

Policy and evidence base for psychological interventions by video call and telephone

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Key UK policy drivers

NHS Topol Review:

'Digital first': all patients to have option of primary care video appts by 2024

The NHS Long Term Plan



1. How technology will impact on healthcare and its workforce

2. The skills & knowledge tomorrow's healthcare workforce will need

Top technologies poised to impact mental healthcare:

- 1st Telemedicine
- 4th Digital therapies

The digital future of mental healthcare and its workforce: a report on a mental health stakeholder engagement by Helen Forth, 2019



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Key digital mental health practice guidelines

Effective therapy via video: Top tips

CE PAPER

Digital Health Skills

Digital Competencies

Knowledge Ability

Working Online

Professor Tim Bond

Guidelines for the Practice of Telepsychology

Join Task Force for the Development of Telepsychology Guidelines for Psychologists

BABCP membership

act0

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Joint guidance (Psychological Professions Network, British Psychoanalytic Council, Association of Child Psychologists, BABCP, BACP, ACP, AFT, BPS)

- "Digital delivery should not be ruled out on the grounds of age (children and adults), disability, language, or type of difficulty. Reasonable adjustments should be made to enable all to engage in this as far as possible, recognising that it will not be possible for all"
- "Consent to digital delivery is implied through a service user accepting the invitation or engaging in the communication through the requested channel, although practitioners should endeavour to discuss the implications of digital delivery with service users at the outset"

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IAPT guide for delivering treatment remotely during the coronavirus pandemic, 25 March 2020

- "Do not assume that digital modes of delivery will be unsuitable for older adults. In 2019, 91% of all adults in the UK had recently used the internet, and recent internet use increased in the 65 to 74-year age group from 52% in 2011 to 83% in 2019, the largest increase across all age groups and closing the gap on younger ones.1."

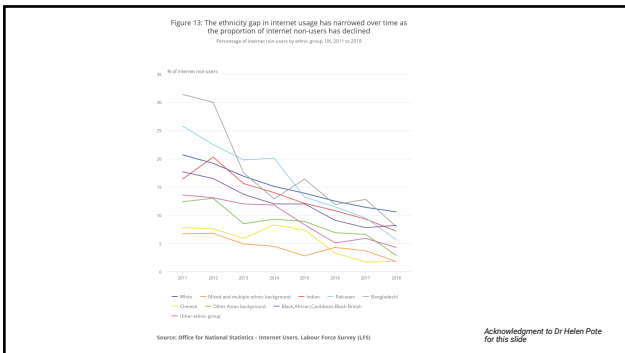
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Digital Exclusion

- <https://cy.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/articles/exploringthekuksdigitaldivide/2019-03-04>
- <https://www.bbc.com/news/health-50088888>
- 10% of the UK population are non-internet users (5.3million) -reducing
- NIU 58% were women, 79% were over 65yrs, 55%over 75yrs
- NIU 56% disabled (22% registered disabled in the population)
- Some small variations by ethnic group – raw figures?
- 45% of internet users were using it for video calls
- 54% for looking at health related information
- 13% using internet to book health appointments

Acknowledgment to Dr Helen Pote for this slide

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Delivering Interventions via Telephone or Videocall

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Evidence Base

Telephone 1: Day & Schneider (2002)

- N=80 received CBT
- Randomly assigned to F2F therapy, 2-way audio ('telephone') or VC
- Outcomes measured included therapeutic alliance and distress (Brief Symptom Inventory)
- No significant difference between groups on outcome.
- Significant difference on alliance (Client Participation) **in favour of telephone and VC over F2F**

"Client Participation scores were higher when clients were not face to face with their therapists. This dimension included ratings on such features as clients' activity level, initiative, trust, spontaneity, and Disinhibition....speculations ...are that clients i..made more of an effort to communicate, taking more responsibility for the interaction than they did in face-to-face traditional therapy, or that distance made openness seem safer."

