

# **Ethics of Telehealth and Online Therapy**

**SexTherapy-Online, PLLC**

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# About the Presenter



- Rhiannon Beauregard, MA, LMFT-S, CST, S-PSB, a Licensed Marriage and Family Therapist and AASECT Certified Sex Therapist
- Licensed in five states: Maine, Massachusetts, New Hampshire, New York, and Texas
- Located in Austin, TX with a predominantly online and/or hybrid online practice.

# Goals of Presentation

- Not bore you to death with an ethics presentation.
- Empower you to utilize telehealth and online therapy in your own work.
- Inform you of the current rules, regulations, and best practices of conducting online therapy in TX and as a MFT.
- Help you to be able to cite three possible benefits and three possible challenges to working online.
- Help you be able to make ethical decisions even in the absence of regulation and guidelines.

# MFT RULES!!!!

- Not the real rules, but the fact that WE RULE!
- Because MFTs are so awesome, we will only be working with the rules, guidelines, and regulations for Marriage and Family Therapists.
- We will also be working with the the rules and regulations of MFTs in Texas only.
- Other licensing boards, states, and professional associations have different guidelines, best practices, rules, and regulations. (Sorry dually licensed LPCs)



# FORMAT OF PRESENTATION

- Other ethics presentations this conference have gone over the New MFT Rules
  - Rockin' and Rollin' with MFT Licensing Board (Thursday)
  - Ethics and Technology (Friday)
- In efforts to bring you something NEW and not be repetitive (and its near the end of the conference) we won't be going over the SPECIFIC Texas Rules (although you can find the handouts on the APP or my website)
- Rather, I'm going to do a brief presentation about telehealth, online therapy, ethics and share the "official" resources to use in shaping your practice.
- You will be doing the rest!

# What is Online Therapy

## Known By Many Names

- Telehealth
- Telemental Health
- Distance-Therapy
- Distance-Based
- Online Therapy
- Technology Assisted Services
- Telepsychology
- Any other terms?



# SexTherapy-Online Studio





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# THIS IS THE WILD WILD WEST



# Ethics of Telehealth and Online Therapy

- I approach the ethics of telehealth and online therapy in four ways:
  - LEGAL
  - ETHICAL
  - RISK MANAGEMENT
  - BEST PRACTICES, SCOPE OF PRACTICE, AND QUALITY OF CARE
- I believe each of those factors should be weighed EQUALLY and no one take priority over the others.



# Thoughts To Consider

- **Legal Issues**
  - What do the jurisdictional laws say?
- **Ethical Issues**
  - What do your ethical codes say?
- **Risk Management**
  - What does your insurance company say?
  - How do you plan on handling emergency issues?
- **Best Practice, Scope of Practice, and Quality of Care**
  - Is this client appropriate for online sex therapy?
  - Can I do my best work online?



Texas Administrative Code, Title 22, Part 35, Chapter 801,  
Subchapter C, Rule 801.58

American Association of Marriage and Family Therapy  
(AAMFT) Code of Ethics

– Standard VI Technology Assisted Professional Services

AAMFT Best Practices in the Online Practice of Couple  
and Family Therapy

AASECT Code of Ethics and Conduct

AAMFT Best Practices in the Online Practice of Family  
Therapy Online Webinar

Association of Marital and Family Therapy Regulatory  
Boards Teletherapy Guidelines

# [www.SexTherapy-Online.com/Presentations](http://www.SexTherapy-Online.com/Presentations)

## Presentations

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### 2018

Texas Association for Marriage and Family Therapy (TAMFT) Annual Conference  
February 21-24, 2018 Irving, TX

#### *Ethics of Telehealth and Online Therapy*

Ethics of Telehealth and Online Therapy Presentation

[AASECT Code of Ethics and Conduct](#)

[Texas Guidelines on Technology Assistive Practice for Marriage and Family Therapists](#)

– Texas Administrative Code, Title 22, Part 35, Chapter 801, Subchapter C, Rule 801.58

