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Using This Checklist During the COVID-19 Outbreak

This checklist booklet was created as a kind of manual for our Telemental Health Certificate Program. As such, it was written to be used along with the trainings. However, we have discovered that it still holds great value even as just an independent checklist of to-dos when practicing telemental health.

If anything in here references something you’re not familiar with, it likely is meant to go with the training materials. And the certificate training materials are quite extensive, covering a wide range of needs and circumstances.

If you’re using this checklist to help you get moving with telehealth during the COVID-19 outbreak, you may wish to focus on the items that you know are relevant to your current clients’ needs. If anything arises that you still don’t understand, we advise you to research it online or get qualified consultation from colleagues or experts.

Training Links

The following are links to our telemental health training programs:

Solo Practice Certification Program: https://personcenteredtech.com/tmh/
Solo Practice Basic Starter Pack: https://personcenteredtech.com/tmh/starter/

Group Practice TMH Program: https://personcenteredtech.com/group-telemental-health/

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Person Centered Tech Telemental Health Checklists

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Legal-Ethical Issues Checklist

Below is a checklist of basic legal-ethical issues that arise in telemental health. In the development of this course, we attempted to create a crosswalk of ethical issues addressed in the major ethics codes and guidelines that impact American mental health clinicians. It is still important to study your own ethics codes, professional guidelines, and state laws, however, to ensure you are complying with them.

<table>
<thead>
<tr>
<th>Issue</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional informed consent is indicated.</td>
<td></td>
</tr>
<tr>
<td>It’s where the client <em>is</em>, not where they <em>reside</em>.</td>
<td></td>
</tr>
<tr>
<td>It’s also where you’re licensed.</td>
<td></td>
</tr>
<tr>
<td>Know the local law and rule where you are and where your clients are.</td>
<td></td>
</tr>
<tr>
<td>Know your applicable ethics codes or professional guidance documents.</td>
<td></td>
</tr>
<tr>
<td>Know the vicissitudes of interjurisdictional practice, if you choose to do it.</td>
<td></td>
</tr>
<tr>
<td>Foster cultural and area competence for your clients and their locales.</td>
<td></td>
</tr>
</tbody>
</table>

Do you have rules that govern your TMH practice?

What does it mean if you don’t?

Do the practice laws and rules of each jurisdiction conflict at all?

Clinic-to-clinic vs clinic-to-home

What is “privacy” or “confidentiality” in your client’s home?

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- Get accustomed to new processes.
- Assess client (and clinician) appropriateness for telemental health.
- Manage client crises and therapy-interfering behaviors and tech emergencies.
- Electronic security and privacy (e.g. HIPAA) become heightened issues in telemental health.
- Choose appropriate technology for your practice.
- Are your services reimbursed?
- Is your practice covered by your liability insurance?

## HIPAA Compliance

HIPAA compliance is covered in other courses in greater detail, but in this section we give a brief overview of the process of compliance along with some guidance on aspects of HIPAA that especially impact telemental health practice.

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## Telemental Health and HIPAA Checklist

<table>
<thead>
<tr>
<th>Task</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Give clients a Notice of Privacy Practices (NPP) that is</td>
<td>Post it on your website, as well. <strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
<tr>
<td>compliant with current HIPAA rules</td>
<td><strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
<tr>
<td>Know what your NPP says so you can be sure you are</td>
<td><strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
<tr>
<td>following your own policies.</td>
<td><strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
<tr>
<td>Perform a <strong>HIPAA-compliant security risk analysis.</strong></td>
<td>Person Centered Tech members have access to a tool for this.</td>
</tr>
<tr>
<td>Make a <strong>risk management plan</strong> that meets both the HIPAA Security</td>
<td>Person Centered Tech members have access to a tool for this.</td>
</tr>
<tr>
<td>standards and your own, individual security needs.</td>
<td>Person Centered Tech members have access to a tool for this.</td>
</tr>
<tr>
<td>Create a <strong>security policies and procedures manual.</strong></td>
<td>Person Centered Tech members have access to templates for this.</td>
</tr>
<tr>
<td>Avoid unencrypted emails and texts in telemental health practice.</td>
<td><strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
<tr>
<td>Only use them when there is a specific evidence basis for doing</td>
<td><strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
<tr>
<td>so and secure alternatives are not feasible.</td>
<td><strong>Posting the NPP on your website, if you have one, is a HIPAA requirement.</strong></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Ensure that the cloud-based software services you use for your practice provide Business Associate Agreements, except where an exemption exists.</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is highly unlikely that the “conduit exception” will apply to the services you use. Don’t believe “conduit exception” claims from product vendors unless an independent expert advises you that a given service does meet the criteria for that exception.</td>
</tr>
<tr>
<td>Financial services do have an exception, but it is a narrow one.</td>
</tr>
<tr>
<td>Remember that a product can’t make you HIPAA compliant.</td>
</tr>
</tbody>
</table>