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Telephone 2: Bee et al. (2010)

- Qualitative evaluation of the acceptability of engaging in CBT delivered by telephone
- 'Relatively high' acceptance of telephone as a medium for therapy
- Differences in acceptability were associated with pre-existing attitudes towards the possibility of psychological closeness in remote work
- Openness to change: participants reported adapting to telephone as a therapy medium as the work progressed

"I think if anything because it was over the phone I felt that you honed in on the words more, the words became more important, there were absolutely no distractions." (S2P04, Male, Depression, 6 weeks)

"For me it was that I don't know who I'm talking to, I mean I don't need to see a photograph but its just that I don't know what he is, he could be anybody, I'm trusting him with all this information and I must admit he's good he's first class in what he does but I'm still a little. I hope he's qualified" as I have no idea and it does cross my mind, so you never fully, well for me personally I'm never fully confident even though from the way he talks I'd be surprised if he isn't qualified. But I don't know." (S1P02, Male, Depression & Anxiety 15 years)

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Telephone 3: Irvine et al. (2020)

- Systematic review of studies comparing therapeutic relationship in telephone and face to face therapy
- Small number of heterogeneous studies
- No difference in therapeutic alliance, disclosure, empathy, attentiveness or participation found, despite widespread misgivings amongst therapists about therapeutic relationship quality by telephone

"Available evidence suggests a lack of support for the viewpoint that the telephone has a detrimental effect on interactional [therapeutic alliance] aspects of psychological therapy. The challenge for clinical practice is to translate this evidence into a change in practitioner and patient attitudes and behaviours"

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Video 1: Systematic reviews on efficacy

Adults

- Reviews on individual interventions by VC attest to its effectiveness: Abel et al (2017), Chakrabarti et al (2015), Drago et al (2016), Backhaus et al (2012), Tuerk et al (2018); Garcia-Lizana (2010); Osenbach et al (2013); Rees & Maclaine (2015); Norwood et al (2018)
- Rees & Maclaine (2015) reviewed 20 anxiety disorder studies (mainly CBT). Effective for PTSD, OCD, mixed anxiety and depression, panic disorder and social phobia. Some conditions like GAD have not yet been studied and therefore it is not possible to conclude whether it is effective or not.
- Norwood et al (2018) say outcome is not inferior to F2F but working alliance is (but they have some caveats on that)

Children & young people

- CBT by VC is effective for CYP too: Vigerland et al ((2016), Berryhill et al. (2019)

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Video 2: Patient perceptions

Jenkins-Guarnieri et al (2015) - Systematic review of 14 studies on therapeutic alliance and patient satisfaction

- Similar satisfaction levels comparing telephone and videoconferencing to in-person therapy
- Telehealth groups reduced satisfaction

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Video 3: Therapist perceptions

Perle et al. (2013) surveyed clinical psychologists' attitudes

- Trainees had similar attitudes to qualified psychologists
- 62% trepidation about online therapy
- CBT and Systemic psychologists had more favourable opinions than psychodynamic or existential psychologists
- Concerns raised included evidence base, privacy, confidentiality, crisis situations, billing, licensure, ethical guidance.
- 21% thought they possessed sufficient training but 75% said they would be willing to utilise telehealth with additional training

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Video 3: Therapist perceptions cont'

- Therapists are often more negative than clients about therapy by videoconferencing. Typically, therapists who lack experience in videoconferencing are most negative. The more providers use the technology, the more their attitudes shift towards the positive (Whitten & Kuwahara, 2004).
- Rees & Stone (2005) demonstrated how therapist attitudes to online therapy shape their view of the therapeutic alliance.
- They randomly allocated 30 clinical psychologists to watch an identical therapy session, either in-person or over videoconferencing.
- Psychologists in the videoconferencing condition rated the therapeutic relationship significantly lower than those of the in-person condition, despite identical content.
- Most participants had never used videoconferencing before.
- The attitude and practice of colleagues seems to be major influencer on whether clinicians appraise it as potentially useful: therefore group norms rather than the evidence base seems to determine technology acceptance (Gagnon et al., 2003)

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Video 4: Therapeutic relationship

- The therapeutic alliance is preserved: Socala, M., et al. (2012), Simpson & Reid (2014) but Norwood et al (2018) say not (although they have some caveats). Patient satisfaction is similar: Jenkins-Guarnieri et al (2015)
- Day & Schneider (2002) N=80 received CBT. Randomly assigned to F2F therapy, 2-way audio ('telephone') or VC. Outcomes measured included therapeutic alliance and distress (Brief Symptom Inventory)
- No significant difference between groups on outcome.
- Significant difference on alliance (Client Participation) **in favour of telephone and VC over F2**

"Client Participation scores were higher when clients were not face to face with their therapists. This dimension included ratings on such features as clients' activity level, initiative, trust, spontaneity, and Disinhibition...speculations...are that clients...made more of an effort to communicate, taking more responsibility for the interaction than they did in face-to-face traditional therapy, or that distance made openness seem safer."

