

# Telepractice Going the Distance: Addressing Needs of Rural Public Schools

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# Carol and Mike



# Disclosure

- **Financial interest:**
  - Dudding and Campbell have no financial interest
- **Non-financial interest:**
  - Campbell is current CE Manager for SIG#18 on Telepractice, as well as the chair of the American Telemedicine Association's (ATA) Special Interest Group on Telerehabilitation
  - Dudding is member of ASHA SIG 18 and ATA Telerehab SIG member



# CONSULTATION

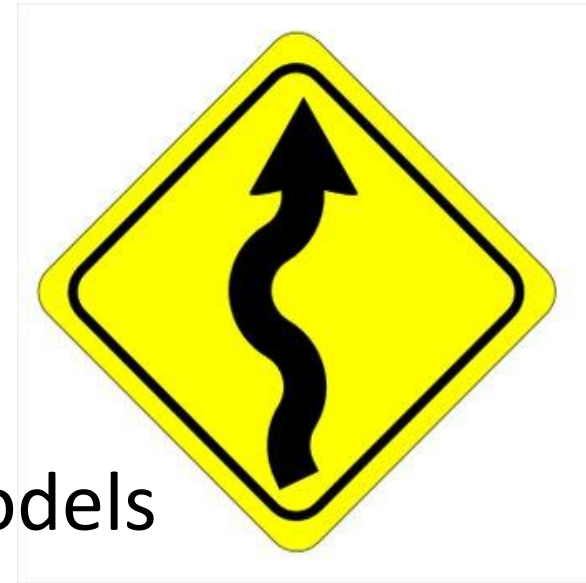
**Geographic isolation**

**Low incidence**

**Access to specialists**

# What we will share..

- Considerations for establishing telepractice within the public schools
  - Equipment and Infrastructure
  - Administrative
  - Clinical
- “telespeech” service delivery models
- Outcomes of two university-based programs
- Useful resources



# Technical and Equipment Needs



# DETERMINING EQUIPMENT AND INFRASTRUCTURE NEEDS

What do you want to be able to do?

- Types of services
- Setting
- Clients/patient needs
- Delivery model
- Security

What resources are available?

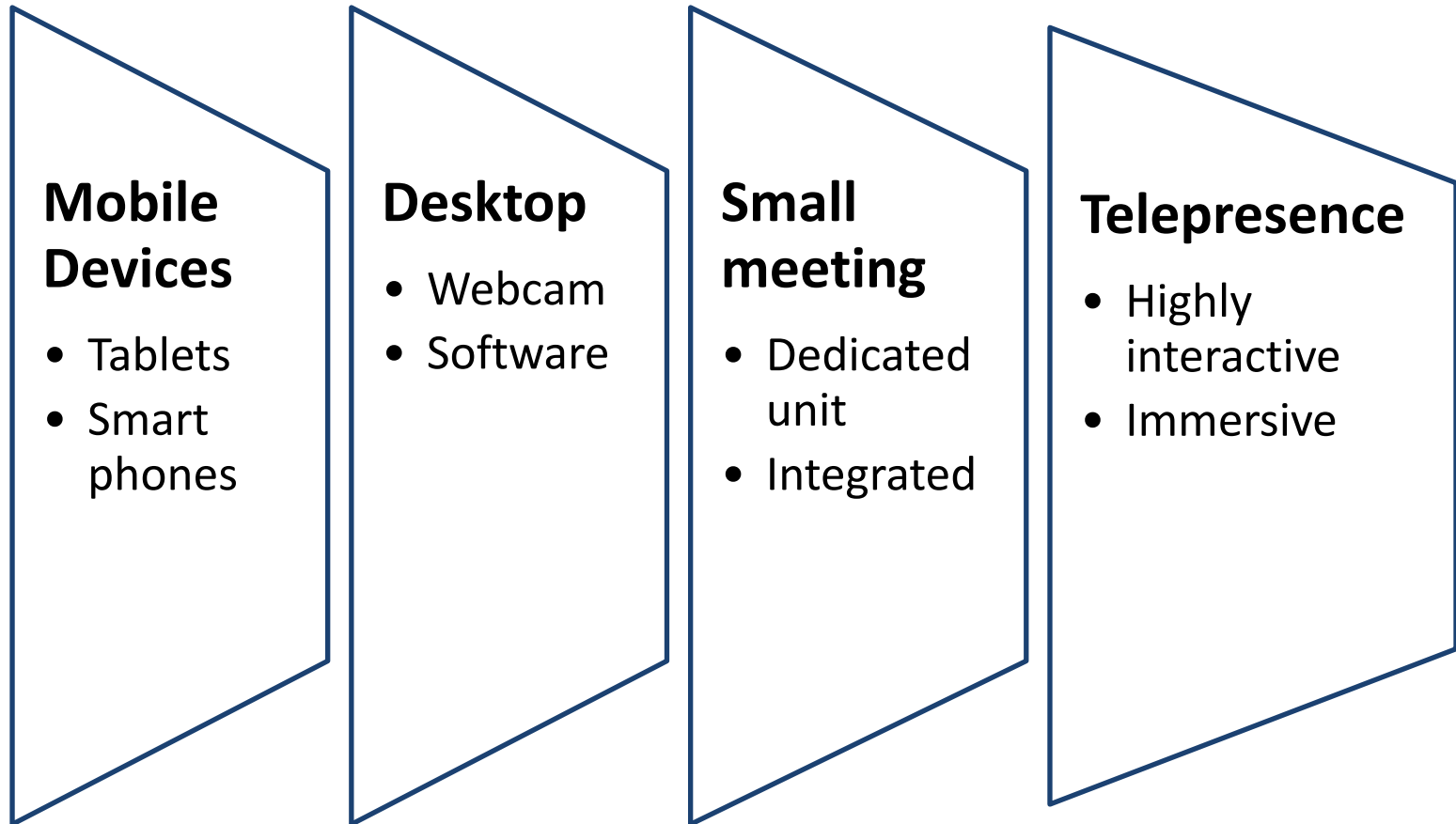
- Equipment
- Tech Support
- Bandwidth/internet

