

**West Virginia University**  
**Counseling and Psychological Services**  
**Information about Distance Counseling Services**

We are pleased to have the opportunity to serve you. The Carruth Center for Psychological and Psychiatric Services (CCPPS) provides confidential counseling, psychiatric and case management support for currently enrolled students.

**Distance Counseling**

So that we better serve our students in the context of the COVID-19 health crisis, CCPPS will temporarily provide distance counseling via telephone or secure video conferencing to currently enrolled WVU students who meet the eligibility criteria for distance counseling services. Due to professional licensing laws, CCPPS counselors may only provide ongoing therapy to those who are currently in the state of WV (and in states that have changed their related licensing laws). Additionally, this service is available to students assessed as being appropriate for this form of counseling. If a student is not eligible for this form of counseling, CCPPS counselors will provide referrals to appropriate services.

In order to begin services with CCPPS: please call 304-293-4431 to schedule an initial appointment. **You will briefly speak with a clinician who will help to determine appropriate services and provide more information about your care.**

The initial consultation will be provided via phone and will enable a clinician to better understand your needs to connect you with appropriate services. They will also provide you with guidance in navigating your presenting concerns. You may be referred to telehealth counseling or other services in your home community. If telehealth counseling at CCPPS is identified as the best clinical option, you will be scheduled with a CCPPS counselor.

Telehealth may initially start with telephone visits. It will be important for you to discuss the confidentiality limitations that are inherent in any intervention that takes place on the phone and to agree to the risks that these may pose. Most clinicians and students will choose to transition to virtual sessions utilizing Zoom. During the initial Zoom session, you will choose a password for all future sessions, and will enter this into Zoom Healthcare to enter the meeting. This process protects you from another person posing as you.

Telehealth sessions may initially feel a bit different than in-person sessions. Video communication may lack some visual or audio cues that on occasion may result in misunderstanding. Should this happen, it is important to assume that your counselor has positive regard for you, and to check out your assumptions with your counselor. This will reduce any unnecessary feelings of discomfort.

**Video conferencing counseling sessions are held via Zoom Healthcare, a secure and confidential video conferencing platform. You will sign in with your Zoom app, but the therapist's Zoom enhances your security and confidentiality. It is recommended that you sign on to your account at least 5 minutes prior to your session start time. You are responsible for initiating the connection with CCPPS via the provided software link and your identified password at the time of your session.**

### **Limitations of Distance Counseling**

Distance counseling should not be viewed as a substitute for face-to-face counseling or medication by a physician. It is an alternative form of counseling with some differences from traditional counseling. For example:

- Due to the use of technology, video counseling may have disruptions in service and quality of service.
- If you are having a crisis, acute psychosis, or suicidal or homicidal thoughts, video counseling might not be appropriate for your needs.

### **Emergency Management for Distance Counseling**

So that CCPPS is able to get you help in the case of an emergency and for your safety, the following measures are important and necessary:

- Your counselor will need to know the location/address in which you will consistently be during counseling sessions and will need to know if this location changes. They will ask for your location during every session.
- Your counselor will request that you identify someone, whom you trust, to give your counselor permission to contact should a situation occur in which your counselor believes you to be at risk. You, and/or your counselor, will verify that this emergency contact person is able and willing to go to your location in the event of an emergency, and if your counselor deems necessary, call 911 and/or transport you to a hospital. You will also provide the name/location of the nearest Hospital Emergency Room.

### **Backup Plan in Case of Technology Failure**

- The most reliable backup is a phone. Therefore, it is recommended that you always have a phone available, and that you provide your counselor with your phone number.
- If you get disconnected from a video conferencing session, re-start the session. If you are unable to reconnect within ten minutes, please call your counselor.

### **Scope of Service and Eligibility**

CCPPS provides short term and crisis counseling services for all eligible students, without regard to race, color, religion, sex, gender, sexual orientation, national origin, disability, or veteran status. If it is determined by the clinical staff that an individual's needs exceed the scope of service or expertise available at CCPPS or that your needs cannot be adequately met by participating in distance counseling, we will assist you to identify an appropriate referral to meet your needs. CCPPS does not pay the costs of therapy or community resources/treatment services to which you may be referred but will help you navigate the insurance coverage process.

## **Confidentiality**

Confidentiality is essential to your counseling progress. Our counselors are clinicians who are ethically and legally bound to maintain your confidentiality (except for the exceptions provided in the informed consent). A written and/or electronic record (date, time, nature of meeting) of your contacts with CCPPS will be maintained in a secure manner.

