Psychological Practice Using Telepsychology

Technology in Practice Survey of Alberta Psychologists

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Survey: November 2020
Report: February 2021

Prepared and respectfully submitted by the PAA Technology in Practice (TiP) Committee:

- Dr. Michael Stolte (Chair)
- Mr. Andrew Luceno
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Results compiled by Dr. Stolte with additional review and contributions by remaining committee members.

Introduction

The Technology in Practice (TiP) Committee was established by the Psychologist's Association of Alberta (PAA) in February 2020. The COVID pandemic was declared in March 2020 leading to widespread adoption of telepsychology in psychological practice. Based in part on a PAA Task Force in Technology Report formally released in January 2020, ethical and competent use of telepsychology were identified as priority areas by the committee members. Consequently, as an initial step, an online survey was developed by the committee to consult with the membership about its current use of telepsychology in Alberta, and its confidence in using this technology ethically and appropriately, particularly during the time of the COVID-19 pandemic.

Background and Context

Chenneville and Schwartz-Mette (2020) summarize many of the ethical concerns with the rapid migration of psychology to telepractice due to COVID-19. These include balancing out organizational needs with the specific needs of psychologists, the adoption of previously unfamiliar supports such personal-protective equipment (PPE) and telepsychology platforms, adopting new practices in emergency situations and their limitations, the need to gain competence quickly in these new technologies, the heightened need for "duty of care" due to pandemic distress, the need to protect against unfair discrimination, the need to modify informed consent, confidentiality and privacy procedures, the need to be transparent about the effectiveness of modified procedures, the need to engage in education and training about the adoption of new procedures, and careful examination of assessment and counselling practices to ensure compliance with normative procedures.

As additional context for psychologists, the College of Alberta Psychologists, the regulatory authority for psychologists in Alberta, released Professional Practice Guidelines in July 2020 that emphasized the need for psychologists to migrate services to "distance technology" (p. 4) whenever possible, as well as adhere to health screening, physical distancing, sanitization (e.g., of materials), and PPE requirements. The purpose for the recommended migration to telepsychology was to ensure compliance with public health orders related to COVID-19 management and prevention. Though laudable and necessary, the decision on what telepsychology platform to select was left up to individual organizations and practitioners.

Pierce, Perrin, Tyler, McKee and Watson (2020) reported on this rapid practice shift to telepsychology in an American context. Surveying 2,619 psychologists across the United States, they reported a 12-fold increase in the adoption of telepsychology due to the pandemic, with 7.07% of psychologists using telepsychology in their clinical work prior to the pandemic, and 85.53% at the time of the survey (May 2020). This rapid adoption of telepsychology in response to the pandemic was observed across all psychologist practice settings.

A few months later (August 2020), Sammons, VandenBos, Martin, and Elchert (2020) surveyed 3,209 American psychologists and found similar results. Pre-pandemic, only 11% of psychologists saw any patients via telepsychology (e.g., videoconference), but within a few weeks of the pandemic, 75% of psychologists were using telepsychology in some capacity. Six months later, 53% of respondents were ***exclusively*** using telepsychology to provide psychological services. Interestingly, the authors also identified that the majority of psychologists were using one of two platforms: Doxy.me (30%) and Zoom (25%). It was also reported that older psychologists were more likely to use a telephone rather than an online platform, and also use less specialized platforms such as Facetime. Younger psychologists were more likely to adopt fully-integrated health record platforms such as Simple Practice or TherapyNotes.

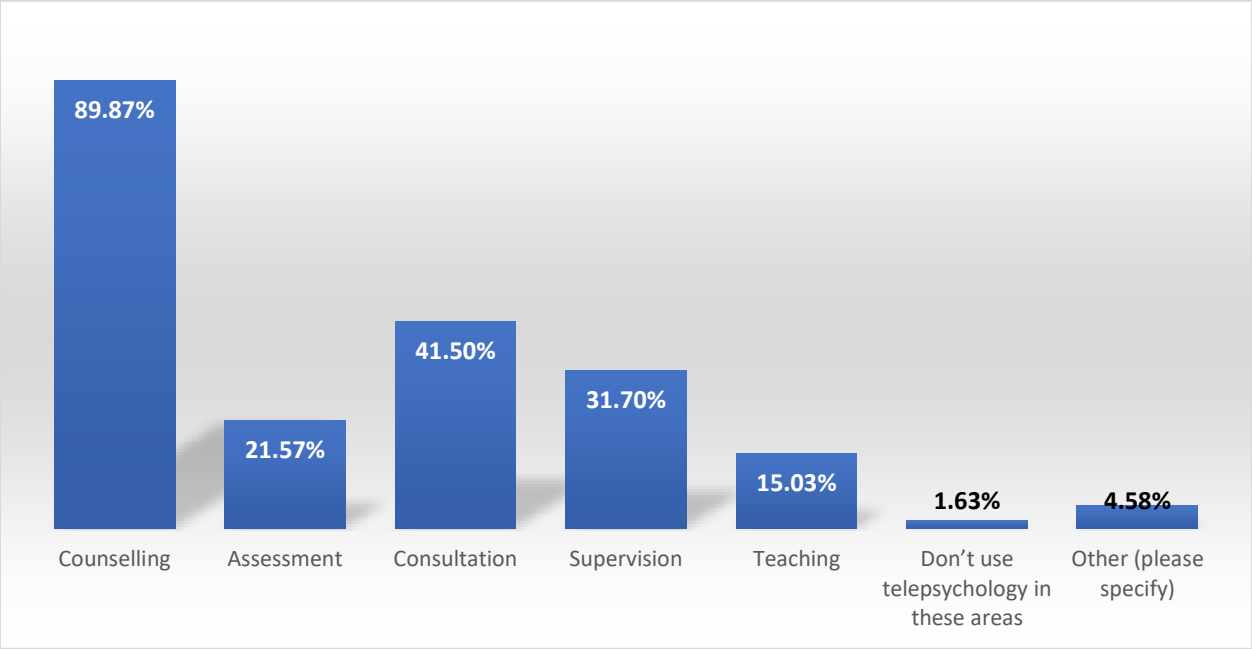
In the Canadian context, less is known about the impact of COVID-19 on psychological practice. Goghari, Hagstrom, Madon, and Messer-Engel (2020) identified the impact of the pandemic on academic training programs but little is known about impact on other practice areas. The PAA contacted the other provincial associations in Canada and only one province (Nova Scotia) reported on consulting with its members on this issue. Nova Scotia psychologists were surveyed in April 2020 and results were published in the Nova Scotia Psychologist (Fall, 2020). Similar to American data, 89% of psychologists were using some form of telepsychology, 63% had completed telepsychology training, and 51% were using an online platform. From the online platforms listed, three were most popular Zoom (49%), Doxy (28%) and Jane (10%). Additionally, 67% said they had transitioned to a home office potentially impacting privacy and security. The TIP committee was unable to identify any other Canadian-specific survey data regarding the use and adoption of telepsychology in Canada related to the COVID-19 pandemic.