What are the costs?

- Equipment
- Tech support/ service agreements
- Bandwidth/internet



# Levels of Digital Videoconferencing





# Mobile Devices

- Smartphone/Tablet
- Accessibility
- Apps
- Limited control of video and audio quality
- Security/encryption



# Desktop/Personal DVC

- Webcam
- Low bandwidth requirements
- Readily available software
- Minimal equipment costs
- Accessibility
- Limited control of video and audio quality
- No (limited) ability to control far camera view
- Security and encryption considerations



## Small Meeting / Mid-level

- Dedicated digital videoconferencing equipment
- Moderate equipment costs
- Technical knowledge of firewall and internet technologies
- Higher bandwidth requirements
- Control of video and audio quality
- Control of far camera view
- Encryption and security

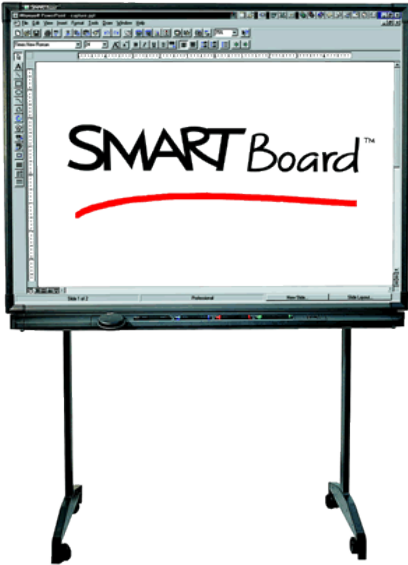


# Telepresence

- Immersive
- High end technologies
- Advanced collaboration tools
- Network management services
- High cost \$300,000 +



# Peripherals



# Software

- “Free” ware
  - Skype
  - Yahoo Messenger
  - Windows Live Messenger
  - Facetime
  - Jabber
- Interactive sites
  - Highlights for Kids
  - Scholastics for Kids
  - PBS Kids
- Commercial software
  - Microsoft Office Live
  - Adobe Connect
  - Elluminate
  - Vidyo

For a list of resources:

MATRC – [www.matrc.org](http://www.matrc.org)

