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For Psychological Health  
& Traumatic Brain Injury

# Legal, Ethical, Security and Privacy Issues Relating to the Use of Behavioral Health Technology Tools in Clinical Care

**March 26, 2015, 1-2:30 p.m. (ET)**

## **Presenter:**

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## **Moderator:**

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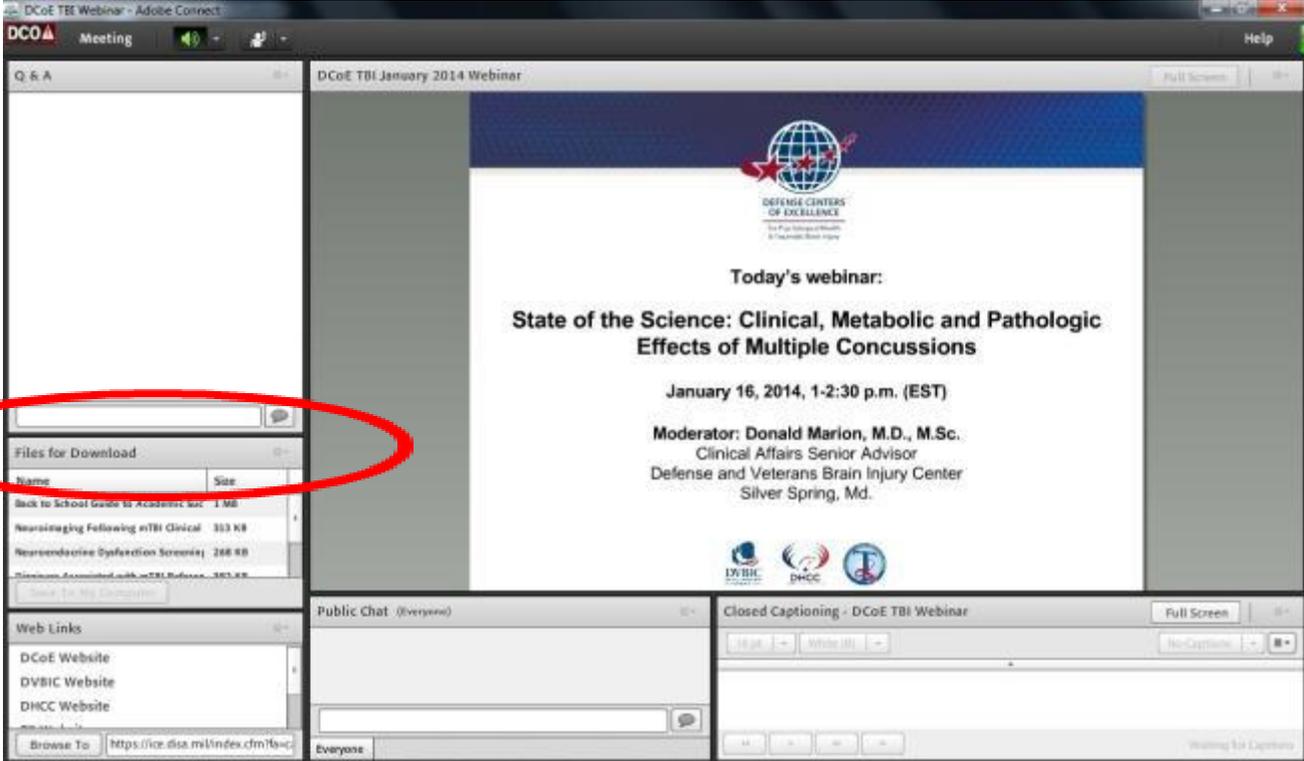


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The screenshot displays a webinar interface with several panels. The main content area shows the webinar title: "State of the Science: Clinical, Metabolic and Pathologic Effects of Multiple Concussions" by Donald Marion, M.D., M.Sc. A red circle highlights the "Files for Download" panel on the left, which contains a table of resources:

Name	Size
Back to School Guide for Academics	1 MB
Neuroimaging Following mTBI Clinical	353 KB
Neuroendocrine Dysfunction Screens	266 KB
Diagnosis Associated with mTBI Referral	303 KB

Below the table is a "Web Links" section with links to DCoE, DVBIC, and DHCC websites. A "Public Chat" window is also visible at the bottom.