### New Practice Region/Jurisdiction Needs

This checklist will help you keep track of what to do when you start practicing in a region or jurisdiction. Pull out this checklist when you get a license (or other permission to practice) in a new state/province, or when you are ready to start working with a client or clients in a new area of a state/province where you already are legal to practice.

If you’re not sure what we mean by “new region,” look through the items on the list below. You know you’re expanding into a new region when any items on this list require research in order to get addressed. Often, in the US, a new region is a new county. But denser areas may have multiple counties in one “region.” So there isn’t a specific rule for how to define a “region.” Use your professional judgement.

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Before Starting Practice In a New Region

- Ensure you are legal to practice there and that you know the legal conditions of your practice.
- Ensure that your professional liability insurance covers practice in the new region.
- Make sure your existing promotional materials are legal in the new region.
- Make sure that your security and privacy policies are legal for the new region (this usually comes up with practice in new states/provinces where laws may include privacy and security regulations.)
- Research your population in the area to ensure you have the needed cultural and linguistic competence to work with them.
- Make sure all your communications tech works there, including backup communications methods.
Find local support, as needed. Local champions, local professional orgs, local professional and social communities, etc.

Set up your crisis/emergency planning protocols as described in the “At Practice Startup” section of the Practice Needs Checklist.

Make sure you’re able to collect payments from people in the new region (mostly for international practice.)

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**Video Presentation Skills Checklist**

When working by video with clients, it is important to do your best work -- within reasonable cost and capability constraints -- at making a good presentation on camera. This is not only so you can present well for clients, however. It is also so you can help them present themselves in ways that ensure quality assessments and good ol’ accurate empathy on your part.

Addressing all the items on this list should not require any equipment not normally found in a typical telemental health practice. You may need to buy some low-cost items, such as floor lamps. Or you may need to adjust the layout of your office. The items in this checklist are addressed in the materials in this section of the course.

**Basic Skills Checklist** *(The items in this checklist are addressed in the materials in this section of the course.)*

- Lighting

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Client Needs Checklist

(Related materials: Sample Telemental Health Client Records Forms. Included in Certification Program resources.)

This checklist will help you keep track of what to do when you start up with a client, at each session, and at termination.

Note that these items are all specific to telemental health. All the usual in-person checklist items for working with clients also apply.

There are some items on these checklists that are repeats of items from the Informed Consent Checklist. These repetitions are on purpose, because they are important enough to emphasize in both checklists.

Camera placement/angle

Posture

Behavior

Picture-in-Picture

Environment

Clothing
Before Intake

- Securely deliver any pre-session orientation materials to client(s).

- Securely get intake forms to the client, and then receive the filled out forms back securely. Client portals may allow this to happen all in one place, or secure messaging services can help you and your client send and receive the forms securely.

- Ensure it is legal and clinically indicated to work with clients of this age in the client’s current jurisdiction and using the telemental health medium or media you are using.

- For Direct-To-Client (DTC), consider known symptoms/diagnoses against circumstances of care delivery:
  - Clients with dementia.
  - Clients with psychosis.

Get the emergency services picture for the client.

If you’re going to work in the DTC context:

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| Make sure you know how to call 911 for services that cover this client’s home. | Call the local police non-emergency line to ask for the direct phone number of 911 services in the client’s area. |
| Determine if the area has emergency contact services besides 911, such as crisis lines |  |
| Determine which services operate in the area of the client’s home -- e.g. sheriff or police? |  |
| Determine if and which emergency services can reach the client, or if the client can reach service centers (e.g. hospital, police station, etc.) | How long for services to reach the client’s location? How long for the client or emergency contact to reach service centers? |
| Determine if you have the necessary cultural and language skills to communicate with the emergency services that serve this client. |  |

If You’re going to work in a Clinic-To-Clinic (CTC) context:

| Is the facility prepared for emergencies? | How are they prepared for emergencies that arise for clients like the one you’re about to work with? (diagnosis, age, etc.) |

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- Make an emergency plan with the facility for both of you to follow together.

