

TEXAS TECH UNIVERSITY

Psychology Clinic

Plan for Return to In-Person Services

Effective August 17, 2020



Plan for Return to In-Person Services – TTU Psychology Clinic

Check-in/office procedures:

- Office policies about COVID-19 and efforts to keep clients safe will be posted on our website and in the office.
- Notices encouraging people to wash their hands and to avoid touching their face will be posted.
- All clients will be **required** to have a “Consent for Returning to In-Person Psychological Services” on file before they can be seen in-person.
- Seating in the waiting room will be arranged to facilitate physical distancing.
- Masks within the clinic will be required. Staff/therapists must provide their own, and clients will be encouraged to wear their own. Clients who may not have one will be provided one at check-in.
- We will try to minimize having multiple people in the waiting room as best we can.
- Clients should not come into the office more than five minutes before their appointment time, unless there is a specific reason for them to (e.g., to complete assessments, discuss billing, etc.).
- Non-clients (other than guardian of a child client) are not allowed in the building and will be asked to wait outside the building or in their cars.
- Hand sanitizers that contain at least 60% alcohol will be located in the office, the waiting room and on the check-in counter. **Clients will be asked to sanitize their hands at check-in.**
- All clients will have their temperature taken via a touch-less thermometer at check-in. If their temperature is over 100°F, the client will be asked to leave the clinic and the client will be contacted by their therapist to reschedule.
- All therapists when arriving for work within the clinic will need to have their temperatures taken as well. If their temperature is over 100°F, the therapist will be asked to leave the clinic and will be responsible for rescheduling their clients.
- Clients and office staff should stay home if they have a fever, shortness of breath or a cough, or have been exposed to someone who shows signs of COVID-19.
 - Clients should follow cancellation/rescheduling policies as described in the informed consent.
 - A client has the option to cancel or reschedule the session as a telehealth session, if they choose.
 - Late cancellation fees will be waived if the cancellation is due to COVID.
- If a credit card station is used, sanitize it after each use. If staff runs the credit cards, they should sanitize their hands immediately after handling the card.
 - Online credit card payments will still be accepted if a client prefers a touchless payment method. Payments will still be expected at the time of service. A QR code to the online payment website will be placed on the clinic office window for ease of use.
- Keyboards/mice must be sanitized after each different person’s use.
- Pens will be sanitized after each use.
- Schedule of cleaning of office/therapy rooms
 - Opening office staff will be in charge of making sure all therapy rooms are stocked with hand sanitizer and wipes.
 - High contact/traffic door handles (i.e., clinic lobby doors) will be wiped on a recurring schedule by clinic office staff.
 - If not done by TTU custodial overnight (TBD), opening office staff will use a spray sanitizer on all furniture surfaces prior to opening. (Note: We are working on having a spray available so this can be done after EVERY client.)
- Notifications of potential exposure:

- Clients and therapists are asked to notify the clinic office if they have tested positive for COVID.
- If a person who entered our office is known to be infected with the virus, persons (clients and therapists) who may have been within the clinic around the time of the affected person will be notified by the clinic office of potential exposure so they can monitor for potential symptoms. Notifications will be done by email if an email address is on file; if an email address is not provided or is not the preferred method of contact, the notification will be done by phone.
- Additionally, we may be contacted by the health authorities for possible contact tracing. If requested by proper authorities, we will provide names and phone number of persons within the clinic who may have been present for the contact tracing effort. We will not provide any other information for contract tracing purposes (this information is part of the return to in-person services consent; if a client does not want to agree to us releasing their name for contact tracing efforts, they can continue with telepsychology services).
- Per TTU policy, we will need to report potential exposure to TTU HR as well for their tracing purposes.

Therapy/assessments:

- **Before resuming in-person services, determine whether an in-person visit is necessary**
 - Some clients may request, or even insist, on seeing you in-person, but that does not professionally or ethically obligate the clinic/the therapist to offer services face-to-face.
 - Well-reasoned justification for the decision to resume in-person care is important. Possible rationales include returning to in-person services for clients with more pressing clinical needs, clients who are not benefitting from remote care or are getting worse, or where logistical problems exist (such as low technology areas where remote services are not feasible because of poor reception or Internet connections).
 - To determine whether telehealth is a good option for the client, consider these factors:
 - Does the client have access to a telehealth platform, and is he or she able to use it?
 - If this is ongoing treatment, is the client making progress? Is there decline?
 - Is the next phase in treatment feasible for continuing remotely, or does it require face-to-face contact?
- Continuing to provide telehealth at the therapist's request is ok: A therapist can refuse to see clients face-to-face, especially if they have health conditions, or live with family members who have heightened risk factors. Trainees who have a medical condition or other reasons why they should not follow agency policies may request reasonable accommodations. These accommodation requests should be made through their supervisors.
- Therapists should discuss the risk of exposure to COVID with clients and document their understanding of those risks and their agreement to proceed with in-person care.
 - The client will have already signed a return to in-person services consent prior to the in-person session.
- Set up of the therapy/testing room should be arranged to promote maximum social distance. Priority of use of the larger therapy rooms (including the group rooms) is encouraged.
- Keyboards/mice must be sanitized after each therapist's use. Sanitizing wipes will be provided in every therapy and assessment room.
 - When hand sanitizer bottles or wipes are low/empty, therapists should obtain a new container from the clinic office.
- Therapists should wipe the door handles of each room they used after ending session with each client.