SLPs- Check out Judith Kuster’s website

<http://www.mnsu.edu/comdis/kuster2/welcome.html>

# Equipment Checklist

- ✓ Digital videoconferencing device

  - Format

  - Compatibility with other devices/peripherals

  - Bandwidth requirements

- ✓ Monitor

- ✓ Sound system – microphones/sound cards

- ✓ Internet connection

  - Access

  - Bandwidth

  - Security

- ✓ Peripherals

  - Document cameras

  - Scanners/printers/fax

  - Carts

  - Monitoring devices

  - Cell phone

# Administrative Considerations

- Security and Privacy
- Material and documentation sharing
- Licensure and Liability
- Reimbursement
- Ethical issues



# PRIVACY & SECURITY



- Applicable Laws
  - FERPA (Family Educational Rights and Privacy Act)
  - HIPAA (Health Insurance Portability and Accountability Act of 1996)
  - This document discusses how FERPA and HIPAA are related:  
***<http://www2.ed.gov/policy/gen/guid/fpco/doc/ferpa-hipaa-guidance.pdf>***
- Privacy – Policies and procedures must be kept up-to-date.
- Technology – Security considerations
  - Encryption – Does HIPAA require encryption?
  - Firewall protection
  - Records - Storage and sharing
- Recommended resource: Center for Telehealth and e-Health Law (CTEL)

# Privacy and Internet-Based Telepractice

*Ellen R. Cohn and Valerie J. M. Watzlaf*

## **Abstract**

*Speech-language pathologists and audiologists have historically been attuned to protecting the privacy of their clients. The recent proliferation of Internet-based communication for telepractice has resulted in new and constantly evolving threats to client privacy. This article provides an overview of key legal protections to privacy. With a focus on Voice over Internet Protocol (VoIP; e.g., Skype), the authors present an approach to risk assessment that includes a HIPPA Compliance Checklist (Watzlaf, Moeini, & Firouzan, 2010) and a team approach to oversight. Upholding Internet-based privacy within the current environment is an ongoing and challenging responsibility.*

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# CLIENT SELECTION

- Client Selection
  - “Any clinical service must be appropriate based on the unique needs of the client. Telepractice is not appropriate in all circumstances, and a variety of factors need to be considered.”
  - The need for physical contact must be addressed.
  - SLP must assess if services are effective
- Facilitators need to be well-trained.



# DOCUMENTATION



- Facilitator training
- SLP/Graduate clinician/CF training
- Informed Consent: Includes potential benefits and risks, use of telecommunications technology, presence of facilitator, possibility of recording (Fleisher & Dechene, 2004)
- Notification: Acceptable in some states in place of informed consent
- Permission to video/audio record
- Properly document when a session is held by telepractice.

## LICENSURE

- Practitioner must be licensed in the state where the client/patient is located as well as the state where the SLP is located.
- Logistical & financial disincentive
- Check with your State Boards of Examiners
  - See <http://www.ncsb.info/state-regulations>
- Proposed Interstate licensure models

# REIMBURSEMENT

- Contract Services
  - Billing arrangement may vary (e.g., hourly, monthly)
- Third Party Reimbursement
  - Commercial Carriers
  - State agencies - Medicaid covers telepractice services in some states
- Grant Funding
  - Office for the Advancement of Telehealth (OAT)
  - U.S. Department of Education



# ETHICAL CONSIDERATIONS

- Must not violate professional code of ethics
- Meet standards of care
- Demonstrate competence
- Informed consent
- Assure confidentiality

# ETHICAL CONSIDERATIONS

## ASHA - CODE OF ETHICS (2010)

### THE FACILITATOR

- “Individuals who hold the Certificate of Clinical Competence **shall not delegate tasks** that require the unique skills, knowledge, and judgment that are within the scope of their profession to assistants, technicians, support personnel...”
- “Individuals who hold the Certificate of Clinical Competence **may delegate tasks** related to provision of clinical services to assistants, technicians, support personnel, or any other persons only if those services are **appropriately supervised**, realizing that the responsibility for client welfare remains with the certified individual.”
- “Individuals **shall not misrepresent** the credentials of assistants...support personnel...”



# LIABILITY/MALPRACTICE

## CONSIDERATIONS (FLEISHER & DECHENE, 2004)

- Does liability insurance provider covers telepractice services. Some recommend getting it in writing.
- Liability may also apply to telepractice consultations
- Standards of Care: Are there standards specific to telepractice & are they suitable for the student?
- Who is responsible for...
  - student safety?
  - equipment failure?
  - training facilitator?
  - notifying parents?



