TELEPRACTICE IN 2021: THE ARIZONA CLINICAL EXPERIENCE & BEST PRACTICE

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DISCLOSURE INFORMATION

Financial:

- Employed by Northern Arizona University
- Honorarium

Nonfinancial: Nothing to disclose

AZ LICENSURE REQUIREMENTS FOR TELEPRACTICE

- COVID—19 Public Health Emergency declared 3/11/2020
- 3/25/2020 Governor Ducey signed an Executive Order for Expansion of Telemedicine
- Protect healthcare workers and the populations served
- Insurers establish reasonable requirements & parameters for telehealth services

AZ LICENSURE REQUIREMENTS FOR TELEPRACTICE

- Insurers must reimburse healthcare professionals at same level of payment for telemedicine as in person services
- All licensed and credentialed professionals of rehabilitation team
 - Co-presenters and colleagues

(Retrieved at AZ licensure: eo_2020-15_expansion_of_telemedicine.pdf)

ASHA WEBSITE FOR TELEPRACTICE REQUIREMENTS PER STATE

AZ has:

- No licensure laws or regulations for telepractice
- No rules or regulations for telesupervision
- No laws or regulations for telepractice reimbursement (audiology & speech)

(Retrieved at https://www.asha.org/Advocacy/state/info/AZ/Arizona-Telepractice-Requirements/)

ASHA WEBSITE FOR TELEPRACTICE REQUIREMENTS PER STATE

- AZ Licensure and credentialing regulations
 - Check for updates
- ASHA Practice Portal: Telepractice



EVIDENCE FOR SLP TELEREHABILITATION

- Theodoros (2011) Thorough systematic review of articles published up through 2010
 - Adult and pediatric telepractice studies published through 2010
- Coleman et al. (2015) Systematic review for ABI in adults that included group or case studies

- Molini-Avejonas et al. (2015) Systematic review summarized number of studies per disorder and overall findings
 - Reviewed articles in speech-language pathology and audiology
- Weidner & Lowman (2020) Thorough systematic review of articles published up through 2014-2019

Adult Diagnostics

- Videofluoroscopic, OME, and clinical swallow studies (Burns et al., 2016; Morrell et al., 2017; Ward et al. 2014)
- Screening or assessment of aphasia (Choi et al., 2015; Guo et al., 2017; Theodoros et al., 2008)
 - E.g., BDAE; Frenchay Aphasia Screening Test; Assessment for living with Aphasia

- Speech & Voice Diagnostics
 - Apraxia Battery for Adults (Hill et al., 2009b)
 - Perceptual and acoustic measures, speech intelligibility, articulatory precision (Constantinescu et al., 2010b)
 - LSVTLOUD (on-line program) (Covert et al., 2018; Griffin et al., 2018; Quinn et al., 2018)

Treatment:

- Dysphagia
 - Case studies for postural & compensatory strategies (Cassel et al., 2016)

- Speech
 - AoS and dysarthrias
 - Stuttering in children & adolescents (Carey et al., 2010;
 Sicotte et al., 2003)
- Voice

Synchronous (Mashima et al., 2003) & asynchronous

- Aphasia and Cognitive-Communication Therapy
 - Chronic aphasia, PPA, or TBI
 - Synchronous vs asynchronous
 - Word retrieval, group therapy, script training, PACE, pragmatics (Cherney et al., 2008; Kurland et al., 2018; Macoir et al., 2017)

Strengths

- Face-to-Face vs. telepractice = no significant differences
- Good intra and inter-rater reliability
- High client, clinician, and family/caregiver satisfaction

Limitations

- Severity of deficits matter
- Heterogeneity of disorders (e.g., aphasia)
- Case studies, single-subject design, larger sample
- Lack of control groups & randomization
- Mix of telepractice platforms used, devices, & environments

PRACTICAL SUGGESTIONS FOR TELEPRACTICE GRILLO (2017) & TOWEY (2012)

- Hybrid or telepractice?
- Software programs for synchronous services & HIPAA compliant
- Cost (equipment audio and video capabilities, training, marketing, & multiple licensures)
- Skilled telepractice clinicians have mastered competencies for "technical, procedural, interactive, & virtual preparation" (Towey, 2012, p. 75).

PRACTICAL SUGGESTIONS FOR TELEPRACTICE GRILLO (2017) & TOWEY (2012)

- Client & clinician co-create "authentic" materials = personal digital photos or videos, and curriculum for school-aged clients (Towey, 2012, p. 74)
- Record, edit, and save therapy sessions for later use with client, family, and other professionals
- Consider use of asynchronous practice in client's functional environment

PRACTICAL SUGGESTIONS FOR TELEPRACTICE GRILLO (2017) & TOWEY (2012)

- Make use client's environment and caregiver/family as ehelper for activities at home
- "Adaptation of communication style and timing, motivation, therapy targets, cues, reinforcement, etc." (Grillo, 2017, p. 29)

NAU SPEECH, LANGUAGE, & HEARING CLINIC

- Rural community
- Hybrid approach for teaching
 - Clinic?
- Case-by-case basis
- Vulnerable populations considered high risk

Ethical Considerations for AZ Telerehabilitation



ASHA CODE OF ETHICS (2016)

- Principle of Ethics I Rule H Obtaining informed consent from the person served about the nature and possible risks and effects of services provided, technology employed....
- Principle of Ethics I Rule K SLPs with CCCs shall evaluate the effectiveness of services provided, technology employed......they shall provide services ...only when benefit can reasonably be expected.

ASHA CODE OF ETHICS (2016)

- Principle of Ethics I Rule N Individuals with CCCs..... may provide services via telepractice consistent with professional standards, and state and federal laws.
- Principle of Ethics I Rule O & P HIPAA (confidentiality, privacy, & security)

ASHA CODE OF ETHICS (2016)

- Principle of Ethics Rule H Individuals shall ensure that all technology and instrumentation used to provide services.....are in proper working order....
- Principle of Ethics IV Rule R Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice.....and responsible code of conduct



TELEREHABILITATION:
IMPLICATIONS FOR
INTERPROFESSIONAL
PRACTICE

INSTITUTE OF MEDICINE (IOM, 2001 & 2003)

Core Competencies that all healthcare clinicians should possess -

- Provide patient-centered care
 - Professional competency
 - Cultural competency
- Work in interdisciplinary teams
 - Collaboration, education, & training
 - Coordination, cooperation, & communication

INSTITUTE OF MEDICINE (IOM, 2001 & 2003B)

- Employ evidence-based practice
- Apply quality improvement
- Information technology
 - Technology
 - Virtual environment
 - Mobile Health & Apps
 - HIPAA

LIM & NOBLE-JONES (2018); MAHEU ET AL. (2017); REEVES ET AL. (2016)

IPP showed improved

- Attitudes, perceptions, and clarity in roles of other disciplines
- Collaborative knowledge and skills
- Communication & teamwork

LIM & NOBLE-JONES (2018); MAHEU ET AL. (2017); REEVES ET AL. (2016)

IPE impact unknown for

- actual practice behavior
- organizational behavior
- client/patient outcomes

TELEPRACTICE IPP CONSIDERATIONS

- Telepractice Considerations
 - IPP Meetings which team members are essential
 - Lead clinician/therapist
 - Microphones
 - Video cameras
 - Number of participants
 - Patient's equipment

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