

# Psychotherapy conducted via video conference

Te Poari o ngā Kaihaumanu Hinengaro o Aotearoa (the Board) has produced the following advice on available safe technologies/platforms for psychotherapy conducted via video conference.

This has been written with the knowledge that it may date quickly due to technological progress.

## Definition

Psychotherapy conducted via video conference can include video calls or phone calls where therapy is carried out without the clinician and client being in the same physical location.

A video call can be referred to as a Zoom call or Skype call, regardless of whether these are the platforms actually being used for the call.

Please note that this advice excludes administrative communication carried out via technological means such as for instance booking or changing appointment times.

## Position statement

The Board supports the use of psychotherapy conducted via video conference as an adjunct to psychotherapy, especially in conditions where access to treatment for the public might not otherwise be possible.

This includes conditions such as restricted movement as a consequence of public health events, such as pandemic restrictions, as well as rural access or limited access to specialist services in particular geographic areas.

## Principles

### 1. Technological choice

It is important that consideration is given to the privacy and usability of platforms used to conduct therapy, and the Board acknowledges that not all psychotherapists or members of the public have the ability to easily assess different platforms.

Most people are familiar with video calling applications as a consequence of the 2020 COVID-19 Alert Level 4 lockdown, including FaceTime, WhatsApp, Skype and Zoom, which has colloquially been adopted as the verb "to Zoom call" someone.

Video conference platforms differ in their level of security and privacy. While applications such as FaceTime, WhatsApp, Facebook Messenger, Snapchat and Skype do have end-to-end encryption, they are also known to harvest user data for advertising or use in various algorithms.

Video messaging platforms that are secure and also include virtual waiting rooms that make the initial engagement more seamless include Zoom (when using the password feature) and Doxy.me Both platforms offer free basic versions and more feature-rich paid versions.

Under professional ethics and privacy law, providers are responsible for selecting video conferencing technologies that can support the privacy and security of the client's personal information. Psychotherapists are required to take reasonable and active steps to ensure that their client's personal information is collected, stored, used and disposed of in a manner that upholds the protection of information provided.

## **2. Patient choice**

In situations where kanohi-ki-te-kanohi/face-to-face therapy sessions are not possible, such as during pandemic conditions, patient care is the priority. However, it is still important that patient choice is considered and included in the decision-making process as to how meetings are to take place.

In relation to the video conference platform used, it is also important that patients are given information about the privacy limitations of non-secure options, recognising that some clients may prefer to use familiar platforms even in knowing the privacy limitations.

## **3. Jurisdictional considerations and indemnity insurance considerations**

Psychotherapists are able to provide psychotherapy conducted via video conference to Aotearoa New Zealand-based patients provided the public are protected in the same manner as seeing a psychotherapist kanohi ki te kanohi/face to face.

However, the nature of seeing clients via video conference platforms means that practitioners and clients can be in different jurisdictions. If a practitioner or client is located outside of Aotearoa New Zealand, they are outside the Board's jurisdiction.

If an Aotearoa New Zealand-based psychotherapist chooses to have clients in another country, they should check whether the therapy is covered by indemnity insurance and possible liabilities if the therapy is not covered by an insurance policy.

## **4. Digital divide and access limitations**

While Aotearoa New Zealand has one of the highest levels of internet access in the world, the pandemic did highlight that there is a digital divide in Aotearoa New Zealand where some people still have very little access to the internet or smart devices. While the primary factor is socio-economic – including the ability to purchase internet devices and access data to enable video calling – education, age and level of comfort with using technology may also mean that some people feel unable to access therapy remotely. These issues should be considered as part of an assessment for suitability for psychotherapy conducted via video conference.

## **5. Bicultural considerations**

It is advised that, where possible, kanohi-ki-te-kanohi/face-to-face consultation should be offered prior to psychotherapy conducted via video conference, especially if there are concerns regarding cultural responsiveness.

However, under pandemic conditions, clinicians can only choose to see clients in person if they can meet the 'urgent care' definition. This is currently defined as requiring treatment:

- for a condition that is life or limb threatening
- that is required to maintain the basic necessities of life
- that cannot be delayed or carried out remotely without risk of significant harm or permanent and/or significant disability
- that cannot be delivered by a service that is currently operating or by health professionals that are already in contact with the patient.

*Approved by the Board March 2021*