Current Survey Method

The TiP Committee finalized the 16-item survey in November 2020. The survey was distributed via email to all PAA members between November 6 and 13, 2020 (N = 3,158) via E-news. Membership roster includes 2,074 psychologists (registered or life members), 539 provisional psychologists, with the remaining being students and other affiliates. Response rate was 9.72% (N = 307).

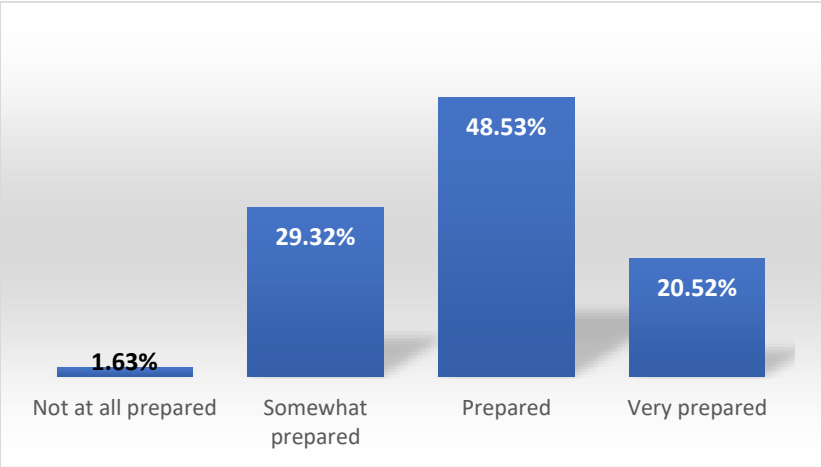
Results

1. What are the primary psychological activities that you engage in that use telepsychology (check all that apply)?



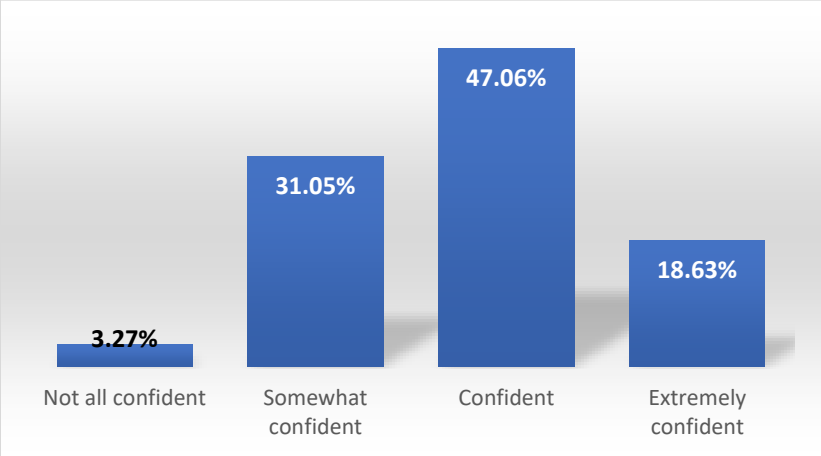
Counselling was the primary activity (89.87%, N = 275), followed by consultation (41.50%, N = 127) and supervision (31.07%, N = 97). Notably, only 1.63% (N = 5) of respondents indicated not using telepsychology in any of these areas. This finding speaks to a need for Canadian telepsychology training programs, as well as thorough coverage of telepsychology in undergraduate and graduate courses.

2. How would you rate your current level of training and preparedness in telepsychology to meet ethical and standards of practice requirements?



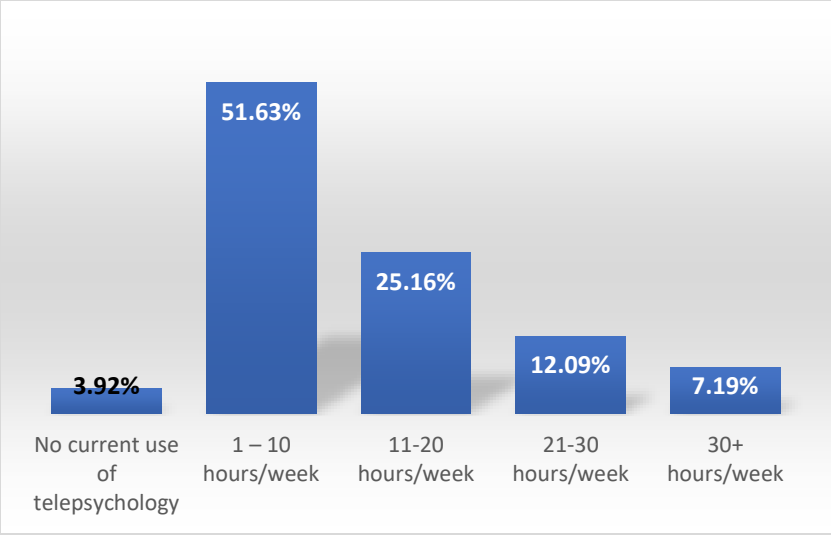
Positively, most respondents rated themselves as being prepared (48.53%, N = 149) or very prepared (20.52%, N = 63) for the practice shift to telepsychology. However, at least 30% indicated needing additional preparation support (N = 95). This suggests there is a need for training in ethical, secure delivery of services via virtual platforms, especially regarding assessment questionnaires whose norms are based on face-to-face data; the provision/adaptation of play therapy and groups, as well as the provision of ethical supervision to colleagues such as students and provisional psychologists.