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- The authority for training of contractors is at the discretion of the chief contracting official.
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- **Psychology:** This activity complies with all of the Continuing Education Criteria identified through the American Psychological Association (APA) Continuing Education Requirements.
- **NASW:** National Association of Social Workers (NASW), North Carolina Chapter: Southern Regional AHEC will award contact hours commensurate to the length of the program to participants who attend 100% of the program.



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- Participants may chat with one another during the webinar using the chat pod.
- The chat function will remain open 10 minutes after the conclusion of the webinar.

# Webinar Overview

As behavioral health care providers embrace the integration and incorporation of technology into current practice, it is important to understand both the benefits and risks. The presentation will include a discussion of statutory and regulatory guidance regarding security and privacy issues involving telehealth and other types of behavioral health technology tools in the clinical environment. Specifically, it will address the Health Insurance Portability Act of 1996 (HIPAA), the Privacy Act and related DoD guidance and will discuss ethical considerations regarding the use of technology in a clinical setting.

During this webinar, participants will learn to:

- Identify security and privacy risks related to the use of mobile technology in clinical care
- Evaluate potential security and privacy risks in current clinical practice
- Implement administrative, physical and technical safeguards used to protect patient data
- Interpret the security and privacy guidelines and be able to explain them to patients to allow them to make informed decisions regarding their health data.

# Bryan Wheeler

- Currently Deputy General Counsel, Defense Health Agency
- Previously served as Associate General Counsel with the Office of General Counsel (OGC), TRICARE Management Activity (TMA), Falls Church, VA with primary duties as counsel to the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury and the TRICARE Regional Office-North

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# **Legal, Ethical, Security and Privacy Issues Relating to the Use of Behavioral Health Technology Tools in Clinical Care**

Bryan Wheeler, Deputy General Counsel  
Defense Health Agency

# Disclosure

- The views expressed in this presentation are those of the presenters and do not reflect the official policy of the Department of the Army, Defense Department or U.S. Government.
- I have no relevant financial relationships to disclose.
- I do not intend to discuss the off-label/investigative (unapproved) use of commercial products.
- I will be discussing web and mobile applications that have been developed by the Defense Department, including those developed by the National Center for Telehealth and Technology (T2).

# Introduction

- Legal Issues
  - More than telemedicine
  - More than licensure, credentialing and privileging issues
  - More than reimbursement issues

# Overview

- Legal Considerations
- Security and Privacy Issues
- Ethical Concerns
- Cultural Considerations



YES, I SUPPOSE INSTIGATING FIGHTS BETWEEN PEOPLE THEN STEALING THEIR FOOD DURING THE CHAOS COULD BE CONSIDERED A SURVIVAL SKILL...

AND THUS BEGAN THE LEGAL PROFESSION

10-20  
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# Legal Considerations

- Privacy Act (1974)
- HIPAA (1996)
- Health Information Technology for Economic and Clinical Health Act” or the “HITECH Act (2011)



HEALTH AFFAIRS

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AND RESERVE AFFAIRS)  
COMMANDER, JOINT TASK FORCE NATIONAL CAPITAL  
REGION-MEDICAL

**SUBJECT: Waiver of Restrictive Licensure and Privileging Procedures to Facilitate the  
Expansion of Telemedicine Services in the Military Health System**

- References:
- (a) Department of Defense 6025.13-R, "Clinical Quality Assurance in the Military Health System," June 11, 2004
  - (b) Title 10, United States Code, Section 1094(d) (as amended by Section 713 of the National Defense Authorization Act for Fiscal Year 2012)
  - (c) Title 32, United States Code, Section 502(f) (2011)
  - (d) The Joint Commission Comprehensive Accreditation and Certification Manual, July 1, 2012 (see Standard Medical Staff 13.01.01 titled "Telemedicine")
  - (e) Sections 482.12(a)(1) through (a)(7) and 482.22(a)(1) through (a)(2) of Title 42, Code of Federal Regulations (Regulations of the Centers for Medicare and Medicaid Services)
  - (f) American Telemedicine Association, [www.americantelemed.org](http://www.americantelemed.org), "Telemedicine Standards & Guidelines," current edition
  - (g) American Telemedicine Association, "Practice Guidelines for Videoconferencing-Based Telemental Health," current edition

# PC COACH



# Case Study 1

- You are using PE Coach with a PE patient. Their saved session audio recording is backed up by another audio app they have on their phone and uploaded to the cloud. This recording is then accessed by a friend who has access to their audio uploads.
- What are the clinical implications of this?