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References

- Abel, E. A., Glover, J., Brandt, C. A., & Godleski, L. (2017). Recommendations for the reporting of Telemental Health (TMH) literature based on a systematic review of Clinical Video Teleconferencing (CVT) and depression. *Journal of Technology in Behavioral Science*, 2(1), 28-40.
- Backhaus, A., et al., *Videoconferencing Psychotherapy: a systematic review*. Telehealth, Telepsychology, and Technology, 2012. 9(2): p. 111-131.
- Bee, P. E., Bower, P., Gilbody, S., & Lovell, K. (2010). Improving health and productivity of depressed workers: a pilot randomized controlled trial of telephone cognitive behavioral therapy delivery in workplace settings. *Gen Hosp Psychiatry*, 32(3):337-40. doi: 10.1016/j.genhosppsych.2010.01.006.
- Berryhill, M. B., Halli-Tierney, A., Culmer, N., Williams, N., Betancourt, A., King, M. & Ruggles, H. (2019). Videoconferencing psychological therapy and anxiety: a systematic review. *Family Practice*, 36, 53-63. doi: 10.1093/fampra/cmz072
- Chakrabarti, S., *Usefulness of telepsychiatry: A critical evaluation of videoconferencing-based approaches*. World Journal of Psychiatry, 2015. 5(3): p. 286.

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References

- Day, S. X., & Schneider, P. L. (2002). Psychotherapy using distance technology: A comparison of face-to-face, video, and audio treatment. *Journal of Counseling Psychology*, 49(4), 499.
- Drago, A., T.N. Winding, and N. Antypa, *Videoconferencing in psychiatry, a meta-analysis of assessment and treatment*. European Psychiatry, 2016. 36: p. 29-37.
- García-Lizana, F., & Muñoz-Mayorga, I. (2010). What about telepsychiatry? A systematic review. *Primary care companion to the Journal of clinical psychiatry*, 12(2), PCC.09m00831. <https://doi.org/10.4088/PCC.09m00831whi>
- Irvine, A., Drew, P., Bower, P., Brooks, H., Gellatly, J., Armitage, C. J., ... & Bee, P. (2020). Are there interactional differences between telephone and face-to-face psychological therapy? A systematic review of comparative studies. *Journal of Affective Disorders*, 265, 120-131
- Jenkins-Guarnieri, M. A., Pruitt, L. D., Luxton, D. D., & Johnson, K. (2015). Patient Perceptions of Telemental Health: Systematic Review of Direct Comparisons to In-Person Psychotherapeutic Treatments. *Telemedicine and e-Health*, 21(8), 652-660.
- Lerma, A., Perez-Grovas, H., Bermudez, L., Peralta-Pedrero, M.L., Robles-García, R. and Lerma, C. (2017), Brief cognitive behavioural intervention for depression and anxiety symptoms improves quality of life in chronic haemodialysis patients. *Psychol Psychother Theory Res Pract*, 90: 105-123. <https://doi.org/10.1111/nant.12088>

