the home. Telehealth is temporarily used during the COVID-19 pandemic to keep everyone safe
- Explain to the potential enrollee about the importance of social distancing, explaining how visits will be done via phone/facetime, zoom, etc.
- Explain benefit of having a home visitor to gain current updates during the COVID-19 pandemic, along with addressing other concerns that she might have
- Follow your agency policies and procedures regarding consent for participation and send any hard copy program content that is appropriate
- Remember that offering flexibility is important, especially during this time
- Remember to follow-up with potential referral sources and let them know that your agency is continuing to enroll clients during this time.
- Thank referral source for referrals

TELEHEALTH CONSENT

“Informed consent is the process by which a health care service provider discloses appropriate information (i.e., procedures, risks, benefits, etc.) to a client/patient so that the client/patient may make a voluntary choice to accept or refuse participation in the treatment or service. All the standard components of informed consent...used in traditional care services should be included when conducting telehealth-based services. Providers should become familiar with applicable federal and state law as well as your agency's local policies regarding telehealth”. (Luxton, D.D., Washington State Telehealth Implementation Guidebook. Washington State Dept. Of Social and Health Services)

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

HIPAA regulations protect health information and provides guidance and federal regulations to ensure adherence. Because of the current and pervasive pandemic, regulations have been relaxed to support service delivery. Below is a link and an excerpt of the Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency which is listed on the U.S. Department of Health and Human Services (HHS) website.

- Effective immediately [HHS] will exercise its enforcement discretion and will waive potential penalties for HIPAA violations against health care providers that serve patients through everyday communications technologies during the COVID-19 nationwide public health emergency.
- “We are empowering medical providers to serve patients wherever they are during this national public health emergency. We are especially concerned about reaching those most at risk, including older persons and persons with disabilities.” – Roger Severino, OCR Director.
- While the use of secure telecommunication methods remains well-advised and appropriate, US Dept. of Health and Human Services has announced that HIPAA requirements for security will not be enforced against regulated professionals during the COVID-19 response. <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>.

HHS has also provided a [comprehensive list of vendors](#) that provide HIPAA-compliant video communication products:

- Skype for Business / Microsoft Teams
- Updox
- VSee
- Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet
- Cisco Webex Meetings / Webex Teams
- Amazon Chime
- GoToMeeting

TELEHEALTH POLICIES AND PROCEDURES

As providers develop or enhance policies and procedures related to telehealth, please consider including the following information:

- Federal and local guidance and/or regulations
- Duration of the telehealth contact
- Billing requirements
- Frequency of telehealth contact
- Program content (what is most important to cover during the contact)
- Components of care coordination
- Telehealth modality/platform and regulations related to telephone, videoconferencing, text, etc.

SUBJECT MATTER EXPERTISE

In times of crisis, program participants and their families may experience increased stress and their coping skills may be insufficient to allow them to embrace and support healthy interactions. In the worst case, this may result in an increase in Intimate Partner Violence (IPV), increased incidences of child abuse and/or neglect and increased symptoms of mental illness.

Usually, the home visitor has the opportunity for thorough in person assessments and/or screening of IPV, depression and/or anxiety. Telehealth encounters may create barriers in observing nonverbal cues. Regardless, providers should enlist the support of subject matter experts, particularly in the areas of intimate partner violence, mental health, as well as child abuse and/or neglect. The individual and collective guidance of these experts is essential in guiding home visitors through this difficult time.

SELF-CARE FOR HOME VISITORS

“Self-care is important to maintain a healthy relationship with yourself. Developing a self-care plan/routine can help enhance health and wellbeing, manage stress and maintain professionalism”. (*Developing a self-care-plan, Resources for mental health professionals. Reach Out Schools* <https://schools.au.reachout.com/articles/developing-a-self-care-plan>)

- If working from home:
 - Create a new morning ritual and continue to get up and dressed each morning
 - Establish a start and end time. Be sure to include breaks during the day
 - Identify a formal way to end your day. Bring closure and disconnect from work
- Be kind to yourself and others around you
- Practice Gratitude -identify one thing at the beginning and end of the day to be grateful for
- Monitor how you are feeling emotionally and physically
- Reach out to a team members and supervisor for support
- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body. Take deep breaths, stretch, or meditate. [Try to eat healthy, well-balanced meals](#), [exercise regularly](#), [get plenty of sleep](#), and [avoid alcohol](#)
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling

Home visitors encounter families in different social, emotional and physical circumstances daily. Weekly reflective supervision allows the home visitor the opportunity to reflect on thoughts/feelings that may arise as a result of working with families in those varied situations. In addition, home visitors have the opportunity to request additional support. Home visitors are accustomed to working in the field daily. Working from home and providing telehealth visits can be isolating and could trigger anxiety. This situation elevates the need for the home visitor to continue to have protected time to reflect with the supervisor.

SUMMARY

Every telehealth interaction should seek to assess, plan, coordinate care and offer support. Fostering connections is essential to ensure families are retained and receive the support needed.

Other resources are available. Examples include, but are not limited to: www.CDC.gov, www.Coronavirus.gov, www.WHO.int and your local government agencies.