



**Greetings from Empowered!** We are wishing you wellness, health, and peace of mind during the recent social changes due to Covid-19 (the novel coronavirus). We know change can be hard and can feel scary, and we want to support you as best we can during this time of uncertainty.

The CDC and OSHA have set health guidelines as of this week in favor of social distancing so we can all keep one another healthy and thriving. Because of this, we are highly suggesting that all clients who can do so move to Telehealth temporarily.

### **What is Telehealth? Can ABA happen via Telehealth?**

*Telehealth is an atypical format for ABA services, however many services can be offered this way, and we are following best practice guidelines from DMH, MOHealthnet, and the Council of Autism Service Providers (CASP). Depending on individual client goals and programs, for some clients Behavior Reduction Programming may be feasible via Telehealth, for some Skill Building Programming may be feasible via Telehealth, and for some only Parent/Staff/Caregiver Training may be feasible via Telehealth. Attached you will find a completed Feasibility of Telehealth Assessment, which details our recommendations for your support team at this time.*

Based on \_\_\_\_\_'s current goals we are currently recommending that \_\_\_\_\_ be completed via Telehealth at this time.

### **What does this involve?**

Telehealth is going to require a **working internet connection**, and some initial Parent/Staff/Caregiver training in order to set up a program that works smoothly and meets everyone's needs. The Feasibility of Telehealth Assessment will provide more information on the level of training and collaboration that may be needed.

In addition to internet access, it is required that the **client remain onscreen** for the duration of the session. If a client goes off screen, the session will stop, and can be resumed when the client returns as a "new session". Because of this you may be asked to sign multiple forms for multiple short sessions, in order to ensure we are accurately reporting session times to funders.

This will require a **location** (such as a private space in the client's home, a quiet room at the offices of a service provider, or some other reliably private space) in which the client can reside during services, and consent of the guardian for this space to be used, as Empowered as an organization cannot control for confidentiality on the end of the client, depending on space used for the session. The BCBA will always be in a HIPAA compliant space for sessions.

This also requires downloading and creating accounts for **two free online programs**: **VSee** (a HIPAA compliant video chat program, like Skype or FaceTime) and **Accupoint** (a program for sharing session notes and remote signing of the notes by a staff or caregiver, or the client themselves if they are their own guardian). Information on setting these programs up is attached, and we are available by phone to walk you through this!

Finally, this requires your (the client and guardian's) **consent**! Please see the attached form.

Please stay safe, and check [www.cdc.gov](http://www.cdc.gov) for ongoing updates.



### Feasibility of Telehealth for Direct Service Provision –Skill Building

1. The client's Skill Building Programs utilize materials which can be shared via internet (ie- laptop, tablet, phone, etc.)			
YES	NO	MAYBE	NOT APPLICABLE
2. The client's Primary Method of Responding is one which can be observed via internet (ie- laptop, tablet, phone, etc.) and which <b>does not</b> require physical prompting (ie- touch)			
YES	NO	MAYBE	NOT APPLICABLE
3. If the client's Primary Method of Responding <b>does</b> require physical prompting (ie- touch), there are consistent staff who may ethically implement this prompting after being trained to do so			
YES	NO	MAYBE	NOT APPLICABLE
4. The client has the ability to reliably attend to a screen (visually, auditorily, or both)			
YES	NO	MAYBE	NOT APPLICABLE
5. The client has the capacity to remain on screen for the duration of a session, (whether in close up, or via the camera being far away and at a wide angle, adequately capturing the entire area which the client may move through for the duration of the session)			
YES	NO	MAYBE	NOT APPLICABLE
6. There are consistent staff/caregivers who can be trained to assist in the set up of a HIPAA compliant telehealth service, who can assist in troubleshooting internet issues, who can verify the ongoing safety of the location in which the client resides for the duration of telehealth services, and who can remotely electronically sign service provision notes			
YES	NO	MAYBE	NOT APPLICABLE
7. The client has access to a location for telehealth services with internet access			
YES	NO	MAYBE	NOT APPLICABLE
8. The client has identifiable reinforcers which can be provided remotely by the BCBA (ie – media based)			
YES	NO	MAYBE	NOT APPLICABLE
9. The client has identifiable reinforcers which can be provided by staff in person with the client, during or in addition to breaks, while telehealth is being provided by the BCBA			
YES	NO	MAYBE	NOT APPLICABLE
10. The client has a reliable method for assenting to programs and withdrawing assent for programs during session, which can be observed and honored via telehealth			
YES	NO	MAYBE	NOT APPLICABLE

Based on this assessment of service feasibility it is recommended that Direct Service Provision for Skill Building be provided via telehealth at this time:

