

Telehealth Family Therapy - Pre-Session Phone-call to Families Checklist

It is not necessary to read the following information out to family members, but ensure they get the information in the course of your conversation with them. It is important to ask the questions below and record the response.

We have decided to call all families before their first appointment to let you know that we are now offering online or 'Telehealth' family therapy sessions because of COVID-19.

Is now a good time to discuss this? Are you somewhere private and safe enough to have this discussion? (*Arrange another time to call if not.*)

The purpose of this phone call, which will take about 15-20 mins, is to help you decide whether Telehealth family therapy may be appropriate and helpful for your family, at least until we can get back to in-person sessions.

'Joining' around current coping:

- How have you been coping with current COVID-19 measures?
- How have you been coping as a family?
- What has been going well with your family at the moment?
- What have you been finding challenging?

There can be many benefits to Telehealth therapy including convenience, comfort, accessibility and necessity, as we are experiencing COVID-19 social distancing restrictions.

There can also be some challenges when using electronic mediums, including misunderstandings due to lack of visual cues, internet or other technology difficulties and potential privacy limitations - it is possible that communication can occasionally be intercepted when using technology.

If, after I have asked you some questions, it seems like Telehealth family therapy might not be appropriate or if you decide that you would not like to use this way of conducting the session, we can discuss other options that might be suitable – these include supportive phone calls or waiting until we return to in-person sessions.

I will now run through a few questions.

1. Ability to use technology

Do you have a computer, tablet or smart phone from which you can make video calls?	Yes/ No
Do you have enough devices for everyone in the family to use or can all family members be seen on the one screen?	Yes/ No
Is your internet connection strong /stable enough for video calls?	Yes/ No
Has your internet worked for other online sessions?	Yes/ No
Comments	

2. Comfort in using technology

Have you used video conferencing or had a Telehealth appointment before?	Yes/ No
Was this a useful experience?	Yes/ No
As we use Zoom for our sessions, I wonder if you have it downloaded already?	Yes/ No
Do you have the latest Zoom update (currently Version 5)?	Yes/ No
If not, are you able to download it or would you need some help with that?	Yes/ No
Do you have any concerns meeting as a family via Telehealth?	Yes/ No
Would anyone else in your family have concerns?	Yes/ No
Comments	

3. Privacy and Safety

Do you have somewhere safe and private to hold the family therapy session?	Yes/ No
Will everyone attending be in your home?	Yes/ No
If they will be attending from somewhere else, where will they be?	
If they are elsewhere, will it be safe and private for them?	Yes/ No

Sometimes therapy can lead to strong emotional responses. If there is concern about this, we might suggest we take a break and speak to the person who seems most upset, by phone. Would this be ok?	Yes/ No
We need to make sure it is safe for everyone to conduct Telehealth Family Therapy so I need to check with you now whether anyone in the family may be at risk of self-harm or hurting others, suicide or feeling very agitated? (If yes, assess the risk, discuss if a safety plan or supports are needed and consider individual meetings to start with.)	Yes/ No
Would you like to go ahead with the Telehealth Family Therapy session?	Yes/ No
Would you prefer to discuss this with other family members before deciding?	Yes/ No
Would you prefer to keep in touch with supportive phone contact until we return to The Bouverie Centre for in-person sessions? If yes, you will not lose your place on our waiting list.	Yes/ No

Thank you for taking the time to talk with me about Telehealth sessions.

Any other comments?

Name of Family	
Name of Therapist	
Date	