A photograph of a long, straight road with a yellow center line stretching into the distance under a blue sky with white clouds. The road is paved with asphalt and the yellow line is in the center. The sky is bright blue with scattered white clouds. In the far distance, there are low mountains or hills. The overall scene is bright and open.

# Clinical Models of Service Delivery

# Service Delivery

Asynchronous

- Web-based



- Digital Video-conferencing

- Store-and-Forward

- Consultation

Synchronous

# JMU Video Demonstration

<http://jmutube.cit.jmu.edu/users/duddincc/video/clip3.mp4>

1. What equipment do you see being utilized?
2. What techniques did the clinician employ to encourage interaction?
3. What did you see the assistant doing in the session?

# JMU Equipment



- Two way interactive, high definition videoconferencing equipment
- Flat screen tv/monitor
- Fax/copier/printer
- Therapy materials
- Document camera

# JMU Lessons Learned

- Caseload selection
- Coordination of resources
- Start up investment
- Ways to enhance interactivity
- Importance of local personnel
- Value of meeting with family and administrators

# UNCG Video Example

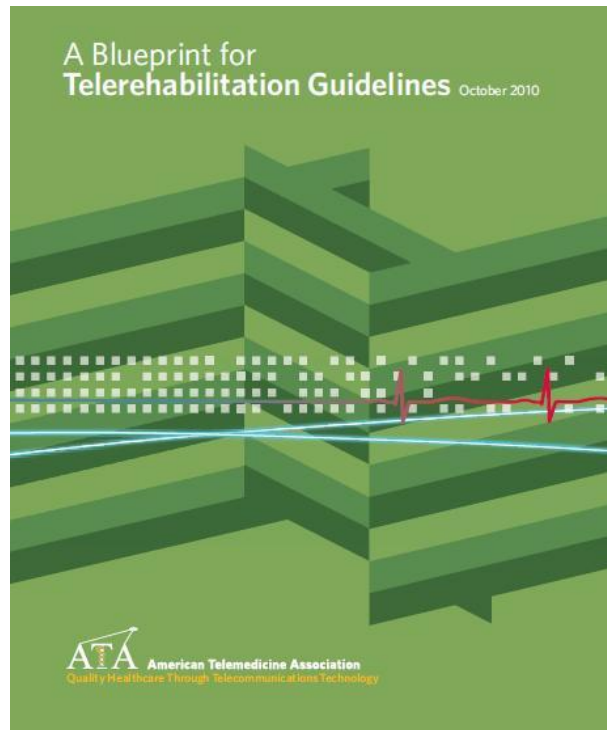
# Lessons Learned

- Marketing
  - Needs dedicated time and effort
  - Should be ongoing
  - People need to see how telepractice works
- Communicating with school staff and parents at a distance
  - Email, phone calls, mail
  - Designated day/time to be available to school staff by video
- Room Design
  - *Decoration*: Minimal distractions; pale, solid-colored walls
  - *Lighting*: May need additional light source(s) in front of children
  - *Acoustics*: Best to have room with some sound absorbing material (e.g., carpet)
  - *Size*: Large enough for full IEP meeting and gross motor activities
  - *Location*: Accessible throughout school



# Useful Resources





AMERICAN  
SPEECH-LANGUAGE-  
HEARING  
ASSOCIATION

[www.asha.org/telepractice](http://www.asha.org/telepractice)



Mid-Atlantic  
**Telehealth**  
Resource Center

ATA Telerehabilitation SIG

# Helpful Links

- ASHA Telepractice Documents: <http://www.asha.org/members/telepractice>
- American Telemedicine Association (ATA): <http://www.atmeda.org>
- ATA Telerehabilitation Special Interest Group: <http://www.atmeda.org/ICOT/sigtelerehab.htm>
- The Center for Telehealth & E-Health Law (CTeL) : <http://www.ctel.org>
- Office for the Advancement of Telehealth (OAT): <http://www.hrsa.gov/telehealth>
- Health Resources and Services Administration (HRSA): <http://www.hrsa.gov>
- Telehealth Resource Center: <http://www.cteonline.org/TRC.html>
- Universal Service Administration Company (USAC): <http://www.usac.org>
- Appalachian Regional Commission (ARC): <http://www.arc.gov>
- Agency for Health Care Research and Quality; <http://www.ahrq.gov>
- Office of Rural Health Policy: <http://www.ruralhealth.hrsa.gov>



What's your destination?

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