YES- It is Recommended

NO- It is Not Recommended

Feasibility of Telehealth for Direct Service Provision –Behavior Reduction							
<p>1. The client's Behavior Reduction Programs utilize materials which can be shared via internet (ie- laptop, tablet, phone, etc.)</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
YES	NO	MAYBE	NOT APPLICABLE				
<p>2. The Functionally Related Behavioral Procedures (such as verbal feedback, shifts in attention, provision of reinforcement) can be implemented remotely via internet (ie- laptop, tablet, phone, etc.) in ways that are reliably effective, and do not require physical presence of BCBA</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
YES	NO	MAYBE	NOT APPLICABLE				
<p>3. If the Functionally Related Behavioral Procedures (such as verbal feedback, shifts in attention, provision of reinforcement) <b>cannot</b> be implemented remotely via internet (ie- laptop, tablet, phone, etc.) in ways that are reliably effective, there are consistent staff/caregivers who may ethically implement this alongside the BCBA during telehealth after being trained to do so</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
YES	NO	MAYBE	NOT APPLICABLE				
<p>4. The client has the ability to reliably attend to a screen (visually, auditorily, or both)</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
YES	NO	MAYBE	NOT APPLICABLE				
<p>5. The client has the capacity to remain on screen for the duration of a session, (whether in close up, or via the camera being far away and at a wide angle, adequately capturing the entire area which the client may move through for the duration of the session)</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
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<p>6. There are consistent staff/caregivers who can be trained to assist in the set up of a HIPAA compliant telehealth service, who can assist in troubleshooting internet issues, who can verify the ongoing safety of the location in which the client resides for the duration of telehealth services, and who can remotely electronically sign service provision notes</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
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<p>7. The client has access to a location for telehealth services with internet access</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
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<p>8. The client has identifiable reinforcers which can be provided remotely by the BCBA (ie – media based)</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
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<p>9. The client has identifiable reinforcers which can be provided by staff in person with the client, during or in addition to breaks, while telehealth is being provided by the BCBA</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
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<p>10. The client has a reliable method for assenting to programs and withdrawing assent for programs during session, which can be observed and honored via telehealth</p> <table border="1"> <tr> <td>YES</td><td>NO</td><td>MAYBE</td><td>NOT APPLICABLE</td></tr> </table>				YES	NO	MAYBE	NOT APPLICABLE
YES	NO	MAYBE	NOT APPLICABLE				

Based on this assessment of service feasibility it is recommended that Direct Service Provision for Behavior Reduction be provided via telehealth at this time:

YES- It is Recommended

NO- It is Not Recommended



## CONSENT FOR TELEHEALTH

### What is Telehealth? Can ABA happen via Telehealth?

Telehealth is an atypical format for ABA services, however many services can be offered this way, and we are following best practice guidelines from DMH, MOHealthnet, and the Council of Autism Service Providers (CASP). Depending on individual client goals and programs, for some clients Behavior Reduction Programming may be feasible via Telehealth, for some Skill Building Programming may be feasible via Telehealth, and for some only Parent/Staff/Caregiver Training may be feasible via Telehealth. Attached you will find a completed Feasibility of Telehealth Assessment, which details our recommendations for your support team at this time.

Based on \_\_\_\_\_'s current goals we are currently recommending that \_\_\_\_\_ be completed via Telehealth at this time.

### Consent for Telehealth Services

I have reviewed the evaluated benefits of telehealth as a service modality for this client by the BCBA. I give my express consent for Empowered services being provided via Telehealth, and understand that services will be provided via synchronous video chat which will not be recorded or stored.

YES \_\_\_\_ NO \_\_\_\_

### Consent and Authorization of Release for Disclosures

I authorize Empowered: A Center for Sexuality, LLC to obtain from and/or disclose to all staff and team members: \_\_\_\_\_, the following caregivers: \_\_\_\_\_, the following family members: \_\_\_\_\_, the following case staff and funders: \_\_\_\_\_, and the following persons: \_\_\_\_\_ for any and all purposes of assessment and implementation of services in person or via telehealth, as well as for the purpose of setting up telehealth or being present to ensure the ethical implementation of telehealth. This includes, but is not limited to, training for the protection of confidential information, collaborative troubleshooting of internet access issues, and shared user information for electronic signatures of session notes via a HIPAA compliant platform called Accupoint.

YES \_\_\_\_ NO \_\_\_\_

### Consent for Telehealth Goals

I consent to any and all additional skill building goals deemed appropriate by the BCBA in order to ethically and legally implement telehealth services (such as, but not limited to, skill building for attending to a screen or remaining on screen for the duration of a session).

YES \_\_\_\_ NO \_\_\_\_

### Consent for COVID-19 Telehealth Platform Discretion per the U.S. Department of Health & Human Services

As of 03/17/2020 the U.S. Department of Health & Human Services electronically posted a notification allowing the use of "popular applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype, to provide telehealth without risk that the OCR might seek to impose a penalty for noncompliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency."

I have been made aware that these third party applications potentially introduce privacy risks, are not HIPAA compliant, and that my team should enable encryption and privacy modes when using these applications. I am aware that Empowered cannot guarantee confidentiality with the use of these applications to HIPAA standards. I am aware that Empowered will first attempt to utilize a HIPAA compliant video chat platform, VSee, but that if it for any reason poses an undue burden on the client and staff to utilize, I consent to them using one of the above listed video chat platforms.

YES \_\_\_\_ NO \_\_\_\_

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Client/ Guardian Signature

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Date