

Linda F. Campbell, Fred Millán, and Jana N. Martin

Introduction

Dr. Bailey was intrigued with the concept of “telepsychology,” which increasingly popped up on electronic mailing lists and in e-mails with colleagues. However, she had no interest in developing a telepsychology practice. Her office was in Northern California, and many of her clients in sales and consultation traveled for several weeks at a time within the state. Dr. Bailey often had telephone sessions with her clients and occasional e-mail exchanges. Still, she did not consider this practice to be telepsychology because there was no web camera or other Internet conferencing technology and because she was not practicing interjurisdictionally (i.e., across a state line). Furthermore, she did not worry about any ethical or legal issues specific to her telephone sessions and e-mails because she believed that her skills and knowledge with in-person practice applied the same way to these other activities. Then one day, she was shocked to learn that any electronic communication, including telephone and e-mail, was considered *telepractice*. Dr. Bailey consulted the American Psychological Association (APA; Joint Task Force for the Development of Telepsychology Guidelines for Psychologists, 2013) *Guidelines for the Practice of Telepsychology*, only to find many factors at play that she had not considered (e.g., confidentiality, security of transmission, standards of care, disposal of e-mails).

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A Telepsychology Casebook: Using Technology Ethically and Effectively in Your Professional Practice,
L. F. Campbell, F. Millán, and J. N. Martin (Editors)

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Dr. Bailey's reactions are not uncommon. Psychologists have received the development of telepsychology as they have other new and emerging aspects of practice—with interest, skepticism, curiosity, dread, appreciation, reluctance, enthusiasm, anxiety, and other reactions that span the emotional range. To be sure, the practice of videoconferencing as a means of delivering psychological services has previously not been widely known to psychologists except in special settings, such as the military. In contrast, the practice of using the telephone to communicate with clients is years old. Although both of these activities are considered telepsychology, many psychologists have not thought of their use of the telephone in that way. Recently, we, the volume editors, were presenting a symposium on telepsychology when a woman in the back of the room raised her hand and said, "I've been talking on the phone with my clients since 1954. Am I practicing telepsychology?" We not only answered her question in the affirmative but also declared her a "pioneer in telepsychology"!

Telepsychology is "the provision of psychological services using telecommunication technologies" (Joint Task Force for the Development of Telepsychology Guidelines for Psychologists, 2013, p. 791). It is not a specialty. It is not a separate domain of practice. Telepsychology is an extension of the broad and general practice of psychology. This conceptualization of telepsychology as an extension of psychologists' current practice is a valuable perspective to take in that the application of telepsychology to practice is not to change fundamental competence, modality of practice, therapeutic approach, or other building blocks of psychologists' practice. Rather, telepsychology offers an opportunity for psychologists to apply their skills, their ethical decision-making, and the profession's standards of care to technology-assisted practice.

As new practice opportunities emerge for psychologists with the growth of telecommunications technology, so too emerge new responsibilities. Psychologists must now become knowledgeable of new developments, regulations, and guidelines; develop new skill sets; become equipped with risk management strategies; and understand how all of this is integrated with their ethics code.

Increasing interest in telepsychology within the psychological community is evidenced by the special sections and special issues in APA journals and other citation sources, including the following:

- Special Issue: Advances in Telehealth and Telepsychology. *Psychological Services*, 10(3), August 2013
- Special Section: Telepractice. *Professional Psychology: Research and Practice*, 45(5), October 2014
- Special Issue: Telehealth and Technology Innovations in Professional Psychology. *Professional Psychology: Research and Practice*, 42(6), December 2011
- Special Section: Visions for the Future of Professional Psychology. *Professional Psychology: Research and Practice*, 43(6), December 2012
- Special Section: Telepractice. *Professional Psychology: Research and Practice*, 45(5), October 2014
- Special Issue: Training and Professional Development. *Psychotherapy*, 50(2), June 2013

The purpose of this casebook is to help psychologists understand how standards of practice apply to telepsychology and to offer ways in which psychologists may think about ethical decision-making regarding their movement into telepsychology.