3. Please rate your comfort level with technology and how confident you are, as a psychologist, you can independently select and choose an appropriate telepsychology platform for your practice setting?



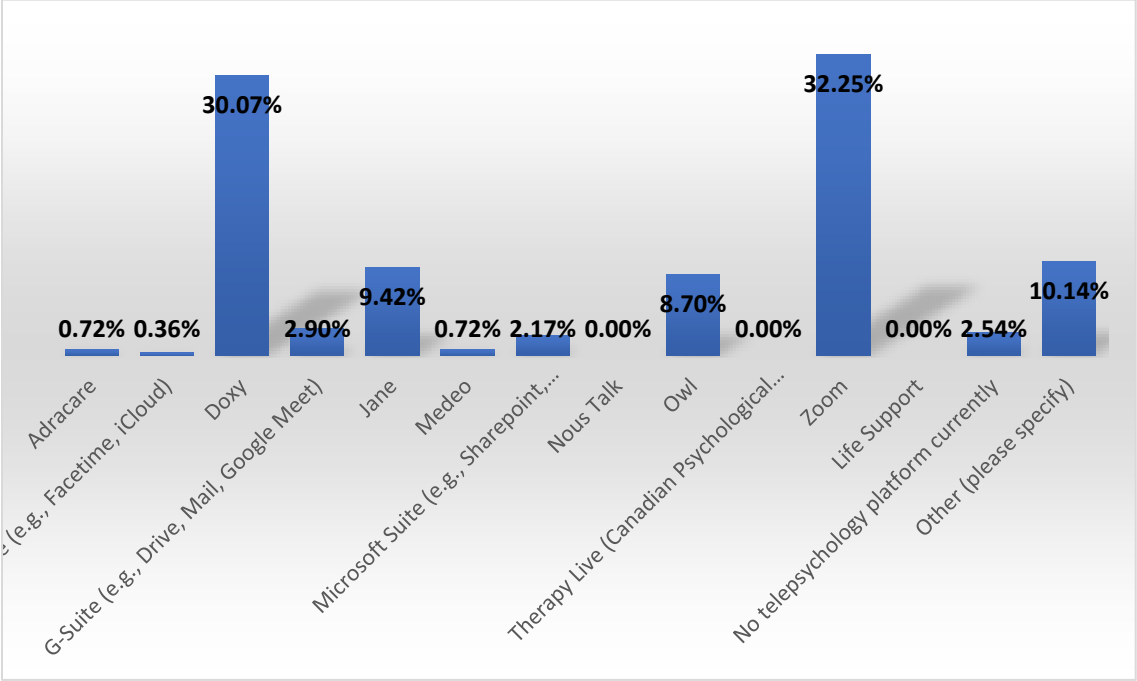
Nearly 66% of psychologists indicated feeling confident (N = 144) or extremely confident (N = 57) in selecting an appropriate telepsychology platform. However, at least 34% of respondents indicated a need for additional training and support (N = 105). Access to formal training in telepsychology would likely increase confidence in choosing an appropriate platform for their practice setting.

4. Of the practice activities you identified above, and thinking of your primary psychological activity (e.g., counselling, assessment, etc.), what is the scale of your current telepsychology practice in this area?



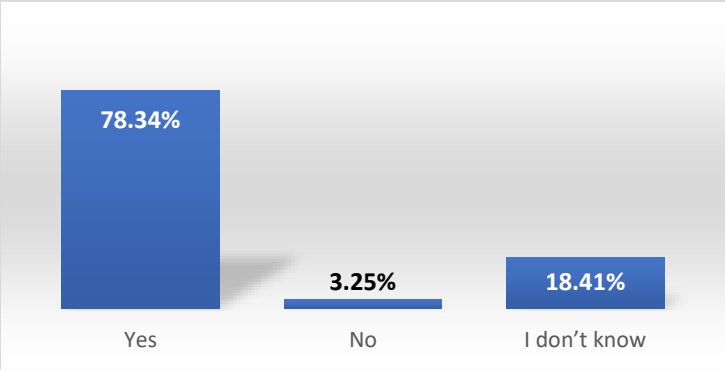
A majority of psychologists (76.79%, N = 235) reported using telepsychology for 20 hours or less per week, and of those over half (51.63%, N = 158) used it for less than 10 hours per week. Less than 4% (N = 12) were not using any form of telepsychology. Despite wide adoption of telepsychology, less than 20% of psychologists reported using telepsychology for more than 20 hours per week (N = 59).