- Don’t assume they know what they’re doing. You’re the expert!

### At Intake

#### Ensure “Psychological Safety”

- Verify that the client’s space is safe and the client’s confidentiality is secure. Be aware of client’s cultural ideas of safety and confidentiality that differ from your own.

- Ensure there are no hidden people.

- One technique is to have the client move their camera to scan the room. Make that a start-of-session protocol.

- If the scene is safe, set up a “safeword” which the client can utter in the future when the room is not psychologically safe.

- Help client make adjustments to ensure safety and confidentiality.

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## Check Demographics

<table>
<thead>
<tr>
<th>Step</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verify the client’s location and assess whether or not you may work with them while they are in that jurisdiction.</td>
<td></td>
</tr>
<tr>
<td>Document the client’s location -- including address if it’s available.</td>
<td></td>
</tr>
<tr>
<td>Verify the client’s identity.</td>
<td>Many standards call for strict verification, such as having the client hold an ID card up to the camera.</td>
</tr>
<tr>
<td>Verify the client’s age.</td>
<td></td>
</tr>
</tbody>
</table>

## Set Up Long-Term Safety

<table>
<thead>
<tr>
<th>Step</th>
<th>Details</th>
</tr>
</thead>
</table>
| Identify and verify the viability of an Emergency Contact/Patient Support Person. | • Getting an emergency contact is always smart.  
• A “patient support person” is more for clients who have a higher likelihood of decompensation or medical emergency, and need someone on hand to support them.  
• In CTC, this may already be arranged. |
| Create a crisis management plan with the client, including the Patient Support Person/Emergency Contact as appropriate. | In CTC, this may already be arranged.                                                                                                                                                           |
| Assess client appropriateness for the telemental health medium or media you are using. | Can they use the tools effectively? Are they comfortable with them?  
  Do they connect well through it, or is it a barrier to therapeutic alliance?  
  Will they be able to get their local support needs taken care of well enough for TMH to work? |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Help the client understand what kinds of behaviors or behavioral patterns won’t work for telemental health and may require termination.</td>
<td>This is most relevant for DTC situations where the client receives services in his or her home, and least relevant in CTC situations where the client is in a medical facility that can respond to medical and/or psychiatric emergencies (although it is still relevant -- just less so.) Those two situations are the endpoints on a continuum of need for the client to take a piece of ownership for his or her own psychological appropriateness for telemental health.</td>
</tr>
<tr>
<td>Discuss backup communications plan. Ensure client understands what the plan is and can consistently use the backup method(s) of communication with their equipment and skills and in their area.</td>
<td>Backup plans are usually to use the telephone. If client is in an area with poor phone service, the backup plan may need to be Internet-based.</td>
</tr>
</tbody>
</table>

**Set Logistical Norms**

| Ensure informed consent items are understood by the client. | Given all the paperwork and informed consent issues that arise in modern practice, you may need |

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to become proficient with using layering in your informed consent process. (More about layering here: https://personcenteredtech.com/2016/03/28/million-informed-consent-documents-1-helpful-technique-layering/)

| Discuss what to expect from a telemental health working relationship. |
| Discuss how between-session interactions will work and what they will look like. |
| Get information on the client’s Internet service and its speed and reliability. |

### Each Session

**Ensure “Psychological Safety”**

- Verify that the client’s space is safe and the client’s confidentiality is secure. Be aware of client’s cultural ideas of safety and confidentiality that differ from your own. Help client make adjustments to ensure safety and confidentiality.

- Ensure there are no hidden people.
  - One technique is to have the client move their camera to scan the room. Make that a start-of-session protocol.

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- Help client make adjustments to ensure safety and confidentiality.

- If the client is not visible, verify that the person you are interacting with is actually your client. You can use your pre-arranged safeword or other method to do this.

### Check Demographics

- Verify the client's location and assess whether or not you may work with them while they are in that jurisdiction.

- Document the client's location -- including address if it's available.