[American Association of Marriage and Family Therapy \(AAMFT\) Code of Ethics](#)

– Standard VI Technology Assisted Professional Services

[AAMFT Best Practices in the Online Practice of Couple and Family Therapy](#)

[AAMFT Best Practices in the Online Practice of Family Therapy Webinar Course](#)

[CPH Insurance Online Counseling/Therapy Articles](#)

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# Texas Administrative Code, Title 22, Part 35, Chapter 801,

## Subchapter C, Rule 801.58

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### Texas Administrative Code

[TITLE 22](#)  
[PART 35](#)  
[CHAPTER 801](#)  
[SUBCHAPTER C](#)

RULE §801.48

EXAMINING BOARDS  
TEXAS STATE BOARD OF EXAMINERS OF MARRIAGE AND FAMILY THERAPISTS  
LICENSURE AND REGULATION OF MARRIAGE AND FAMILY THERAPISTS  
GUIDELINES FOR PROFESSIONAL THERAPEUTIC SERVICES AND CODE OF  
ETHICS  
Record Keeping, Confidentiality and Release of Records, and Required Reporting

- (a) Communication between a licensee and client and the client's records, however created or stored, are confidential under the provisions of the Health and Safety Code, Chapter 611 (relating to Mental Health Records), and other state or federal statutes or rules where such statutes or rules apply to a licensee's practice.
- (b) A licensee shall not disclose any communication, record, or identity of a client except as provided in Health and Safety Code, Chapter 611, or other state or federal statutes or rules.
- (c) A licensee shall comply with Health and Safety Code, Chapters 181 (relating to Medical Records Privacy) and 611, and other state or federal statutes or rules where such statutes or rules apply to a licensee's practice, concerning access to and release of mental health records and confidential information.
- (d) A licensee shall report or release information as required by the following statutes:
- (1) Family Code, Chapter 261 (relating to Investigation of Report of Child Abuse or Neglect);
  - (2) Human Resources Code, Chapter 48 (relating to Investigations and Protective Service for Elderly Persons and Persons with Disabilities);
  - (3) Health and Safety Code, Chapter 161, Subchapter L (relating to Abuse, Neglect, and Unprofessional or Unethical Conduct in Healthcare Facilities);
  - (4) Civil Practice and Remedies Code, §81.006 (relating to Duty to Report Sexual Exploitation by a Mental Health Services Provider); and
  - (5) Occupations Code, Chapter 109 (relating to Release of Sex Offender Treatment Information)
- (e) A licensee shall keep accurate records of therapeutic services to include, but not be limited to, dates of services, types of services, progress or case notes and billing information for a minimum of 5 years for an adult client and 5 years beyond the age of 18 for a minor.
- (f) A licensee shall retain and dispose of client records in such a way that confidentiality is maintained.
- (g) In independent practice, establish a plan for the custody and control of the licensee's client mental health records in the event of the licensee's death or incapacity, or the termination of the licensee's professional services.
- (h) A licensee shall report sexual misconduct as follows.
- (1) In addition to the requirements under subsection (d) of this section, if a licensee has reasonable cause to suspect that a client has been the victim of a sexual exploitation, sexual contact, or therapeutic deception by another licensee or a mental health services provider during therapy or any other course of treatment, or if a client alleges sexual exploitation, sexual contact, or therapeutic deception by another licensee or mental health services provider (during therapy or any other course of treatment), the licensee shall report alleged misconduct not later than the 30th day after the date the licensee became aware of the misconduct or the allegations to:
- (A) the district attorney in the county in which the alleged sexual exploitation, sexual contact, or therapeutic deception occurred;
  - (B) the board if the misconduct involves a licensee; and
  - (C) any other state licensing agency which licenses the mental health services provider.
- (2) Before making a report under this subsection, the reporter shall inform the alleged victim of the reporter's duty to report and shall determine if the alleged victim wants to remain anonymous.
- (3) A report under this subsection need contain only the information needed to:
- (A) identify the reporter;
  - (B) identify the alleged victim, unless the alleged victim has requested anonymity;
  - (C) express suspicion that sexual exploitation, sexual contact, or therapeutic deception occurred; and
  - (D) provide the name of the alleged perpetrator.