- All face-to-face therapy sessions need to be recorded per clinic policy; telehealth session-recording is at the discretion of the supervisor.
- Assessment administration:
 - The assessment cubicles are more difficult to arrange for appropriate social distancing. If a therapist is more comfortable being in a larger room, a table may be set up in a group room for administration of an assessment if scheduling allows.
 - Services that are less amenable to telepsychology may be prioritized for in-person service (e.g., LD/ADHD assessments)
 - Hybrid assessments are encouraged. Portions of assessments that can be conducted remotely (i.e., clinical interview), should be. In-person sessions related to assessments should be limited to parts that require in-person meeting (i.e., administration of a WAIS)
 - Have the examinee sanitize their hands before use of assessment manipulatives/keyboards.
 - During testing, do not place materials back in the kit immediately after use. Instead, have several resealable plastic bags on hand: some labeled “clean” and the others labeled “dirty” for storage and later cleaning of manipulatives. These bags will be labeled and placed in kit bags by clinic office staff prior to their signing out from the clinic. Therapists are responsible for cleaning the manipulatives and placing them back in the “clean” bags PRIOR to their returning the kit to the clinic.
 - Stimulus books are often central to the administration of an assessment. However, paper products are difficult to clean with solvents, as they can mar stimulus content and permanently damage pages.
 - Encourage the examinee to point rather than touch stimulus books.
 - Encourage examinees without expressive issues to provide verbal responses rather than touching the stimulus book (if acceptable according to administration directions).
 - Offer a sanitized, unsharpened pencil or something similar for the examinee to hold and use as a tool to indicate responses.
 - The examiner should retain responsibility for turning pages of stimulus materials and allow examinees to use the end of their pencil to point to their responses.

Supervision:

- Trainees vary in developmental level and therefore their response to expectations and responsibilities in the context of the COVID-19 pandemic may also vary. The CCTC urges decision-makers to consider resumption of in-person psychological services and training in the context of trainees’ developmental level. Specifically, while advanced practica students may be equally adept at either telehealth or in-person services and training, trainees with lesser experience may need more support and oversight in these areas. It will be important to individually assess each trainee’s specific level of preparedness.
- In line with the university’s request that meetings should be done virtually, all supervision should continue to be done virtually if feasible.
- All face-to-face therapy sessions need to be recorded per clinic policy; telehealth session-recording is at the discretion of the supervisor.

In general:

- Avoid hugging or handshaking.
- Remember, these rules are for the safety of our clients, the service providers, and anyone else in the practice.

- Try to present all of this information in a professional manner. Do your best to be prepared, maintain calmness, and avoid creating additional anxiety in your clients.
- Importantly, the safety of staff/supervisors/trainees/clients will not be jeopardized to meet academic requirements or to meet agency needs for service delivery.
- All TTU policies and procedures will be in effect within the clinic.

Re-opening plan adapted or copied verbatim from resources provided by APA, CCTC, APTC, and the Trust

Sources:

American Psychological Association (APA, 2020). *When is it ok to resume in-person services?*

<https://www.apaservices.org/practice/news/in-person-services-covid-19>

American Psychological Association (2020, May 7). *Sample informed consent form for resuming in-person services*. Retrieved from https://www.apaservices.org/practice/clinic/covid-19-informed-consent?_ga=2.44631650.776614629.1591833994-1055443723.1570566434.

Council of Chairs of Training Councils (2020, March 23). *Statement on Education and Training Considerations during COVID-19 Pandemic*. <https://cudcp.wildapricot.org/resources/Documents/CCTC%20Stmt%20-%20Education%20and%20Training%20Considerations%20during%20COVID-19%20Pandemic%20323-20.pdf>

Pearson Education, Inc. (2020). *Disinfecting test materials*. Retrieved from

<https://www.pearsonassessments.com/content/dam/school/global/clinical/us/assets/telepractice/disinfecting-test-materials.pdf>

The Trust (2020, May 7). *Factors to consider in reopening in-person psychological services during the COVID-19 crisis*. Retrieved from

<https://parma.trustinsurance.com/Portals/0/documents/The%20Trust's%20Statement%20on%20Returning%20to%20In-Person%20Services.pdf>

The Trust (2020, May 19). *Sample informed consent form for returning to in-person psychological services*.

Retrieved from <https://parma.trustinsurance.com/Resource-Center/COVID-19-Resources>