### Maintain Long-Term Safety

- Assess client appropriateness for the telemental health medium or media you are using at this time.

### Maintain Logistical Norms

- Assess need to re-discuss or re-introduce items from the informed consent and ensure the client understands them.

### From Time-to-Time As Needed

#### Maintain Long-Term Safety

- Review the emergency services picture for the client
  - Make sure you know how to call 911 for services that cover this client's home.
Call the local police non-emergency line to ask for the direct phone number of 911 services in the client's area.

- Determine if the area has emergency contact services besides 911, such as crisis lines
- Determine which services operate in the area of the client’s home -- e.g. sheriff or police?
- Determine if and which emergency services can reach the client, or if the client can reach service centers (e.g. hospital, police station, etc.)
  - How long for services to reach the client's location?
  - How long for the client or emergency contact to reach service centers?
- Determine if you have the necessary cultural and language skills to communicate with the emergency services that serve this client.

Review the crisis management plan, including the Emergency Contact/Patient Support Person. Make changes if needed.

Review backup communications plans. Ensure client understands what the plan is and can consistently use the backup methods of communication with their equipment and skills and in their area. Make changes if needed.

Maintain Logistical Norms

- Get information on the client’s Internet service and its speed and reliability.

At Termination

- Provide referrals that are verified to be accessible to the client and viable for the client's clinical needs.
- If the client’s termination is in whole or part due to inappropriateness for TMH services,
| referrals should be to clinicians who are accessible in-person. |
Informed Consent Needs

Items to Include in Telemental Health Informed Consent

(Related materials: Sample Telemental Health Informed Consent Form. Included in Certification Program resources.)

Clinician Credentials and Information

- Clinician’s address, practice location and credentials

Risks and Benefits

- Risks and benefits of working by your chosen medium/media.
- Note that there is a chance technology can fail on us, potentially in sensitive situations.
- Limits to confidentiality in the technology that you have chosen for your TMH practice and that you will use with the given client.
  - Tech service providers may have incidental or accidental access to confidential information.
  - Errors or bad luck can result in disclosures of confidential information

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## Communications Plans and Policies

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>✗ A plan for resuming contact with the therapist after a technology failure.</td>
<td>• Usually by telephone -- may need a different plan if the client is international or in an area with inconsistent telephone service.</td>
</tr>
<tr>
<td>✗ Expectations regarding session schedules.</td>
<td></td>
</tr>
<tr>
<td>✗ Difficulties due to time zone differences, where applicable.</td>
<td></td>
</tr>
</tbody>
</table>
| ✗ Expectations regarding communication between sessions.               | • Expectable turnaround time when the client contacts the therapist.  
                          | • The tools and contact information to be used for between-session contact.                                                           |
| ✗ How the therapist will coordinate care with the client’s other practitioners, where applicable. |                                                                                                                                        |

## Ensuring Safety and Appropriateness of Telemental Health Practice

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
</table>
| ✗ Expectations for emergency management between sessions.              | • Who will they call? What will they do in a mental health crisis?  
<pre><code>                      | • Make sure the plan is specific to the client’s circumstances, e.g. the plan only includes a call to                                                             |
</code></pre>
<table>
<thead>
<tr>
<th>The local crisis line when the client’s area has a local crisis line.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The expectation that the client will engage with the therapist in the development of a plan for managing mental health emergencies.</td>
</tr>
<tr>
<td>The expectation that the therapist may need the client to designate an emergency contact/patient support person.</td>
</tr>
<tr>
<td>The expectation that the therapist will be assessing the appropriateness of telemental health for this client in an ongoing way.</td>
</tr>
<tr>
<td>This means the therapist may have to terminate TMH services if the therapist assesses them to be inappropriate enough to be causing harm or not causing benefit.</td>
</tr>
<tr>
<td>Describe the conditions that may cause the therapist to decide that telemental health is inappropriate and needs to stop.</td>
</tr>
</tbody>
</table>

### Other Security and Privacy Issues

| Description of how the therapist keeps records and how they are kept secure. |

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<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>❑</td>
<td>Therapist’s policy on recording sessions and the risks and benefits of the client doing so.</td>
</tr>
<tr>
<td>❑</td>
<td>Advice on how the client may compromise their own confidentiality through their own behaviors around personal security, or through sharing information about their telemental health sessions with others.</td>
</tr>
</tbody>
</table>

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Practice Needs Checklist

This checklist will help you set up and maintain an effective and ethical telemental health practice.