5. **There are many different telepsychology platforms available. The TIP committee has identified some common telepsychology platforms being used, recognizing this list is not exhaustive. Of those listed below, which is the primary platform you are currently using for your telepsychology practice?**



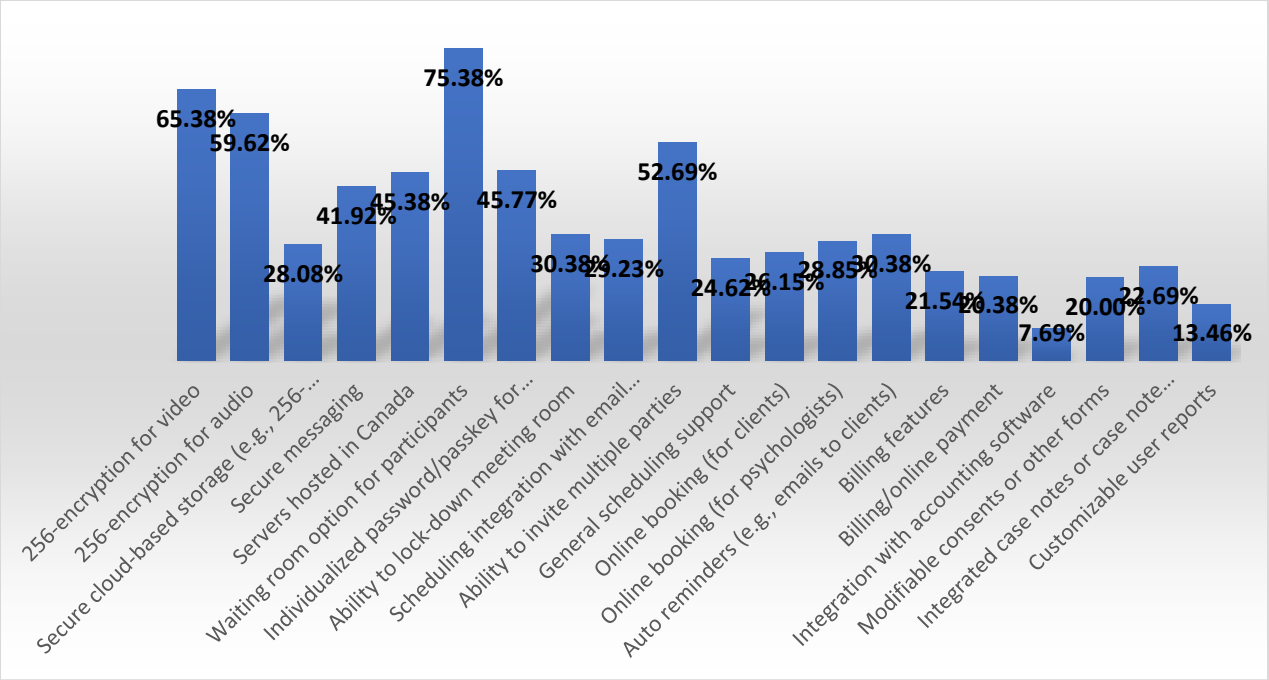
Psychologists report the primary platforms chosen were Zoom (32.25%, N = 89) or Doxy (30.07%, N = 83). Two Canadian platforms, Jane (9.42%, N = 26) and Owl (8.70%, N = 24) were reported with lesser frequency, though constituted third and fourth choice options. Webex was identified as an additional platform by multiple respondents in the comments section. Many respondents also indicated they use more than one telepsychology platform and this was a limitation of this question format. Three respondents indicated using the telephone in the comments section. Further reviews of the top-rated platforms would be of value to psychologists – particularly those that are Canadian.

6. To the best of your knowledge, is your current platform a secure product (minimum 256-bit encryption) with servers that are hosted in Canada?



Slightly over 78% indicated their telepsychology provider was a secure platform. However, of concern, 18.41% (N = 51) indicated they didn't know the answer to this question. This raises a practical concern of how psychologists can best access this kind of technical information to make an informed decision.

7. Telepsychology platforms offer many features from basic audio and video secure link to customizable and integrated psychological practice solutions. Thinking about your current practice, which features are you currently using through the software package you indicated above (check all that apply)?

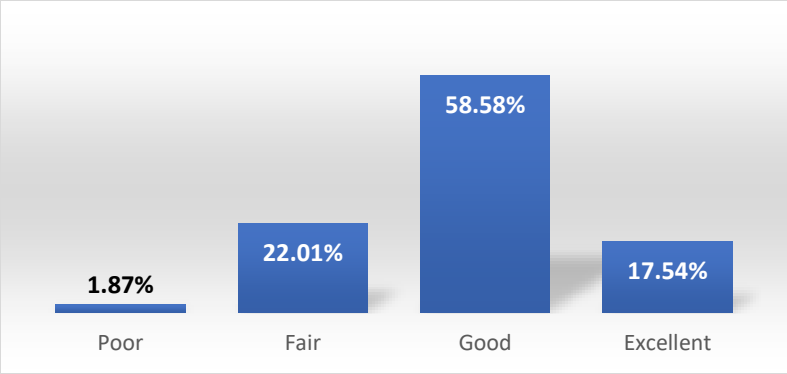


The most common telepsychology platform option used included a waiting room for participants (75.83%), encrypted video (65.38%), encrypted audio (59.62%), and the ability to invite multiple parties to online sessions (52.69%). This is consistent with counselling psychology as the most reported usage. More advanced features associated with integrated telepsychology solutions were used by fewer psychologists. The function used by the least number of psychologists was integration with accounting software (7.69%).