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References

- Norwood, C., Moghaddam, N. G., Malins, S., & Sabin-Farrell, R. (2018). Working alliance and outcome effectiveness in videoconferencing psychotherapy: A systematic review and noninferiority meta-analysis. *Clinical psychology & psychotherapy*, 25(6), 797–808. <https://doi.org/10.1002/cpp.2315>
- Osenbach, J.E., O'Brien, K.M., Mishkind, M. and Smolenski, D.J. (2013). Synchronous telehealth technologies in psychotherapy for depression: A meta-analysis. *Depress Anxiety*, 30: 1058-1067. <https://doi.org/10.1002/da.22165>
- Perle, J.G., Langsam, L.C., Randel, A., Lutchman, S., Levine, A.B., Odland, A.P., Nierenberg, B. and Marker, C.D. (2013). Attitudes Toward Psychological Telehealth: Current and Future Clinical Psychologists' Opinions of Internet-Based Interventions. *J. Clin. Psychol.*, 69: 100-113. <https://doi.org/10.1002/jcop.21312>
- Rees, C.S. and MacLaine, E. (2015). Videoconferenced treatment for anxiety disorders. *Australian Psychologist*, 50: 259-264. <https://doi.org/10.1111/apa.12122>
- Rees, C. S., & Stone, S. (2005). Therapeutic alliance in face-to-face versus videoconferenced psychotherapy. *Professional Psychology: Research and Practice*, 36(6), 649.
- Simpson, S.G. and C.L. Reid, *Therapeutic alliance in videoconferencing psychotherapy: A review*. Australian Journal of Rural Health, 2014. 22(6): p. 280-299.
- Stubbings, Daniel R., Clare S. Rees, Lynne D. Roberts, and Robert T. Kane. (2013). Comparing in-person to videoconference-based cognitive behavioral therapy for mood and anxiety disorders: randomized controlled trial. *Journal of Medical Internet Research*, 15(11).

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References

- Sucala, M., et al., *The therapeutic relationship in e-therapy for mental health: A systematic review*. Journal of Medical Internet Research, 2012. 14(4): p. e110.
- Suler, J. R. (2004). The online disinhibition effect. *Cyber Psychology & Behavior*, 7 (3), 321-326.
- Tuerk, P. W., Keller, S. M., & Acierno, R. (2018). Treatment for Anxiety and Depression via Clinical Videoconferencing: Evidence Base and Barriers to Expanded Access in Practice. *Focus (American Psychiatric Publishing)*, 16(4), 363–369. <https://doi.org/10.1176/appi.focus.20180027>
- Vigerland, S., Lenhard, F., Bonner, M., Lalouni, M., Hedman, E., Ahlen, J., ... Ljotsson, B. (2016). Internet-delivered cognitive behavior therapy for children and adolescents: A systematic review and meta-analysis. *Clinical Psychology Review*, 50, 1-10. doi: 10.1016/j.cpr.2016.09.005.
- Whitten, P., & Kuwahara, E. (2004). A multi-phase telepsychiatry programme in Michigan: organizational factors affecting utilization and user perceptions. *Journal of telemedicine and telecare*, 10(5), 254–261. <https://doi.org/10.1258/1357633042026378>

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Practice guidelines

- APA (2012). Guideline for the practice of telepsychology. *American Psychologist*, 68(9), 791-800
- <https://www.apa.org/practice/guidelines/telepsychology>
- BACP Working online in the counselling professions. Good Practice in Action 047 Fact Sheet. Updated March 2019 and BACP competencies for telephone & e-counselling
- <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/competences-and-curriculum/telephone-and-e-counselling/>
- BPS. Effective Therapy via video: Top tips. DCP Digital healthcare Sub-Committee
- <https://www.bps.org.uk/coronavirus-resources/professional/effective-therapy-video-top-tips>
- ACTO Competencies (video, telephone/VoIP, IM/chat, email)
- <https://acto.org.uk/acto-recommended-competences-for-counselling-and-psychotherapy-online/>

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Resources

- Alesia's collection of free resources <https://onlinepsychologycounselling.sharepoint.com/:/s/Webinarondeliveringtherapbyvideocal/?e=FYbYb7iGhosMKX18blE84ApkceOdmAdsusakzW0bCAye=MClbve>
- Alesia's paperwork templates for online therapists. 13 different documents including online therapy contracts, audio-visual recording policy with consent forms etc: <https://onlinepsychologyandcounselling.com/resources/resources-therapists/online-therapy-paperwork-pack>
- OxCADAT COVID-19 resource area on remote working (need to register but free). Practice guidelines and videos on PTSD, social anxiety and panic <https://oxcadatresources.com/>
- Digitalhealth Skills <https://www.digitalhealthskills.com/news>
- Digital & Remote CBT. Alice Kerr and Emma Warnock-Parkes. I have uploaded a copy here: https://onlinepsychologycounselling.sharepoint.com/:s/Webinarondeliveringtherapbyvideocal/?e=WWK2PXDNIixBJRGMV6kBY0135-NkikuSK4yHJt_fw?e=eNpPlT

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