

COVID-19 opens way to telemental health

Schools find ways to meet student mental health needs remotely

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COVID-19 has caused school communities to do many things remotely that heretofore were done in person, including instruction, graduation ceremonies, school board meetings and budget votes. Add psychological counseling to the list.

Telemental health (TMH) is the use of telecommunications technology to provide behavioral health services. While school psychologists have often been skeptical of providing mental health services this way, they seem to have embraced it out of necessity during the pandemic.

"I truly think an in-person interaction is best; there is a sense of being 'present' with the individual in front of you, and there is no risk of someone else listening in, which is not necessarily the case for virtual work," said John Garruto, a school psychologist in the Oswego school district. "However, once in-person no longer was a reality, telemental health was an important medium to reach our youth." Through telemental health, Garruto was able to stay in touch with students he otherwise would have lost contact with.

When students are at home, "telemental health still allows students to feel connected to the professional in some way," he said.

Research studies tend to support the idea that TMH can be effective when face-to-face mental health services aren't possible. An analysis published in the *Journal of Child and Adolescent Pharmacology* in 2016 reviewed school telemental health literature, model programs and data from focus groups with child psychiatry fellows. It found that TMH with children and adolescents is "promising and well received."

Specifically, the data suggest that advantages of school TMH include greater efficiency, the capacity for higher volume and increased access to care for many students who would be unlikely to reach traditional community mental health care because of barriers such as transportation and health care coverage.

There were some disadvantages, however, such as patient concerns about privacy. In addition, some students may not have access to remote technology to be able to participate in teletherapy, while others may not feel comfortable with the technology or may not be able to effectively use the technology for a variety of reasons (e.g., age, disability, etc.).

The study concluded that a "hybrid" model of care, with some in-person and some remote care, may be most beneficial to all parties, promoting both engagement and efficiency simultaneously. It recommended that school TMH be considered as part of a comprehensive service delivery system for students.

One advantage of TMH is that some



Conducting a therapy session with a student via the internet is different, according to Peter Faustino, a school psychologist in the Scarsdale school district. "Students would rarely, if ever, run out of my office, but I had a few students end the Zoom session when the topic became too emotional," Faustino said.

students are more talkative when speaking to a mental health professional from the comfort of their bedroom or basement, according to Peter Faustino, a school psychologist in the Scarsdale school district. And parents are more involved.

"Students who might've skipped an appointment in high school were reminded by their parents to join the session," Faustino said. "Parents could be part of the sessions and planning which at times enhanced the work." He found it easy to schedule individual sessions, small group sessions, and even offer some larger webinars to students to discuss mental health and healthy habits during the pandemic.

There were some negatives, though. Some students' rooms were dark and some connections were poor, which made reading body language difficult for Faustino. Such observations are an important factor in conducting suicide/risk assessments.

And then there was the lure of the "Leave Meeting" button on apps such as Zoom. "Students would rarely, if ever, run out of my office, but I had a few students

end the Zoom session when the topic became too emotional," Faustino said.

An abrupt ending to a tele-session can be legally problematic because it raises the question of whether the student is at risk of harming himself or herself, according to Anne McGinnis, an attorney with the Harris Beach law firm and a certified school psychologist.

"When a student is in your office and discloses that he or she may be at risk of harm or others may be at risk of harm, you're able to manage that situation much easier because the student is in front of you and you can keep the student safe," McGinnis told *On Board*. "That is harder to do when you're remote. If students are at risk of harming themselves or others or being harmed by another, but is not physically present with the provider, school practitioners need to know what to do and whom to contact in those situations."

McGinnis said student privacy rights during tele-sessions are covered under the Family Educational Rights and Privacy Act (FERPA), which is the federal law that applies to the privacy and

confidentiality considerations of students. Information related to a student's health that is contained in the records of a school or a health care provider working under contract with a school is considered an educational record subject to FERPA.

"This general rule – that FERPA controls confidentiality of student records for any school-based service – applies to the provision of teletherapy delivered as part of a school-based service, regardless of who is implementing the service or the professional license they hold," McGinnis told *On Board*.

McGinnis also noted that New York has even stricter requirements for protecting student confidentiality under the recently enacted Education Law Section 2-d. This law provides specific requirements for third-party contractors that receive student data, including online learning platforms being used by schools to deliver instruction and other services, including teletherapy, during school closure. School mental health professionals should therefore ensure that they are using only online platforms that have been approved by their school districts or employers. Your school attorney may recommend a special consent form.

One early adopter of TMH is the 600-student Genesee Valley school district in Allegany County. It launched a telepsychiatry program in November 2019 in large part to provide access to mental health services to students in a remote area. The district partners with Mobile Primary Care to offer board-certified psychiatric care through secure telecommunications. Students there have the opportunity to receive a variety of mental health services in school while minimizing disruptions to their academic and guardian work schedules.

The program currently has six students enrolled in the program, and the district is looking to grow the program in the coming school year. Students typically go to the guidance office on campus to access therapy in a secure location behind closed doors, where the student connects with a psychiatrist.

"Studies have shown remote encounters may be more beneficial for students since the younger generation is more comfortable with remote applications and are less intimidated by them than they are with in-person encounters," said Brian Przybysz, Mobile Primary Care's vice president of business development.

Garruto said one of the best aspects of TMH is how much easier it is to get parents involved in the process, which has many benefits.

"Probably one of the most helpful pieces was both individuals worked with me to involve their parents," he said. "I was able to talk to the parents and help provide some tools and next steps. Given our difficult situation, I was pleasantly surprised at how we were able to reach various goals."