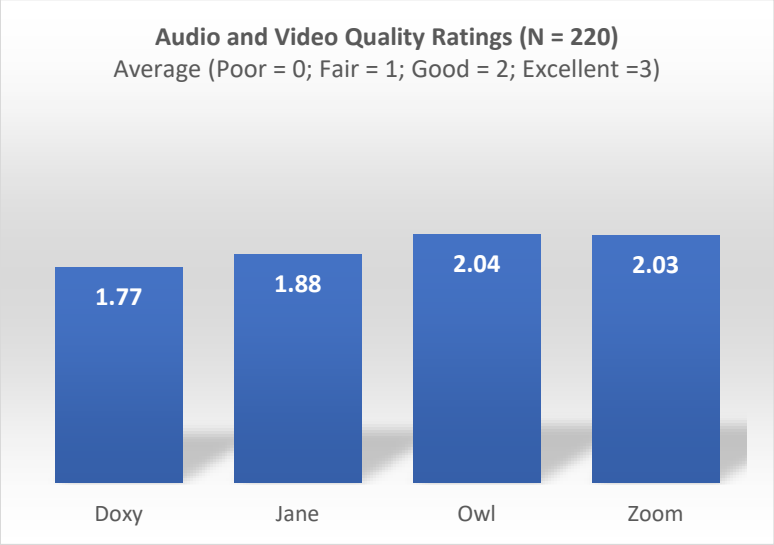
8. What other features would you use if they were available?

136 comments were generated from this question. Answers ranged widely. Many respondents desired split screens with the ability to counsel multiple parties easily, as well as better integrated options on sharing materials and annotated information. Reminder emails for appointments were identified as helpful, as well as integrated billing and payment options. Some psychologists drew attention to security concerns about some of the platforms, particularly client confidentiality. Some also drew attention to the comment about servers needing to be located in Canada and expressed uncertainty about this expectation.

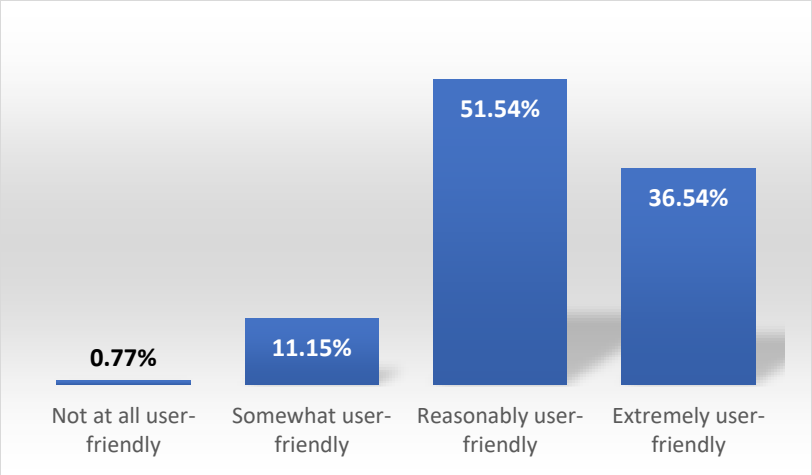
9. Psychologists have had different experiences with the audio and video quality of the platform they have chosen. How would you rate the audio/video quality of your current platform?



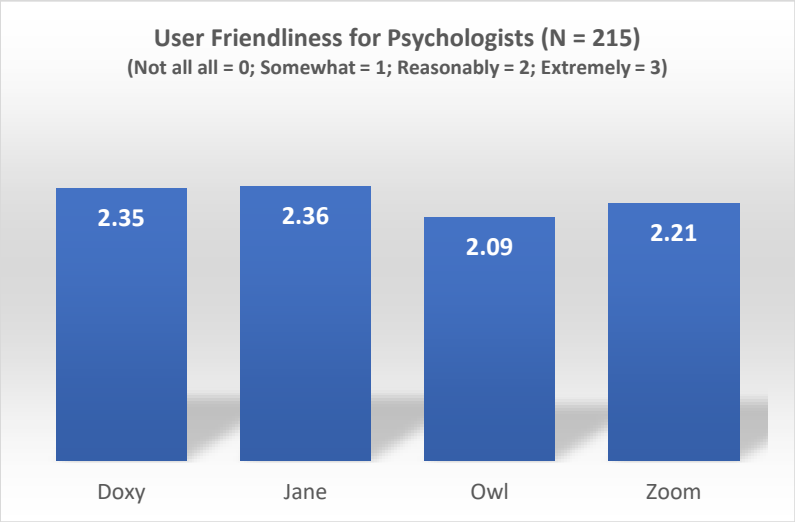
A majority of psychologists (76.12%, N = 204) reported 'good' or 'excellent' audio and video quality. Almost a quarter reported 'fair' or 'poor' quality (23.88%, N = 64). This is of concern as poor audio and video quality would likely negatively impact telepsychology effectiveness. As Zoom, Doxy, Owl and Jane were the most commonly reported platforms, further analysis was completed just on these four platforms (N = 220). Ratings were converted to a numerical scale (Poor = 0; Fair = 1; Good = 2; Excellent = 3). Zoom ($\mu = 2.03$) and Owl ($\mu = 2.04$) were rated most highly followed by Jane ($\mu = 1.88$) and Doxy ($\mu = 1.77$).



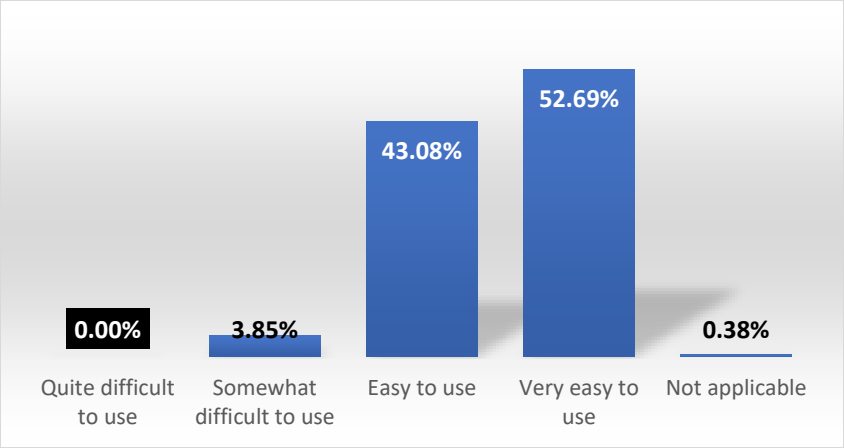
10. Would you describe your current platform as user-friendly for a psychologist?