**Source Note:** The provisions of this §801.48 adopted to be effective April 20, 1994, 19 TexReg 2386; amended to be effective November 22, 1996, 21 TexReg 11588; amended to be effective April 11, 2001, 26 TexReg 2713; amended to be effective July 2, 2006, 31 TexReg 5111; amended to be effective May 18, 2008, 33 TexReg 3758; amended to be effective March 31, 2013, 38 TexReg 1982; amended to be effective March 26, 2017, 42 TexReg 1253

List of Titles

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# American Association of Marriage and Family Therapy (AAMFT) Code of Ethics

## – Standard VI Technology Assisted Professional Services

### STANDARD VI

#### TECHNOLOGY-ASSISTED PROFESSIONAL SERVICES

*Therapy, supervision, and other professional services engaged in by marriage and family therapists take place over an increasing number of technological platforms. There are great benefits and responsibilities inherent in both the traditional therapeutic and supervision contexts, as well as in the utilization of technologically-assisted professional services. This standard addresses basic ethical requirements of offering therapy, supervision, and related professional services using electronic means.*

##### 6.1 Technology Assisted Services.

Prior to commencing therapy or supervision services through electronic means (including but not limited to phone and Internet), marriage and family therapists ensure that they are compliant with all relevant laws for the delivery of such services. Additionally, marriage and family therapists must: (a) determine that technologically-assisted services or supervision are appropriate for clients or supervisees, considering professional, intellectual, emotional, and physical needs; (b) inform clients or supervisees of the potential risks and benefits associated with technologically-assisted services; (c) ensure the security of their communication medium; and (d) only commence electronic therapy or supervision after appropriate education, training, or supervised experience using the relevant technology.

##### 6.2 Consent to Treat or Supervise.

Clients and supervisees, whether contracting for services as individuals, dyads, families, or groups, must be made aware of the risks and responsibilities associated with technology-assisted services. Therapists are to advise clients and supervisees in writing of these risks, and of both the therapist's and clients'/supervisees' responsibilities for minimizing such risks.

##### 6.3 Confidentiality and Professional Responsibilities.

It is the therapist's or supervisor's responsibility to choose technological platforms that adhere to standards of best practices related to confidentiality and quality of services, and that meet applicable laws. Clients and supervisees are to be made aware in writing of the limitations and protections offered by the therapist's or supervisor's technology.

##### 6.4 Technology and Documentation.

Therapists and supervisors are to ensure that all documentation containing identifying or otherwise sensitive information which is electronically stored and/or transferred is done using technology that adhere to standards of best practices related to confidentiality and quality of services, and that meet applicable laws. Clients and supervisees are to be made aware in writing of the limitations and protections offered by the therapist's or supervisor's technology.

##### 6.5 Location of Services and Practice.

Therapists and supervisors follow all applicable laws regarding location of practice and services, and do not use technologically-assisted means for practicing outside of their allowed jurisdictions.

##### 6.6 Training and Use of Current Technology.

Marriage and family therapists ensure that they are well trained and competent in the use of all chosen technology-assisted professional services. Careful choices of audio, video, and other options are made in order to optimize quality and security of services, and to adhere to standards of best practices for technology-assisted services. Furthermore, such choices of technology are to be suitably advanced and current so as to best serve the professional needs of clients and supervisees.

# AAMFT Best Practices in the Online Practice of Couple and Family Therapy



## Best Practices in the Online Practice of Couple and Family Therapy



# AAMFT Best Practices in the Online Practice of Family Therapy Online Webinar

## Best Practices in Online Practice of Family Therapy

**\$15.00**  **Add to Cart**



**CE Credits:** 1.00 **Speaker(s):** *Benjamin E. Caldwell, PsyD* In this webinar to further explore the guidelines, Dr. Ben Caldwell will describe the work of the Online Therapy workgroup, and how the group was able to develop such clear and specific guidelines for MFTs working online. He'll review how those best practices can be used to develop or update an online practice. Finally, he will respond to member questions about online couple and family therapy. If you are working online now, are planning to start soon, or are considering the possibility for your future, this webinar will help you understand the steps that go along with working online.