All telehealth sessions will be provided behind a closed door. All video conferencing correspondences will occur through Zoom Healthcare, which is encrypted to the federal standard. To schedule a THS triage appointment or for questions give us a call at 304-293-4431.

## **Psychologist**

### **TELE-Assessing Risk Options:**

#### **Active Suicidal Ideation**

- *Are you having any thoughts of suicide or thoughts of hurting yourself?*

#### **Psychiatric hospitalization in the last 18 months**

- *Have you been hospitalized for a psychiatric emergency in the last 18 months?*

#### **Thoughts of harming others within the past two weeks?**

- *Have you had thoughts of harming others within the past two weeks?*

#### **Previous or current diagnosis of moderate to severe depression or Bipolar disorder?**

- *Have you ever been diagnosed with bipolar disorder or severe depression?*

#### **Previous or current diagnosis of moderate to severe eating disorder?**

- *Are currently experiencing an eating disorder?*

#### **Alcohol or drug use?**

- *Describe your current use of substances.*
- *What substances have you used in the past 2weeks? Last use?*

#### **Current hallucinations or delusions?**

- *Are you seeing things that no one else can see? Are you hearing things that no one else can hear? Or are you having difficulty staying in touch with reality?*

#### **Appropriate technology?**

- *Do you have a computer or device with reliable internet access that has the capability of using Zoom?*

#### **Appropriate Location?**

- *Do you have a safe and private location available for online therapy sessions?*

#### **Personal comfort?**

- *Are you comfortable with using Zoom as a way to receive counseling? Will you be able to stay present and mindful for the duration of your session?*

If a client is experiencing a psychological emergency and contacts a CCPPS clinician or front desk:

1. Obtain client's information such as; name, student ID, current location, emergency contact, phone number (if disconnected)
2. **Assess level of risk** through Zoom or over the phone. Specifically assess plan, access to means, and intent. You may also ask about history and assess for protective factors.
3. **Make a plan.** Use the table below as guidance.

Risk level	Counselor response
Passive risk, hospitalization not recommended	<ul style="list-style-type: none"> <li>✓ Create a plan for safety and identify resources in the event current risk level changes</li> <li>✓ Provide the client with off-campus resources, crisis phone or text numbers</li> <li>✓ Schedule a check-in or follow-up</li> </ul>
Active risk, voluntary hospitalization	<ul style="list-style-type: none"> <li>✓ Instruct the client to go to nearest emergency room and confirm with them where they intend to go. Have them confirm with you once they arrive</li> <li>✓ Verify means for transport to hospital</li> <li>✓ Make a plan to notify emergency contact, someone for support</li> <li>✓ Make a plan for follow-up next day, verify arrival at hospital</li> <li>✓ Schedule in-person follow-up if possible</li> <li>✓ With their verbal assent call the hospital and provide clinical information</li> </ul>
Active risk, does not want hospital	<ul style="list-style-type: none"> <li>✓ <b><u>Consult Psychiatry or Clinical Director</u></b></li> <li>✓ If imminent danger, inform them that you may contact their emergency contact; they may also provide a different contact as long as it is someone who can be responsible for them (e.g. not a roommate)</li> <li>✓ Consider contacting the emergency contact and notify them of concern; offer education/resources if appropriate</li> <li>✓ Notify Police if level of concern requires wellness check</li> <li>✓ Evaluate need for Mental Hygiene Hearing</li> <li>✓ Make a plan for follow-up next day (schedule specific time)</li> <li>✓ Schedule in-person follow-up if possible</li> </ul>

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## V. THS Triage: Protocol or Client Fitness for Distance Counseling/TeleHealth Counseling

Counselor reviews Distance Counseling Session Checklist to assess client’s suitability for current session and to verify emergency information.

**Level of risk:**

YES/NO	1. Is the client actively suicidal, or have a significant risk of becoming so?
YES/NO	2. Is the client actively homicidal, or have a significant risk of becoming so?
YES/NO	3. Does the client report severe major depression or bipolar disorder?
YES/NO	4. Does the client report moderate to severe alcohol or drug abuse?
YES/NO	5. Does the client report a severe eating disorder?
YES/NO	6. Does the client have a history of repeated “acute” crises occurring monthly or more frequently
YES/NO	7. Has the client had a psychiatric hospitalization in the last year?
YES/NO	8. Has the client demonstrated or experienced psychotic processing in the last year that might interfere with the telehealth process?
YES/NO	9. Does the client have delusions about technology/electronics, or have a significant risk of developing them?
YES/NO	10. Is the client willing to identify an appropriate support person, including their location and phone number?
YES/NO	11. Is the counselor competent in addressing the client’s needs/goals via telehealth services?
YES/NO	12. Is the client a current victim of domestic abuse?