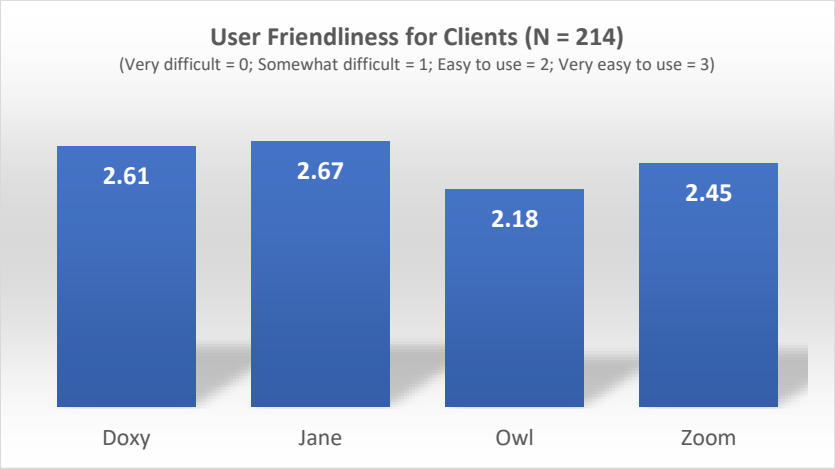
Platforms selected suggested they were generally user-friendly with almost 90% (88.08%, N = 229) said to be 'reasonable' or 'extremely' user friendly. This suggests telepsychology platforms are likely to be reasonably easy for psychologists to learn. The most commonly reported platforms were rated in a manner similar to the previous question. Doxy and Jane were rated the easiest to use (μ = 2.35 and 2.36) followed by Zoom (μ = 2.21) and Owl (μ = 2.09).



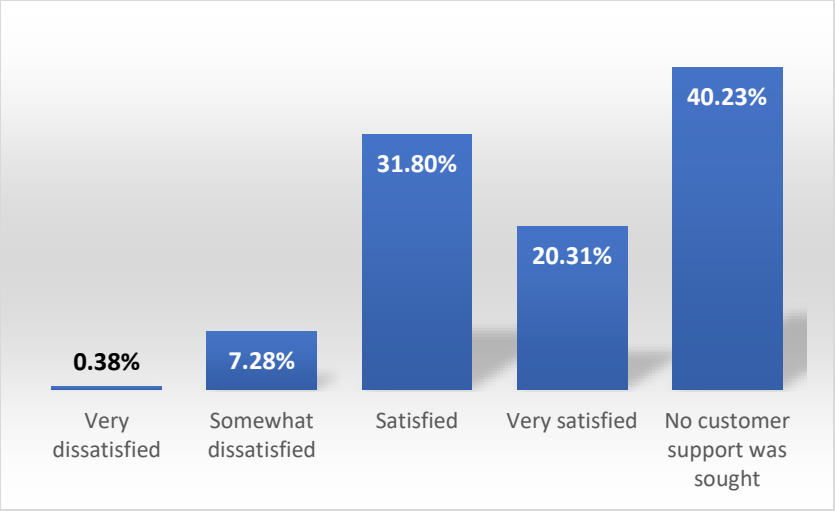
11. How would you rate the platform's ease of use for your clients?



Telepsychology platforms were also rated to be user friendly for over 95% of clients (95.77%, N = 249). This suggests telepsychology platforms are likely to be reasonably easy for clients to learn how to use. Further exploration of the most commonly reported platforms indicated Jane (μ = 2.67) and Doxy (μ = 2.61) were rated to be most user friendly for clients followed by Zoom (μ = 2.45) and Owl (μ = 2.18).

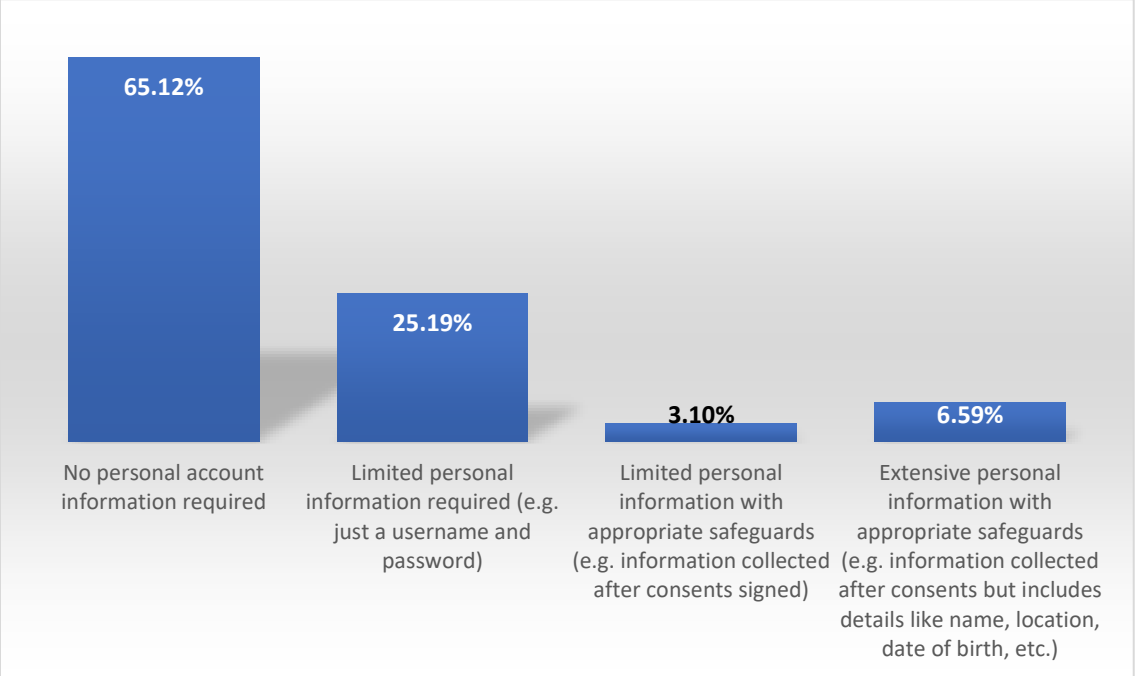


12. How satisfied are you with the customer-support offered on this platform?



Supporting the hypothesis that the top-rated platforms were user friendly, over 40% of psychologists (40.23%, N = 105) did not seek out any customer support. Of those that sought out support, the majority were 'satisfied' or 'very satisfied".