# T2 Mood Tracker



Photo credit by National Center for Telehealth and Technology

# Case Study 2

- You are using moodtracker with a bipolar patient and they want to send you their results 2 times a week (by screen shot). This information is sent to you via the patient's personal email to your military email account. You put this information in the patient EHR.
- What security/privacy concerns might you have?

# Case Study 3

- You have a patient that is wearing a fitbit and tracking their exercise, calorie, and sleep. They are also using moodtracker and Mindfulness coach. Your patient transmits all this information to you via NFC that is on your personal phone as well as your clients personal phone.
- What security/privacy concerns might you have or things you might want to consider.

# Guidelines for the Practice of Telepsychology

- Telepsychology is defined as the provision of psychological services utilizing telecommunication technologies
- Psychologist's proper knowledge of and competence in the use of telecommunication technologies
- The psychologist's need to ensure that client/patient has a complete understanding of the increased risks to loss of security and confidentiality when using telecommunication technologies.
- Understanding of Interjurisdictional Practice

(American Psychological Association, 2012)

# Applicable APA Ethical Standards

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Standard 2: Competence

Standard 3: Human Relations

Standard 4: Confidentiality

# Ethics Code Refresher

- When using a treatment or tool in therapy that you aren't familiar with, what do you need to consider?
  - What ethics codes would inform this?

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Calvin and Hobbes

by Bill Watterson



# APA Ethics Standard 2: Competence

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This Standard will address two topics of relevance:

2.01 Boundaries of Competence

2.03 Maintaining Competence

# Group Discussions

Are there technologies with current limited empirical evidence that have been used effectively?

- Discuss why the technology was selected for that individual
- How did therapist monitor effectiveness?
- How did therapist safe guard against harm/contraindications?
- How is this the same/different than competent integration of telepsychology in clinical care?

# APA Ethics Standard 2: Competence

## Recommendations

- Always put evidence-based practices first
- Take the time to practice prior to integration in therapy
- Education and training
- Consultation with colleagues

# APA Ethics Code Standard 3: Human Relations

This Standard will address three topics of relevance:

3.05 Multiple Relationships

3.06 Conflicts of Interest

3.10 Informed Consent

# APA Ethics Code Standard 3: Human Relations

This Standard will address three topics of relevance:

**3.05 Multiple Relationships**

3.06 Conflicts of Interest

3.10 Informed Consent

# Section 3.05 Multiple Relationships Recommendations

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- Psychologists are aware of potential boundary issues that may arise in using specific telecommunication technologies.
- Psychologists are encouraged to weigh the risks and benefits of dual relationships that may arise with their client/patient during the use of telecommunication technologies before entering such a relationship

# APA Ethics Code Standard 3: Human Relations

This Standard will address three topics of relevance:

3.05 Multiple Relationships

3.06 Conflicts of Interest

3.10 Informed Consent

# Section 3.06 Conflict of Interest Recommendations

- Know what's available
- Think of what tools would be valuable to you and your patients
- Know the tool

# APA Ethics Code Standard 3: Human Relations

This Standard will address three topics of relevance:

3.05 Multiple Relationships

3.06 Conflicts of Interest

3.10 Informed Consent

# Section 3.10 Informed Consent Recommendations

- Full disclosure with patients regarding empirical support
- Ensure capacity and comprehension
- Ensure understanding of voluntariness
- Add something to your informed consent

# Activity

## Adding Something to your Informed Consent

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- By yourself, or with your neighbor, create a few lines of text that you might add to your current informed consent that relate to use of technology in sessions.
- Share with the group?

# Corresponding Guideline from the APA Task Force on Telehealth

Considerations to be included in informed consent:

- Manner in which they and clients/patients will use the specific technologies
- Boundaries that will be established and observed
- Procedures for responding to electronic communications from clients
- Provide client/patient with adequate information regarding inherent risks a technology may pose in both equipment and in the processes that will be utilized with the equipment

# APA Ethics Code Standard 4: Confidentiality

This standard will address four topics of relevance:

4.01 Maintaining confidentiality

4.02 Discussing the limits of confidentiality

4.03 Recording

4.04 Minimizing Intrusions on Privacy



“My lawyer will call your lawyer as soon as he speaks with *his* lawyer.”

# Case Study 4

Patient arrested and has mobile app data on phone with assessment results indicating they have a substance use problem and anger problems. What are the limits of confidentiality of the data on his phone? What if the data was sent to his provider as well?

# Case Study 5

Patient commits suicide and had tracked her very depressed mood via a mobile app and sent that information to their provider. What is the liability of provider?