The lists are broken up by time. The first is for when you start practice. Then we have a list that describes our recommended yearly maintenance work. The final list describes items that you should consider reviewing when the need arises.

At Practice Startup

Choose Care Delivery and Practice Management Tools

<table>
<thead>
<tr>
<th>Choose the best care delivery tech for your needs and those of your clients. Consider clinical effectiveness, ability to meet your practice administration needs, and security.</th>
<th>Some kinds of options:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The videoconferencing software you wish to use.</td>
<td>The secure messaging/secure email service you wish to use (if you are trained in textual based therapy.)</td>
</tr>
<tr>
<td>The telemental health practice platform you wish to use.</td>
<td>The telemental health company you wish to work for.</td>
</tr>
</tbody>
</table>

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| ❑ Set up your backup communication method for technical emergencies. | (This is typically a normal telephone, but it will depend on what is available to you and to the clients you serve.) |
| ❑ Choose tools that meet your practice management needs. | We identified the following needs for practice management technology:  
❑ Record-keeping  
❑ Billing and payment.  
❑ Communications tech (e.g. client portal, secure messaging, encrypted email) that can facilitate:  
❑ Initial contact with new clients  
❑ Paperwork and other document exchange with clients, especially new clients  
❑ Gathering signatures -- Electronic signatures? Ink? |
<table>
<thead>
<tr>
<th>❏ Between-session secure communication with clients</th>
<th>❏ Referrals and care coordination with other professionals</th>
<th>❏ If needed, internal secure communication of client information with your practice’s staff</th>
</tr>
</thead>
</table>

It is possible for all the above features to be provided by just one or two tools. Remember to use these sites to help you search for the best tools for you:

- [http://telementalhealthcomparisons.com/](http://telementalhealthcomparisons.com/)
- [https://tameyourpractice.com/](https://tameyourpractice.com/)
- [https://personcenteredtech.com/](https://personcenteredtech.com/)

### Get Your Security and HIPAA Issues In Order

| ❏ Perform a security risk analysis, create a risk management plan, and write up a security policies and procedures manual. | ❏ Person Centered Tech membership supplies tools, templates and direct human support for these tasks: [https://personcenteredtech.com/](https://personcenteredtech.com/) |

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Ensure that security and privacy policies abide by all relevant ethics codes, state laws, and professional guidelines.

**Cover Your General Legal-Ethical Concerns**

- Post verifiable credentials in an obvious and easy to find place, such as on your practice’s website.
- Determine the telemental health coverage provided by your professional liability insurance provider.
- Also do the New Region/Jurisdiction Checklist for the regions and jurisdictions where you know you will be working with clients.

**Websites**

We strongly recommend setting up your own website. Post the following:

- Your contact information
- The contact information for your backup communication method
- Your credentials in all relevant states

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Crisis service information for the jurisdictions you work in

If you are a HIPAA covered entity, post your NPP on the site

### Yearly, After Startup

**Review Care Delivery and Practice Management Tools**

- Review backup communications methods to ensure they are still functional for clients and are still the best backup method(s) to be using.

**Review Your Security and HIPAA Work**

- Update the security risk analysis, the risk management plan, and the policies and procedures manual.

- Ensure that security and privacy policies abide by all relevant ethics codes, state laws, and professional guidelines.

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### Review Your General Legal-Ethical Concerns

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>✗ Verify that posted credentials are up-to-date.</td>
<td></td>
</tr>
<tr>
<td>✗ Review the telemental health coverage provided by your professional liability insurance provider.</td>
<td></td>
</tr>
</tbody>
</table>

### From Time-to-Time as Needed

#### Review Care Delivery and Practice Management Tools

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>✗ Review your chosen care delivery tech to ensure it is meeting your needs and those of your clients. Consider clinical effectiveness, ability to meet your practice administration needs, and security.</td>
<td>Some kinds of options:</td>
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<tr>
<td></td>
<td>✗ The videoconferencing software you wish to use.</td>
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<td>✗ The secure messaging/secure email service you wish to use (if you are trained in textual based therapy.)</td>
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<td>✗ The telemental health practice platform you wish to use.</td>
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<td>✗ The telemental health company you wish to work for.</td>
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