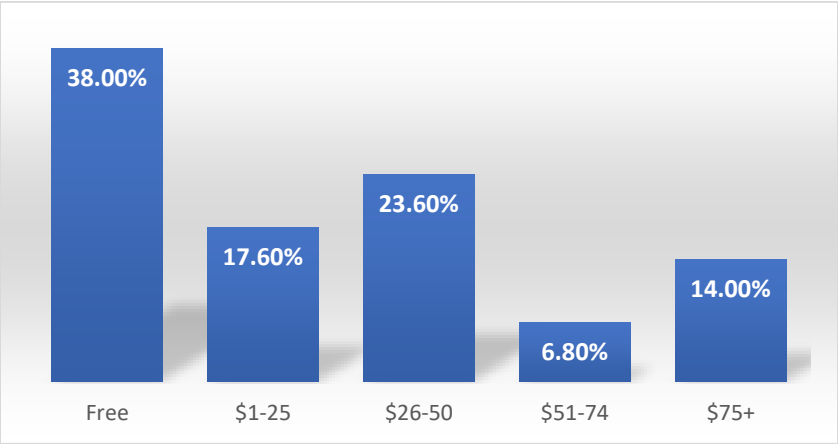
13. To the best of your knowledge, do your clients have to set up a personal account disclosing personal information to a third party in order to be able to access the telepsychology service?



This question was selected due to ethical concerns over client privacy and data collection. Positively, over 65% of respondents (N = 168) indicated no personal client information is collected through use of the telepsychology platforms and about 25% (N = 65) collected limited information such as a username and a password. However, up to nearly 10% of platforms do collect personal client information and

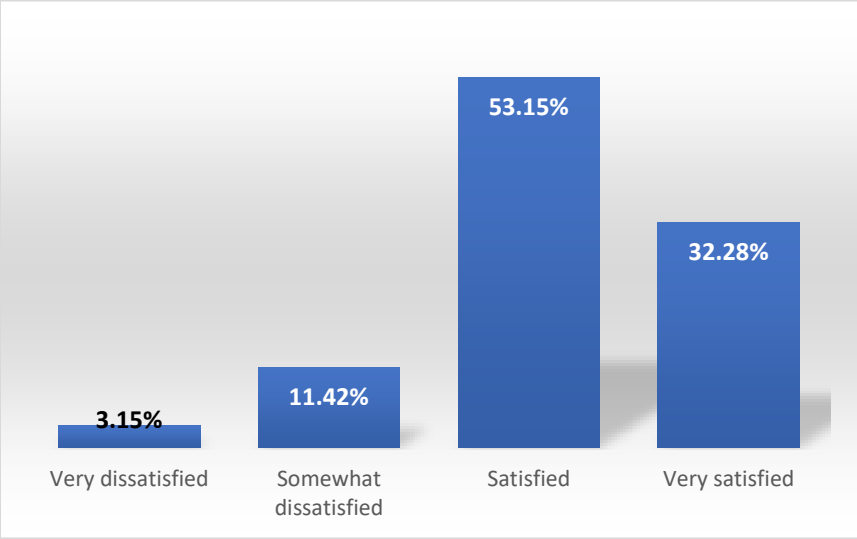
consequently, psychologists are cautioned to ensure appropriate security safeguards are in place for these circumstances and that their informed consent covers any associated risks and benefits.

14. What is the monthly subscription fee per clinician for the use of the platform?



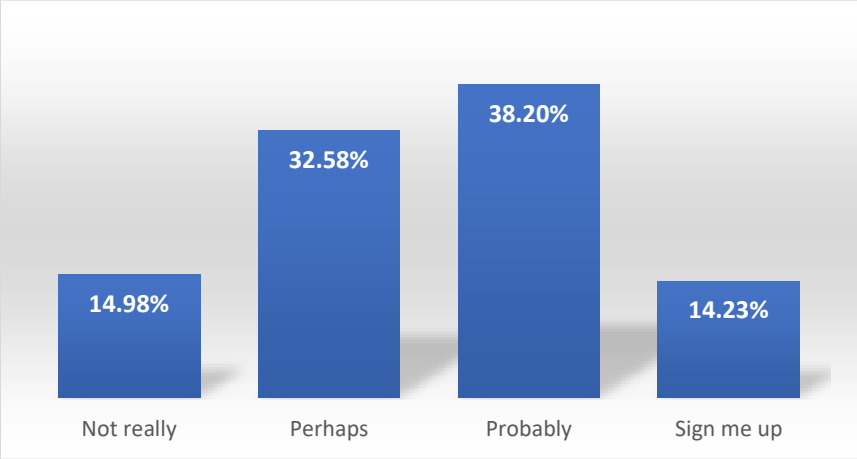
Nearly 40% of respondents indicated paying no fees for access to telepsychology (38%, N = 95). Notably, this is an advertised feature of selecting Doxy as a platform. There is also a free version of Zoom available, though to our knowledge, it does not come with many of the recommended security features. To our knowledge, all of the other telepsychology platforms have a fee. Combined with those paying $50 or less per month, nearly 80% of psychologists (79.2%, N = 198) reported being able to access telepsychology for a reasonable cost. This finding suggests telepsychology is accessible and cost effective.

