

How to Conduct SST Groups via Telehealth during the COVID-19 Pandemic

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http://www.mirecc.va.gov/visn5/training/social_skills.asp

THANK YOU

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 - Kevin Roche, LPMHC
- SST Team:
 - Jennifer Buras, LCSW-BACS (SST Regional Master Trainer)
 - Rebecca Pasillas, Ph.D.
 - Clare Gibson, Ph.D.,
 - Frederick Martin, Psy.D.
 - Richard Goldberg, Ph.D.

Telehealth Model Previously in Development vs. Current Reality

- Teaching in-person social skills in face-to-face role plays in a group setting is the core of the evidence based SST intervention.
- No published studies have examined the effectiveness of providing SST via TMH. However, the VA SST Training Program developed and conducted program evaluation on a Telehealth Model for SST groups with promising results.
 - Telehealth Model in Development for SST Groups Involves Veterans gathered in a group with a VA provider acting as an SST roleplay buddy at one site and an SST provider from another site leading the group via VVC.
 - Advantage: In-person social skills can be practiced in face-to-face roleplays.
- Due to COVID-19 safety guidelines, gathering Veterans in person for a group is not possible right now.
- This presentation will discuss how providers can deliver SST via telehealth during COVID-19.

Adapting SST Tools for Telehealth During COVID-19

- For SST groups that were stopped due to social distancing guidelines related to COVID-19 pandemic:
 - Telehealth groups may be particularly suitable for Veterans who were previously in an SST group and familiar with SST format*
 - May be able to continue group via VVC or phone sessions
 - May be able to support Veterans with individual VVC or phone sessions incorporating SST tools

*May be more practical for Veterans with no previous exposure to SST groups to do individual sessions incorporating SST tools and/or format. Information provided in future presentation.

Not a Technical TMH Presentation

- This is not a presentation on how to use videoconference or phone equipment/technology to provide mental health care or about TMS trainings or other prerequisites for providing care via telehealth.
- We will also not be providing guidance about encounter coding procedures as this may vary per profession and local rules.
- Please follow national and local VA guidelines regarding:
 - Required training and procedures for providing mental health care using videoconference and phone technology
 - Encounter coding procedures
 - Emergency procedures
- Resource for up-to-date information on COVID-19 Telehealth and Technology resource:
<https://vaww.telehealth.va.gov/current/covid19.asp>

Adapting SST Group to Telehealth: Recommendations

- SST groups of smaller size (e.g., 4-6) might work better.
- May be challenging to have open SST group in Telehealth group, particularly when there are Veterans new to the group.
- Ensure you have access to group member phone numbers and addresses where the Veterans are taking the calls (in case of an emergency).
- Various ways for SST Group to connect via telehealth:
 - Only use VANTS line (make yourself familiar with privacy issues regarding VANTS)
 - Only use VVC; however, this may be difficult as not all Veterans may have access to VVC
 - Mixed format. Use VVC for video and VANTS for audio.
- May have to do a brief orientation with Veterans on how to use the technology.

VVC Groups

- Have a back-up plan, in case your internet connection goes down or if you are unable to generate VVC link (e.g. try VVC again or give the Veteran a call via telephone, etc.)
- Very helpful to run the group with another colleague or 2. Co-facilitator or roleplay buddy can share screen with steps of the skill. This individual can also follow-up with Veterans who may be having technical issues to try to get them reconnected to the group.
- May want to use a white board (or paper)
- You or a coworker can screenshare what you would point to/reference in person
- Can be tiring to do groups via VVC because of all the information flooding in; make sure if you can you schedule a break after

VANTS groups

- While VANTS is not VA's preferred method for conducting groups due to privacy concerns, it may be the best option when Veterans do not have access to VVC.
- Consider using the VANTS moderator commands (For a list of commands, check out: https://vaww.va.gov/VANTS/AUDIO_MODERATOR_COMMANDS.asp)
- Some useful moderator commands: Use *7 to secure conference, to open conference *7 again; Use *8 to play a roster of conferee names and to hear how many participants are on the conference
- Important that Veterans mute their phones when not speaking
- Can be helpful to have Veterans state their name if they want to say something and then be called on

Adapting SST Group to Telehealth: Recommendations

- Consent: Please make sure to follow national and local VA policy regarding collecting consents from Veterans.
- You may have to do more prep work such as placing reminder calls to Veterans about attending group, finding a way to provide handouts/outside practice sheets to Veterans, figuring out best technology to use based on Veteran access, etc.
- May have to spend some time addressing background noise and asking Veterans to mute their phones, etc.