The foundation of this book is the *Guidelines for the Practice of Telepsychology* (hereafter referred to as “the guidelines”; see the Appendix, this volume), which were created jointly by APA, the Association of State and Provincial Psychology Boards (ASPPB), and The Trust. The guidelines are designed to facilitate practice, much as record-keeping guidelines, multicultural guidelines, and others are meant to improve the efficiency, effectiveness, and competence in our practice. They are aspirational in intent and not intended to be mandatory or exhaustive and may not apply to every professional and clinical situation. They are not definitive and are not intended to take precedence over the judgment of psychologists (APA, 2017). Guidelines are critically important because telepractice incorporates many aspects of in-person practice but in an unfamiliar and nonintuitive manner for some people. It is no coincidence, then, that seven of the eight guidelines are also current sections or standards of the *Ethical Principles of Psychologists and Code of Conduct* (APA, 2017). These are Competence, Standards of Care, Informed Consent, Confidentiality, Testing and Assessment, Security and Transmission of Data, and Disposal of Data. There is also a new guideline on the concept of Interjurisdictional Practice. Each guideline is represented in a chapter and highlighted in the case studies. It is important for psychologists to familiarize themselves with all of the guidelines and to think about how each affects their particular practice decisions. Problems of confidentiality breaches, clients with limited technical proficiency, concerns about safe transmission of electronic messages, and appropriate disposal of information are but a few considerations for telepractitioners. The guidelines build on our existing ethics code both to provide a safety net and to lead us toward greater competency in practice.

The format of this casebook is similar to that of the guidelines. All APA Guidelines are developed from a template, and this template stipulates that a guideline be presented in two sections. The first section is the Rationale, which explains why the guideline is necessary, what purpose it serves, and how it facilitates practice. The Rationale also identifies the expectations the profession has of the psychologist practicing that guideline and describes specific actions as examples of enacting the Rationale. The second section of the guideline is the Application, which does just that—it answers the question of how psychologists are to implement or “apply” the guidelines. Examples are offered, and decision-making factors are presented.

Each chapter covers a guideline. The chapter begins with the specific guideline, the rationale for the guideline, and introductory remarks that set the context for understanding what the psychologist is to do regarding the guideline. Next are case studies that identify the setting; the scenario; key elements, challenges, and decision factors; options available to the psychologist; and the best decision possible. The chapter ends with the key points from all case studies. The key points provide guidance on how to generalize and apply the various thought processes and decisions to other situations the psychologist may encounter.

Although the casebook has a similar format to the guidelines, the casebook goes beyond the guidelines by providing a structure and method for working from the

global situation or dilemma down to the actual decisions that must be made. It provides a more detailed discussion of how to think through the scenarios presented.

This casebook is written for psychologists in all settings and in all areas of practice. The case studies therefore include independent practice, organizational/consulting, counseling centers, academic settings, public sector agencies, hospitals, Veterans Administration facilities, military sites, and other settings in which psychologists practice. Cases vary also in types of dilemmas to demonstrate the variety of scenarios that can occur involving each of the guidelines.

Telepsychology is often discussed as though the services were uniformly practiced and in similar settings when, in fact, the challenge of this emerging medium is just the opposite. The practice of telepsychology ranges from the solo independent practitioner whose access to technology is a phone, e-mail, and possibly texting, to the Department of Defense in which synchronous videoconferencing is conducted between military personnel in Austin, Texas, and a soldier in Afghanistan. Further challenges lie in the ever-changing status of technology so that what is “state of the art” today is not tomorrow.

We tried to represent this broad range of activities and settings in the casebook. Every chapter could not incorporate every practice setting; however we, the editors, hope that the cases will be relevant and familiar and that the readers can relate to the cases in a way that lends guidance and helps each individual develop a decision-making model to integrate telepsychology into his or her professional practice.

References

- American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct* (2002, Amended June 1, 2010 and January 1, 2017). Retrieved from <http://www.apa.org/ethics/code/index.aspx>
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