15. How satisfied are you with the cost of the platform you indicated given its overall features and performance?



Over 85% of psychologists indicated satisfaction with the costs associated with adopting a telepsychology platform (85.4%, N = 217).

16. Would access to a PAA-hosted telepsychology members' forum be helpful to your practice (i.e., peer-driven forums to discuss compliance, features, and best practices)?



PAA members do seem interested in a telepsychology forum to support their practice, with over 50% of those that responded indicating a significant interest (52.43%, N = 140). This finding suggests there is an appetite for further telepsychology training and support in the community. If such a forum were to exist, it would be important for members to have access to specialists and technical experts in this area.

17. Did we miss anything? Are there more details that will help us to best understand your experiences and needs?

A total of 101 comments were generated in response to this question. Many respondents indicated gratefulness for the opportunity to contribute to the telepsychology adoption process. Many also indicated that in larger publicly funded institutions (e.g., Alberta Health Services), their employers provide access to technology so they do not have to make decisions about which platform to adopt. A recurring theme across many of the comments was a request for PAA and CAP to partner with and endorse recommended telepsychology platforms to minimize the confidentiality and security risks for both patients and clinicians. Despite positive confidence findings above, many respondents felt ill-equipped to make an informed decision on selecting the right platform for their needs and worried about making a mistake. A few comments drew attention to the limited effectiveness data on widespread use of telepsychology and questioned its rapid adoption. Others were worried that platforms marketed as "secure and encrypted" were not as secure as perceived by the psychologists in the community, or their patients.

Summary and Discussion

The COVID-19 pandemic has led to rapid adoption of telepsychology in psychologist practice, despite the lack of information available on psychologists' training, readiness, and familiarity with potential security and confidentiality issues of telepsychology platforms. Psychologists have had to respond quickly to meet client needs, and this survey indicates that many have risen to the challenge.

Results indicated that psychologists have primarily adopted telepsychology in counselling practice, with lesser adoption in other practice areas. Though the majority indicated feeling trained and prepared, at least 30% indicated a need for additional preparation, training, and support in this medium. Telepsychology was reported to be primarily used part-time; the majority of psychologists indicated using telepsychology for fewer than 20-hours per week. This is in contrast to American data where up to 53% of psychologists were exclusively using online platforms (Sammons, VandenBos, Martin & Elchert, 2020).

Of those using a telepsychology platform, about 60% of psychologists reported choosing Doxy or Zoom, and an additional 20% reported adopting Jane or Owl. Doxy and Zoom are primarily video conferencing and document sharing platforms whereas Jane and Owl are both integrated software systems that allow for video conferencing, document sharing, payment, scheduling and a host of other health care practice features. Owl and Jane are Canadian telepsychology platforms: Jane is headquartered in British Columbia, and Owl in Ontario. Most respondents indicated that their chosen platforms were secure with 256-bit encryption technology and servers located in Canada. Most psychologists also rated the telepsychology platforms highly. Audio and video were reported to be stable in most circumstances and user-friendly for both psychologists and their clients. However, at least 22% indicated concerns over audio and video quality, potentially compromising the effectiveness of the videoconferencing medium, and at least 11% reported some useability concerns, particularly for the psychologist. Fees were also said to be reasonable with a majority of psychologists paying less than $50 per month per user.

Despite privacy and confidentiality concerns, about 90% of telepsychology platforms seem to be collecting minimal client data. However, at least 10% of the platforms reported on do collect and store client data, so psychologists are cautioned to ensure due diligence in these situations (i.e., ensuring compliance) and ensure their informed consent processes are adjusted accordingly.

These findings suggest that psychologists in Alberta, similar to other jurisdictions, have had to rapidly adopt telepsychology as a practice medium, despite reservations and challenges in doing so.

Limitations

Unfortunately, the TiP committee did not gather age, gender, ethnicity, location, years of practice or other specific socio-economic data that would have assisted in better differentiating some of the responses. Future surveys should include this information.

Recommendations

With the above results in mind, the TiP committee recommends the following:

1) These results should be made publicly available to the psychologist community, preferably in a published format. Formal submission to Canadian Psychology should be considered to reach a broader audience of psychologists in Canada. A preliminary summary report could be made available through Psymposium. This survey report could also be made available.

2) CAP and/or PAA should consider partnering with at least one telepsychology provider in Canada to facilitate access to user friendly, secure and encrypted platforms designed for use by psychologists. The British Columbia Psychological Association has recently partnered with Owl (https://owlpractice.ca/partnerships/bcpa.php), as has the Canadian Counselling and Psychotherapy Association (https://www.ccpa-accp.ca/ccpa-incentive-program/). Jane and Owl were the mostly commonly reported Canadian telepsychology platforms reported in use by the PAA membership.

3) Prior to endorsing any telepsychology platform, it is recommended that PAA and/or CAP consult with an independent internet security company to better understand the potential risks and benefits of using and endorsing these platforms. Results should be shared with the PAA membership to better inform decisions around selecting the telepsychology platforms identified in this report.

4) CAP and/or PAA should consider sponsoring accessible online training in choosing and integrating telepsychology into a psychological practice – particularly for counselling psychology as this is where most adoption is occurring. One training option identified by the TiP committee was to facilitate short (15-20 minute) invited presentation opportunities by telepsychology companies to the PAA membership on the benefits and options regarding their platforms. This would potentially allow for the membership to gain enhanced access to additional benefits as a component of their PAA membership.

5) Given the inherent challenges with some of the technical language, common resources such as templated informed consent documents for telepsychology would also be of benefit for the PAA membership.

Sincerely,

The TiP Committee

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Chair, Dr. Michael Stolte
February 21, 2021

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