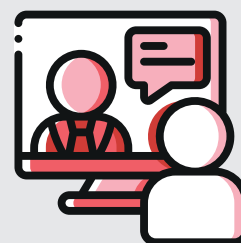# Telemental Health Top Tips for Clinicians
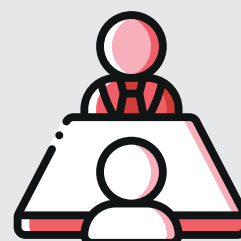
Digital Exclusion
Individuals who have **no or limited access to and/or the capacity to engage with digital resources**.

Individuals experiencing **digital exclusion** are likely to also be experiencing other **disadvantages** and **inequalities**.

Use of telemental health may make these inequalities **worse**.

If telemental health is not preferred, appropriate or accessible for any reason, **face-to-face appointments should always be offered, without delay.**

Read research paper at:
www.i-jmr.org/2022/2/e38239

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Telemental Health Top Tips for Clinicians: Key issues and related strategies

Flexibility and personalisation

Service user preferences around telemental health should be explored and prioritised.

STRATEGY: An initial conversation about telemental health should be held at the outset with service users to establish their preferences, resources (including technology access and skills).

STRATEGY: There are significant advantages to offering telemental health in personalised ways (e.g. long distance family members or specialists can be included, shorter and more frequent contacts can be used, and some people are reluctant to attend mental health services in person). revisit collaborative telemental health plans regularly as preferences change or vary between different types of appointment.

Safety and privacy

Managing risks and crisis situations may be more challenging.

STRATEGY: Deliver telemental health sessions in a private space. If this is not possible, inform service users, explain who else is present in the room with you and use headphones.

STRATEGY: Establish a call-back number before the session in the case of disconnection when discussing distressing or sensitive topics, in line with your co-developed emergency protocol.

STRATEGY: Identify where the service user is located at the start of the session and consider how a fast, in-person crisis response can be mobilised if needed for people at high risk.

Connecting effectively

Telemental health, particularly video-calls, require an up-to-date device and a good internet connection.

STRATEGY: Ensure that you and service users have an appropriate device, sufficient connection and the confidence and knowledge to facilitate calls. This includes knowing which platforms are available and how to use them and, where possible, working with technology/platforms that service users are familiar with.

Technological disruptions may occur during video-call sessions.

STRATEGY: Agree a back-up method of connecting ahead of time (e.g., phone call).

Service users may have sensory or psychological (i.e. invisible) barriers to accessing telemental health, or simply feel uncomfortable in communicating in this way.

STRATEGY: Ask how each service user experiences telemental health and adapt telemental health where needed (e.g., offering telephone rather than video calls, or communicating via text).

Therapeutic quality & relationship

Reduced non-verbal cues may impact on the therapeutic relationship.

STRATEGY: Establishing a strong therapeutic relationship tends to be harder via telemental health, especially by phone. Where possible, arrange for the first appointment to be in person, not just when this is requested/preferred by service users.

STRATEGY: Take more time to informally chat and get to know service users when delivering the initial telemental health appointment.

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