Transmitting Information when Using TMH with EBPs

- **Secure Messaging** is the preferred method for securely sending consents to/from Veterans (visit [here](#) for information about how to get Veterans connected to MyHealthVet/Secure Messaging and for instructions regarding how to send attachments via Secure Messaging). You may also use fillable pdf forms via Secure Messaging if applicable.
- **VA Outlook email** transmission of consents is allowed (during COVID-19 crisis only), if Secure Messaging is unavailable (visit [here](#) for guidance regarding use of VA Outlook email to send information to Veterans during COVID-19). You may also use fillable pdf forms via VA Outlook email.
- **U.S. Mail** is an acceptable means of transmission, but may take several days for the materials to arrive

Getting Materials to Veterans

- Can be useful to mail the Veterans a workbook with SST skills to be covered and outside practice sheets
 - Consider different colored paper for different handouts, highlight the titles of sheets, session numbers on packets
 - Placing materials in a binder or 3-ring pocket folder can help organize
- Send the Veterans a workbook at the start of treatment or send each session's handouts weekly via Secure Messaging or VA Outlook email.

SST Group Session Sequence

Welcome and set agenda/Review group rules if needed

Step 1. Review outside practice (for sessions other than the first session)

Step 2. Establish a rationale for the skill

Step 3. Briefly have members share a relevant experience or rationale

Step 4. Explain the steps of the skill

Step 5. Model the skill; review with members

Step 6. Have a group member role play*

Step 7. Elicit and provide positive, then constructive feedback

Step 8. Have the member role play again

Step 9. Elicit and provide positive, then constructive feedback

Step 10. Repeat role play again and elicit/provide positive feedback

Step 11. Repeat Steps 6-10 with each group member

Step 12. Develop outside practice assignments

*(Begin Step 6 about 15 minutes into a 50-minute group)

SST Telehealth Group Recommendations

- Orient Veterans during the first session and at the beginning of each group to the group procedures.
- Be very clear with announcing when moving from one step of the group session sequence to the next.
- If possible, get the steps of the social skill (handout) to the Veteran in advance so they can follow along.
 - May be able to do this via MyHealtheVet or email or regular mail.
 - May want to assemble all the skills planned for the group series and send skill handouts/outside practice sheets at once.
 - Steps of the skills may also be shared on the screen via VVC.
 - Another resource: Skill handouts/outside practice sheets are also available at the VA SST Training Program website:
http://www.mirecc.va.gov/visn5/training/social_skills.asp

SST Telehealth Group Reminders

- Remember a positive atmosphere and lots of positive feedback are hallmarks of SST. Focus on the positives and when appropriate, make it fun!
- Remember to keep high level of positive feedback for Veterans participation in terms of their comments and roleplays. Use clapping or encourage other group members to exclaim positive phrases like “good job,” “well done”, etc.
- Engage group members. Directly encourage input and feedback when appropriate from group members. Ask them by name to give input regarding the steps or rationale or feedback on the model or group member roleplays.

SST Telehealth Group Expectations

Regularly review group expectations (community guidelines). Some considerations specific to the telehealth setting:

1. Have your SST skills packet with you when joining group (or have it available to review on your computer). Also, have a pen and paper handy to write down notes and outside practice.
2. Attend the group in a private, quiet place for confidentiality reasons. Be properly dressed and sitting up when participating in the call.
3. Do not use speakerphone for confidentiality and sound quality reasons.
4. May be useful to use earbuds if you have them to be able to hear better and for convenience.
5. Focus on the group during group time (e.g., no texting on the phone during group or doing chores, etc.).
6. Kindly put yourself on mute unless ready to speak to eliminate unnecessary background noise.
7. State your first name if you want to say something and then wait to be called on.

SST Telehealth Group Expectations Continued

Group expectations relevant to in person and telehealth groups:

- **Please stay on the group topic.** (“Staying on the group topic will help make sure we have time for everyone to practice.”)
- **Only one person may speak at a time.** (“Only one person speaking at a time promotes respect for what everyone has to say.”)
- **No name-calling or cursing.** (“No name-calling or cursing. Let’s work together to make sure that Social Skills Training group is a positive experience for everyone.”)
- **No criticizing or making fun of each other.** (“No criticizing or making fun of each other. It’s important to remember that feedback in SST focuses on what people do well.”)
- **No using substances before or during the group.**
- **No eating during group.** (“Please no eating during group. We have found that eating in group can distract from practice and people giving meaningful feedback.”)