# APA Ethics Code Standard 4: Confidentiality

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4.02 Discussing the limits of confidentiality

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4.04 Minimizing Intrusions on Privacy

# Cultural Considerations

- What comes to mind when you think of cultural considerations and technology?

# Cultural Considerations

## Variables to consider

- Ethnic, linguistic and culturally diverse populations (racial/ethnic)
- Military culture
- Technology culture (familiarity with, knowledge of use of technology, “Digital native vs. Digital Immigrant”)

# Digital Natives vs Immigrant

- Standup if you were born after 1985
- PEW Research Center's Internet & American Life Project (Pew Research, 2012)
  - Smartphone owners in 2014:
    - White 53%
    - African-American 59%
    - Hispanic 61%
- PEW (2012) Mobile Health report:
  - “Younger adults, minorities, and those in particular need of health information lead the way”

# Cultural Considerations

## Need to consider:

- Differences between provider and patient
- How differences may impact quality of care provided
- Methods of assessing variables
- Level of acculturation (influence on psychological help-seeking behavior, compliance with treatments and treatment outcomes)
- Addressing preconceived notions.

# Additional Resources

- Bush, N. E., Dobscha, S. K., Crumpton, R., Denneson, L. M., Hoffman, J. E., Crain, A., & Kinn, J. T. (2014). A Virtual Hope Box smartphone app as an accessory to therapy: Proof-of-concept in a clinical sample of veterans. *Suicide and Life-Threatening Behavior, Advance online publication*. DOI: 10.1111/sltb.12103
- Kuhn, E., Greene, C., Hoffman, J., Nguyen, T., Wald, L., Schmidt, J., ..., & Ruzek, J. (2014). Preliminary evaluation of PTSD Coach, a smartphone app for post-traumatic stress symptoms. *Military Medicine, 179*(1), 12-18. DOI: 10.7205/MILMED-D-13-00271
- Mohr, D. C., Burns, M. N., Schueller, S. M., Clarke, G., & Klinkman, M. (2013). Behavioral intervention technologies: Evidence review and recommendations for future research in mental health. *General Hospital Psychiatry, 35*(4), 332-338. DOI: 10.1016/j.genhosppsych.2013.03.008
- Richards, D., & Richardson, T. (2012). Computer-based psychological treatments for depression: A systematic review and meta-analysis. *Clinical Psychology Review, 32*(4), 329-342. doi: 10.1016/j.cpr.2012.02.004
- Wang, J., Wang, Y., Wei, C., Yao, N., Yuan, A., Shan, Y., & Yuan, C. (2014). Smartphone interventions for long-term health management of chronic diseases: An integrative review. *Telemedicine and e-Health, 20*(6): 570-583. DOI: 10.1089/tmj.2013.0243.

# References

American Psychological Association. (2010, 2002a). *Ethical Principles of Psychologists and Code of Conduct*. Washington, DC.

American Psychological Association. (2007). *Record Keeping Guidelines*. Retrieved from <http://www.apa.org/practice/guidelines/record-keeping.pdf>

American Psychological Association. (2003). *Guidelines on Multicultural Training, Research, Practice and Organizational Change*.

American Psychological Association. (2012). *The Guidelines for Providers of Services to Ethnic, Linguistic, and Culturally Diverse Populations*. Washington, DC.

American Psychological Association. (2012). Task Force on Telepsychology Guidelines for the Practice of Telepsychology.

Pew Research Mobile Technology Fact Sheet. (2012). Retrieved from <http://www.pewinternet.org/fact-sheets/mobile-technology-fact-sheet/>

# Questions?

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- We will respond to as many questions as time permits.



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- Or send comments to [usarmy.ncr.medcom-usamrmc-dcoe.mbx.dcoe-monthly@mail.mil](mailto:usarmy.ncr.medcom-usamrmc-dcoe.mbx.dcoe-monthly@mail.mil)

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# Save the Dates

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## **Next DCoE TBI Webinar:**

**Date/Time:** Thursday April 9, 2015, 1-2:30pm ET

**Title:** *Prevention and Management of Concussion/mild Traumatic Brain Injury (TBI) in Youth Sports*

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## **Next DCoE PH Webinar:**

**Date/Time:** Thursday April 30, 2015, 1-2:30pm ET

**Title:** *Psychological Health and Resilience of Children in Military Families: How Child Narcissism Impacts their Development and Implications for Clinical Practice*

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# DCoE Contact Info

**DCoE Outreach Center**  
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