YES/NO	13. Have the risks of telemental health services in domestic abuse situations, and the options of in-person counseling been discussed with the potential client?
YES/NO	14. Has it been determined that telemental health counseling is the best option for the client, or is the client unwilling or unable to seek in-person counseling?

**Technology:** Questions to ask the client

*When using video conferencing*

YES/NO	1. Do you have a computer/device with internet access and that has the capability to use ZOOM HEALTHCARE?
YES/NO	2. Do you have a location to receive telehealth counseling that allows for confidentiality?
YES/NO	3. We use ZOOM HEALTHCARE for online counseling. You will receive a link via your email for each appointment that you will use to access the meeting for our appointment. It is no cost, but does require internet access to link to the video conference. Are you comfortable with trying to use this technology?
YES/NO	4. There is the potential for technology breakdowns and interruptions. Can we plan for and prepare to be flexible about these limitations?

*When providing counseling via the phone:*

YES/NO	1. Do you have a location to receive telehealth counseling that allows for confidentiality?
YES/NO	2. Are you comfortable with using the phone as a means of receiving counseling?
YES/NO	3. You will receive a phone number to call for the appointment. Are you comfortable with this?

**Region:**

YES/NO	Will you be in the state of WV while receiving counseling?
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## **VII. CCPPS Telehealth Distance Counseling Services Session Considerations & Checklist**

### **First Session**

- **Confirm identity (esp. for new clients) - document**
- **Supervision Status**
- **Confirm Geographic Location**
  - Where are you video-conferencing from?
- Ask if anyone else is present? All individuals present for the virtual visit must be within view of the camera so the clinician is aware of who is participating.
- Confirm that nobody will record the session without permission.
- Turn off all apps and notifications on your computer or smartphone. Ask client to do the same.

### **Confidentiality and safety**

- Are in a confidential space?
- Are you in a safe space?

### **Emergency Contact**

- You identified \_\_\_\_\_ as your emergency contact in your consent form. Does that individual live in \_\_\_? Are they aware that you've identified them as your emergency contact?
  - Discuss importance of making their emergency contact aware of this designation
  - Discuss safety measures
- When you will contact their emergency contact, what you will say, and why
- Discuss the potential risks/benefits of telehealth sessions with the client
- Discuss expectations for sessions (appropriate location and attire)
- Discuss backup communication plan if internet fails
- Discuss emergency plans
  - Emergency services available in client's area
  - What modes of transportation to emergency services does client have for themselves?

### **Subsequent Sessions**

#### **Location, confidentiality and safety**

- Geographic Location— Where are you video/tele-conferencing from?
- Are you in a safe space?
- Are in a confidential space?
- Document client's location, confirmation of safety and confidential in every session note

#### **Document**

Document client responses/questions/concerns to above as informed consent

**To be considered at the initial distance counseling session and reviewed on an ongoing basis with clients**

Yes No	Contact number for client for this session: <i>Same as last session? If no, list here:</i>
Yes No	Physical address/location of client for this session, including county (In case emergency management resources are required) <i>Same as last session?</i> <i>If no, update here:</i>
Yes No	Emergency contact person and phone number for this session: <i>Same as last session?</i> <i>If no, update here:</i>
Yes No	Alternate means of communication in case Zoom Healthcare call drops or is unavailable: <i>Same as last session?</i> Phone number: Other:
Client / Counselor	In case of technology failure, (if the Zoom Healthcare meeting is interrupted or is inaccessible who will be responsible for follow up call? And for how long? If follow up contact has not happened in allotted time, what is next step to assure client safety? If unable to reconnect by Zoom Healthcare after <i>5 minutes/10 minutes/ other:</i>
No risk / Risk present	Assess for current suicidal/homicidal ideation and intent:
Alone / Others present	Verify confidentiality/secure location/no one else in client's room or private space. Ask client to notify you if other are present in the room:

## CCPPS Telehealth Distance Counseling Services

### Suggested Privacy Measures for Distance Counseling Clients

CCPPS recommends that you (the client) are aware of and use safety measures for keeping your PHI (Personal Health Information) confidential, including but not limited to the following suggestions.

