Reopening Your Mental Health Practice

A Checklist to Help You Prepare for In-Person Office Visits

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This checklist is ideal for practices that serve individuals who have serious mental illness (SMI). It includes unique topics to address for this population.

The content in this checklist may not apply to all practice settings and models. You need to evaluate and adapt these insights for your practice and the individuals you serve.

For additional reference, the Centers for Disease Control and Prevention (CDC) has many guidelines for the full workforce. They go far beyond mental health practices and include information on employee safety and other protocols. You should follow these national guidelines. Your local and state agencies may also have specific protocols that apply to your practice or to your local area.

### OFFICE SET UP

**Create and/or refine your intake process for new patients.**
- Can you transition intake forms and other initial documents to online solutions?
- Review any local and/or state guidelines around initial visits
- Establish planned frequency of in-person and/or telehealth visits at the start of treatment

**Assess and/or refine the experience individuals have when they arrive for in-person visits.**
- Will they wait inside or outside?
- How do they notify the practice when they arrive?
- Post signage with clear guidance to help people understand where to go and what to do (also reference CDC and state guidelines around signage)
- Establish process around who greets people when they arrive
- Who will conduct and collect assessment for COVID-19 symptoms and history?
- Allow time between sessions to limit the number of people in the space

**Define the services that work better in-person for your practice.**
- Administering injectables
- Metabolic testing/monitoring for people on antipsychotics (e.g., labs, weight, etc.)
- Assessing movement disorders (e.g., rigidity, etc.)
Stage your physical office space.

☑ Review and adhere to physical space and social distancing guidelines from the CDC and local and/or state agencies

Assess how to reduce physical items in your office.

☑ Can you move PHQ-9s and other surveys to online solutions?
☑ Can you transition people toward at-home monitoring solutions?
  a. Are the solutions HIPPA compliant?
  b. Do they integrate data into your EHR?

Assess how to approach physical contact with people and objects.

☑ Establish a policy for person-to-person contact such as handshakes and hugs
☑ Make sure enough personal protective equipment is available for regular use by staff
☑ Create a process to clean door handles, chairs, desks, pens, and other surfaces that people may come into contact with
BEFORE THE VISIT

Assess which treatment modalities work best for each individual to decide if they should be seen via telehealth or in-person visits.

☑ Are they good with technology?
☑ Are they high-risk for recurrence?
☑ Are they able to understand and follow in-person health and safety guidelines?
☑ What are their preferences around visits?
☑ Do they have any insurance-related issues that may factor in?

Communicate in advance about guidelines for in-person visits.

☑ Directions where to call, check in, wait, etc.
☑ Guidelines around mask wearing
☑ Policy on family members and caregivers in visits

Identify issues that warrant a face-to-face visit with telehealth patients.

⚠ Worsening of symptoms
⚠ Concerns about loneliness and/or isolation
⚠ Difficulty with telehealth visits
⚠ Important medical appointments
⚠ Insecurity with food, housing, and social supports
⚠ Physical health issues
⚠ Poor medication adherence
⚠ Missed appointments
⚠ Recent hospitalization
⚠ Substance use
⚠ Suicidal ideation and/or other mental health concerns
⚠ Time since last in-person visit
DURING THE VISIT

Role model protective behaviors to promote safety.
- Consider if staff should wear masks
- Keep hand sanitizer visible and accessible
- Have masks available for individuals who do not have one

Prepare to have conversations on a list of common questions and topics.
- Why an individual will remain with telehealth visits
- Why an individual will return to in-person visits
- Meeting their preferences, values, and/or concerns about their treatment modality
- Concerns about the COVID-19 vaccine
  - Reference this digital guide on How to Talk About the COVID-19 Vaccines with Individuals Who Have Serious Mental Illness
- The need for an individual to put a mask on

Assess if individuals face unique risks from the pandemic and discuss steps to help them stay safe.
- Are they homeless?
- Do they live in residential settings around others?
- What are their social activities?
OTHER TOPICS TO CONSIDER

Start to prepare for if/when the emergency waiver for telehealth ends.
- Evaluate your current software for HIPPA compliance
- If you do not have a Business Associate Agreement (BAA) this is a warning that your system may not be up to standard

Review whether funding changes impact your practice.
- Gain/Loss of COVID relief funding such as PPP loans
- Gain/Loss of federal or state grants
- Reimbursement for telehealth and/or other services

Assess staffing issues to ensure there are no gaps in service.
- Will some staff not return to in-person practice settings?
- Will there be any requirements around vaccination?
- Review and update malpractice and liability insurance
- Create plans and policies around a positive COVID-19 diagnosis among staff and/or patients

Assess if your patient population is all local or across state lines.
- Prepare care transitions for those who live in states where you cannot practice
- Contact local organization chapters for help
  - American Psychiatric Association
  - American Psychiatric Nurses Association
  - American Psychological Association
  - National Association of Social Workers

RESOURCES FOR ADDITIONAL GUIDANCE

- Centers for Disease Control and Prevention
- Federation of State Medical Boards
- SMI Adviser Knowledge Base