

Ethics and Telemental Health: Post-Test Questions

- 1) Telehealth can best be described as
 - a) using the phone to talk to clients.
 - b) a formal counseling session conducted via a video conferencing platform.
 - c) the use of telecommunication technologies to support long-distance health care.
 - d) professional health-related education conducted via a virtual platform.

- 2) The COVID-19 pandemic of 2020 illuminates the benefits of telehealth compared to in-person treatment, because it improves access to care and protects
 - a) personal and public health.
 - b) privacy and confidentiality.
 - c) patient rights to autonomous decision making.
 - d) practitioners against malpractice.

- 3) Clinician familiarity with basic computer functioning is necessary to maintain the ethical principle of
 - a) non-maleficence.
 - b) competence.
 - c) social justice.
 - d) beneficence.

- 4) A behavioral health provider is responsible for protecting the confidentiality, security, and privacy of client information. Authentication is one way to do this and is best described as a
 - a) process of ensuring HIPAA compliance.
 - b) term used by telemental health platforms.
 - c) way to protect individually identifiable data.
 - d) process of verifying the identity of a person or device.

- 5) Synchronous communication refers to electronic communication that is
- a) not in real-time.
 - b) in real-time.
 - c) ineffective.
 - d) between a provider and client only.
- 6) Which of the following statements about computer security is true?
- a) Malware improves computer security.
 - b) A public Wi-Fi network is easy and convenient to use, but it is unsecured, so that someone could breach the connection and obtain personal data without consent of the user.
 - c) A good security practice is to create a unique and strong password and use it across all accounts.
 - d) To secure a private or home network, the practitioner does not need to do anything to besides enroll in a HIPAA compliant platform.
- 7) Most ethical transgressions that occur in telehealth are related to
- a) informed consent.
 - b) competence.
 - c) confidentiality.
 - d) dual relationships.
- 8) Clients should be informed that a risk of telebehavioral health is that
- a) a privacy breach related to email correspondence is possible.
 - b) there is an absence empirical literature to support its use.
 - c) HIPAA protections do not apply to telemedicine.
 - d) crisis plans cannot be established in advance or successfully implemented.

9) In preparation for providing telebehavioral health the National Association of Social Workers (NASW) advises clinicians to check with their liability insurance coverage, the client's insurer, and

- a) the state licensing boards of both the practitioner and client.
- b) the client's primary care physician's assessment of the appropriateness of telehealth.
- c) medicaid restrictions.
- d) legal counsel regarding the likelihood of malpractice claims.

10) A suggestion to improve the effectiveness of telehealth encounters is for clinicians to

- a) keep their gestures and facial expressions subtle.
- b) look at their client's face on the screen to maintain eye contact.
- c) hide what they're doing, like writing notes, away from the screen so client don't misinterpret it for distraction or disinterest.
- d) become familiar with the technology before sessions to avoid such technical difficulties as accidental muting, no video, and ear-splitting volume levels.

11) Best practices for telehealth include

- a) dressing the same way as your client to put them at ease.
- b) having a trial run with the technology for every session.
- c) providing clients with a clinician's personal phone number.
- d) ensuring an informed consent is provided/signed regarding risks of telehealth.

12) Similar to in-person sessions, telebehavioral health crisis plans require

- a) a safety plan with names and numbers of collateral contacts.
- b) the client's session location and closest community emergency services.
- c) establishing in advance what a crisis is for each client.
- d) the clinician's assessment of imminent danger.

13) Documenting telehealth sessions differs from documenting in-person sessions because it

- a) can be shorter.
- b) should be contextualized by including the client's location and any unintentional attendees.
- c) always details technology failures that happened every session.
- d) should be signed by both clinician and client in an electronic health record.

14) What are the four features of documentation involved in managing risk?

- a) content, language, credibility, and access
- b) content, process, intervention, empiricism
- c) competence, confidence, compassion, creativity
- d) content, language, credibility, empiricism

15) Which population might be more inclined to easily employ telehealth technologies?

- a) Retired clients
- b) Working adults
- c) Adolescents
- d) Adults with agoraphobia

16) The top positive aspect to telebehavioral health with couples is the

- a) convenience and access.
- b) greater therapist control.
- c) cost-effectiveness.
- d) clearer expectations set forth in treatment plans.

17) Supervisors providing supervision via telehealth are responsible for their supervisees competency in providing telehealth services.

- a) True
- b) False

18) Virtual supervision should be

- a) avoided; it is far inferior to in-person group supervision.
- b) framed by a supervision contract.
- c) paid for in advance.
- d) only learner-centered, never topic-centered.

19) Standards of care related to telehealth are informed by

- a) professional codes of ethics only.
- b) empirically based best practices established in each separate health care profession, which are then generalized for relevancy.
- c) state laws and licensing regulations, ethics codes, and guidelines adopted by professional groups.
- d) client and therapist interactions.

20) There are permanent federal directives governing the provision of telemental health care across state lines.

- a) True
- b) False