#### Paper

It is recommended that you store all paper documents with your PHI in a locked cabinet.

#### When participating in distance counseling it is also recommended that you:

- Conduct the sessions in a private location where others cannot hear you.
- Use secure video conferencing technology. CCPPS uses *Zoom Healthcare, a secure and confidential application.*
- Do not record any sessions. *If your Zoom Healthcare meeting has a record option, please notify the counselor immediately.*
- Password protect your computer, tablet, phone, and any other device with a unique password.
- Always log out of your sessions.
- Do not have any software remember your password. Sign in every time.
- Do not share your passwords with anyone.
- Do not share your computer when you are logged on to any counseling software.
- If you wish to avoid others knowing that you are receiving counseling services, clear your browser's cache (browsing history), and on your phone, list your therapist by a name rather than as "counselor or therapist".
- Have all of your devices set to time out requiring you to sign back in after a set idle time.
- Keep your computer updated.
- Use a firewall and antivirus program.
- When online do not login as an administrator.
- Router / Access Point
  - Only use a secure network for internet access using a WAP2 security key.
  - Use your own administrator ID and password (not the default) for your router or access point.
  - Choose a custom SSID name, not the default name.
  - Limit the range of your Wi-Fi by positioning it near the center of your home.
- Notify your counselor if you suspect any breach in your security.

## Telehealth Tips for Students

**When participating in distance counseling it is also recommended that you:**

- Conduct the sessions in a private location where others cannot hear you.
- Use secure video conferencing technology. CCPPS uses *Zoom Healthcare*, a secure and confidential application.
- Do not record any sessions. *If your Zoom Healthcare meeting has a record option, please notify the counselor immediately.*
- Password protect your computer, tablet, phone, and any other device with a unique password.
- Always log out of your sessions.
- Do not have any software remember your password. Sign in every time.
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  - Choose a custom SSID name, not the default name.
  - Limit the range of your Wi-Fi by positioning it near the center of your home.
- Notify your counselor if you suspect any breach in your security.

## Telehealth Tips for Clinicians

- **Practice with the new technology**
  - Check your microphone and camera placements
  - Ensure that the lighting is adequate and the space is uncluttered

- Observe your space while using Zoom to see things you may have missed that could appear on camera (may not hurt be in front of curtains/partition of some sort to create a private space)
- At each session, review the following:
  - Even if the student has already signed informed consent, go over verbally as you would in session for key points on continually identifying risks (shared-decision making model of student being a collaborator in this process with us)
  - Make a plan if you lose connection
  - Check for geographic location (Where are you joining me from today?)
    - Document this in **EVERY** note
    - If they are outside of WV, ensure you are documenting consultation and NOT telehealth as we are not practicing across state lines
  - Check for privacy
    - Will you be able to talk freely in the space you are in?
    - Are there other people there today?
    - Are you wearing headphones like I am? (demonstrate good modeling by already having yours in)
  - Emergency contact (try language like local collaborator as suggested in training)
    - Have a conversation that this is a safety mechanism we will be using to make sure we can contact someone that is physically living with them or near enough that they could check on them if we cannot reach them
    - Stipulate the conditions that this person would be contacted and have the student share in that process for ownership and accountability while holding your professional boundaries
    - DOCUMENT it in their note and review each time in case this changes
  - Safety planning when appropriate
    - Monitor ambiguous behavior (verbal and non-verbal) that may indicate an undisclosed issue with the client
      - Impairment due to substance use
      - Poor eye contact (consider whether clinical or cultural issue)
      - Client appears guarded
      - Poor hygiene
      - Apathy
    - Assess for risk of harm to self and other
      - Ask about SI/HI/NSSIB
      - Intention
      - Plan
  - Resources
    - Continued telehealth/consultation with Carruth clinician
    - My SSP
    - Prior clinician that they may be able to coordinate with for services in their state
    - Direct to university sites for updates:

- <https://carruth.wvu.edu/covid-19>
  - <https://coronavirus.wvu.edu/>
- Consult, consult, consult as we are all learning and in this together
- Document
  - Geographical location of client (as noted above)
  - Dropped connections
  - Intrusions/interruptions
  - Progress towards established goals
  - How technology helped/hindered
  - Safety concerns and planning
  - Consultations with colleagues and/or other professionals
  
- Be flexible. Sessions will look and feel different than those that you have conducted in person. Telehealth often impacts the session frame, goals, duration, the development of rapport, the timing of interventions and the clients and clinicians experience of the process.