# Association of Marital and Family Therapy Regulatory Boards Teletherapy Guidelines

Association of Marital and Family Therapy  
Regulatory Boards

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Teletherapy Guidelines

*September 2016*

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# SMALL GROUP WORK

- Take 10 minutes to introduce yourself, where you practice/go to school, where you are licensed, and whether you do telehealth or not. Exchange business cards if you want (People who are doing telehealth always NEED more referrals options)
- 5-7 minutes for each case discussion. These are real cases, not made up ones to make the conversation lively.
- USE TECHNOLOGY TO WORK WITH THE TOPICS: The goal is to feel like you have a WORKING knowledge of these rules, regulations, and best practices.

# Answer These Questions

- How would telehealth and online therapy benefit this case?
- How would telehealth and online therapy be challenging for this case?
- What are the relevant
  - LEGAL
  - ETHICAL
  - RISK MANAGEMENT
  - BEST PRACTICES, SCOPE OF PRACTICE, AND QUALITY OF CAREissues to consider with this case?

# CASE #1: College Bound

- Your 20-year-old client started therapy with you and you have been seeing them for a few months. She presented with managed depression, anxiety, a history of sexual trauma (she was had a relationship and was raped many times by her high school coach at 16 years old) and some suicidal ideation. She is headed to school in the Cayman Islands and are desperate to continue therapy during this transition. She previously had a traumatic experience with losing their therapist when She went to college in another state and wound up failing their semester and had a attempted suicide. Her permanent residence is in Texas.

## **CASE #2:**

# **Long Distance Relationship**

- A couple presents in your office for relationship issues. They have communication issues and aren't sure if they should stay together. You find out after a few sessions that the communication issues are exacerbated by long distance issues, specifically one of the partners lives part-time in another state, and the other partner travels a lot for business. They haven't been able to find any therapist dually licensed in the two states they both reside in and need continuing treatment despite hectic and busy work schedules.

# CASE #3: The Ex-Pat

- You have an inquiry from a client who is living as a permanent resident in your jurisdiction but lives part of the time in an Arab speaking, Muslim country. He is Mormon and is looking for help in healing from a recent divorce and his daughter's diagnosis of cancer. He says options for an English speaking therapist with expertise in sex and relationships are very difficult to find and he has tried to find a local therapist. He calls you seeking therapy since he got desperate for therapy and is looking for therapists close to his permanent address in your jurisdiction where he owns a home.

## CASE #4:

# The California to Texas Pipeline

- A long-standing polyamorous couple of yours who have recently made significant (but tentative) progress is suddenly and unexpectedly moving from Texas to California. They barely have time to set up moving, living, and school arrangements for their children, let alone find another therapist, and they are asking if you can continue to see them online while they seek out a new therapist. They understand that you cannot see them indefinitely due to state laws, but they are asking for a few sessions while they transition so as not to regress.

# **CASE #5:**

## **CHOOSE YOUR OWN CASE**

- Does anyone at your table have a case that addresses any of the considerations to discuss and workshop with your group?
- Keep in mind:
  - LEGAL
  - ETHICAL
  - RISK MANAGEMENT
  - BEST PRACTICES, SCOPE OF PRACTICE, AND QUALITY OF CARE



# Common Themes

- What are some common themes from the cases?
  - LEGAL THEMES
  - ETHICAL THEMES
  - RISK MANAGEMENT THEMES
  - BEST PRACTICES, SCOPE OF PRACTICE, AND QUALITY OF CARE THEMES

# Any Questions?



## SexTherapy Online

# Contact

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#FetishFriday 02/09/18: #Sadism and #Masochism