Adapting SST Group to Telehealth: Session Sequence

- **Reviewing “Outside” Practice:** Reminder to develop and review practice assignments for outside group that are feasible and safe (e.g., involve calling someone on the phone vs. visiting someone in person). Reinforce all efforts at practicing skills outside of the group.
- **Develop a rationale for the skill:** Discuss the use of the skill in the current context (e.g., how skill might be useful in time of COVID-19, how to safely use the skill [e.g., over the phone]).
- **Explain the Steps of the Skill:** Remember to modify according to method of telehealth delivery (e.g., “Although step 1 of the skill is ‘Look at the Person,’ we obviously can’t practice that today over the phone. However, if you were meeting in-person with someone, you would want to have good eye contact when listening.”)

Adapting SST Group to Telehealth: Session Sequence

- **Model the skill; review with members:** On the phone or via VVC, the SST provider can still model the skill either with a co-facilitator or roleplay buddy or, if you are sole facilitating, with a group member acting as a roleplay buddy. Announce clearly that you are going to do a model of the skill and explain the scenario in which you are modeling the skill and for them to listen (and/or watch) you do the steps of the skill. Make sure that group members understand how to do the skill before you move on to group member roleplays. When doing the model, you may want to explain if relevant what good eye contact, body posture, etc. would look like when you are demonstrating the skill, particularly if the model is done over the telephone.

Adapting SST Group to Telehealth: Session Sequence

- **Group member roleplays (Steps 6-11):** Be careful in developing with the group member a scenario to roleplay that is straightforward and helpful to the group member. Give and elicit a lot of positive general and specific feedback. Clapping is still encouraged as well as general praise such as “good job, etc. Give or elicit 1-2 very direct specific suggestions for improvement after the first 2 roleplays. Make sure the group member understands how they make the next roleplay “even better” before they engage in the next role play.

Adapting SST Group to Telehealth: Session Sequence

- **Develop Outside Practice Assignments:** Formulate a plan consistent with the group member's current environmental restrictions. Due to social distancing requirements, many assignments may be over the phone. Remember to collaborate with the group member regarding deciding on the assignment and encourage them to write it down.

Adapting SST Group to Telehealth: Troubleshooting

- One group member is dominating the group session and it is difficult to get this person back on track despite efforts at redirection:
 - Possibly arrange for the co-facilitator or another staff member to separately call the Veteran during the group time to give individual personal attention (the group member would be informed of this plan and be asked to hang up to receive the call).
 - If having a colleague call is not an option, figure out if they would be willing to instead do an individual call after group.
- Veterans are reluctant to role play:
 - Acknowledge shy feelings.
 - As in a face-to-face SST group, you can decrease the level of challenge of the roleplay suggested, such as shortening a version of the role play or gradually increase the number of steps to perform in their role play.

Skills to Practice

As in a face-to-face SST group, assess which skills might be most relevant for group members' current needs and goals. This can be done in either individual sessions or group sessions.

- Skills related to group members' goals
- Suggested Skills Related to COVID-19 pandemic:
 - Reminding Someone Not to Spread Germs
 - Making a Doctor's Appointment on the Phone (e.g., for a telehealth appointment)
 - Asking for Help
 - Asking for Information (e.g., if wanting to order groceries for delivery but don't know how to do this; asking about COVID-19 or about how to access health services in the context of the pandemic)
 - Listening to Others (e.g., how to demonstrate you are listening in phone calls or videocalls)
 - Leaving Stressful Situations (e.g., if find yourself in an area where you can't maintain 6' physical distance)
 - Making Requests
 - Refusing Requests

SST Templates

- SST group templates can be used for SST telehealth groups conducted during the COVID-19 pandemic.
- For the individual SST goal setting session implemented to help Veterans set goal(s) for the SST group, use the CPRS template “SST 1 Individual.” If the session is done over the phone or via telehealth, this template can also be used.
- Do not use any of the templates for SST sessions that are conducted 1 on 1 utilizing the SST group session sequence unless the session was conducted 1 on 1 because only a single group member showed up to the SST group.

Open Discussion

- Questions about Presentation?
- Providers who have experience using SST tools in a telehealth group sessions invited to join today.
- Questions for these telehealth providers?
- Concerns about providing SST via telehealth?

Upcoming Advanced Practice Meeting on June 15th

- June 15th at 12EST: “Implementing SST Tools in Individual Telehealth Sessions during the COVID-19 Pandemic”
- Interest in additional office hours consultation call regarding SST and telehealth?

Please reach out

- Please reach out if you want consultation regarding your provision of SST tools via telehealth. If there is interest, perhaps we will start a regular office hours call or a consultation group on the topic.
- Please also reach out and let us know what is working and what is not working in your provision of SST via telehealth.
- Elizabeth Gilbert, Ph.D., Program Manager of VA SST Training Program. Email: elizabeth.gilbert@va.gov