Remote delivery of Mental Health and Psychosocial (MHPSS) Interventions

The global COVID-19 pandemic has forced exploring options for providing remote Mental Health and Psychosocial Support (MHPSS) interventions (distance-based, digital, tele or online) due to the public health need to maintain physical distancing. While mental health services require specialized professionals or other health care providers trained in mental health, psychosocial interventions such as Psychological First Aid (PFA) and mutual support can be provided by community actors.

Key features

- Tele-Mental Health services can be effective. Tele-Mental health is a viable alternative to in-person care for a variety of mental health conditions. However, **interventions need to be adapted to each context and training, support and supervision are crucial**.
- Tele-Mental Health and Remote MHPSS Modalities can include: phone calls, video conferencing and text messaging or emailing.
- It is key to **fit the technology to the users** (e.g. do users have video calling? Is the phone better?)
- To provide remote support, existing MHPSS practices will need to be organized and approached differently. **Remote service provision may not be suitable for all service users**, for example when people have difficulties in accessing services (e.g. people with disabilities may require specific adaptations) or when people are not able to have private conversations due to crowded housing conditions.
- **Laws and data privacy considerations can vary by location** and need to be complied with.
- Tele-Mental Health should be **integrated into the overall health care delivery system** to ensure continuity of services and that health records are complete.

Tele Mental Health and Remote-MHPSS Interventions can include:

- Psychological Interventions (e.g., individual or group)

- Risk management and support of users with severe mental health problems

- Consultation and medication management (according to countries regulation) and support to treatment adherence and continuation of medication

- Other remote support (e.g. telephone helplines)

General considerations

- There can be limitations in diagnosis, adherence, and accessibility and therefore, ongoing **training and supervision of staff providing care are necessary and make it more effective.**
- Remote MHPSS needs to be provided with evidence-based interventions as for example, Cognitive Behavioural Therapy (CBT) and Behavioral Activation interventions.
- Remote MHPSS can be used as:
    - Add on to treatment as usual
    - Blended in-person and remote
    - Fully online / remote
- Remote MHPSS is in general aceptable and feasible, even for people with low tech literacy; and treatment fidelity is in general good.
- Consider establishing interdisciplinary teams at the first level of care to complement identification of cases, treatment and follow up; as well as psychosocial and clinical interventions.
- Remote services with children require a special skillset: ensure specific training and supervision of staff.
- Medication management is possible with close remote monitoring and needs to be in accordance with country regulations.

Specific Considerations before stablishing remote MHPSS services:

- Ensure required equipment is available for staff and for users (e.g., smartphone, telephone)
- Service providers should be supplied with a professional phone number to contact service users, rather than using their own personal number.
- Consider platforms that guarantee confidentiality on both ends: those with end-to-end encryption
- Adhere to the principles of data protection and confidentiality:
    - Store secure data from service users in a protected folder with a password on a computer.
    - Store sensitive documents with additional password protection.
    - Handwritten clinical notes or files are not recommended. If they are used, they must be stored in a safe place with a secure lock and limited access to ensure the confidentiality and protection of information.
- Staff in clinics or offices should have access to the documents, with one person per service user assigned as "case manager".
- Provide clear instructions on availability of remote MHPSS services to users (e.g., frequency of sessions, when staff is available online, what to do in emergency situations, what to do when staff is not available, what user could expect from the service and if the service is expected to continue only in remote modality or in combination with in-person intervention.)

- Guide staff and users on guaranteeing confidentiality if services are provided from home (e.g., consider private room in home).
- Establish standard operating procedures (SOPs) and clear instructions to staff and users on how to do in specific situations (e.g. risk to self and/or risk to others).
- Provide regular supervision meetings and (interdisciplinary) consultations to help staff deal with this new situation.
- Develop contingency plans for services disruptions due to technology problems.
- Establish a monitoring system including the systematic register of data for each intervention (personal data, reason for consultation, follow up sessions, etc.) as well as information about users' and providers' perception, reasons for dropping out, etc.

Please consult the following resources for further guidance:

- COVID-19: Teleconsulta durante una pandemia, OPS/OMS: https://www.paho.org/ish/images/docs/covid-19-teleconsultas-es.pdf?ua=1:

- EQUIP self-learning courses from WHO: https://whoequipremote.org/

- PAHO/WHO eHealth Conversations (Pag. 99 – Telemedicina, Gestión y Evolución de Redes)

- PAHO/WHO Framework for the Implementation of a Telemedicine Service

- PAHO/WHO Defining evaluation indicators for telemedicine as a tool for reducing health inequities: Study and results of a community of practice

- WHO Guidelines on Digital Health Interventions

- https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/operational9

- Mental health and COVID-19 PAHO/WHO website : https://www.paho.org/en/mental-health-and-covid-19

- COVID-19: Intervenciones Recomendadas en Salud Mental y Apoyo Psicosocial (SMAPS) durante la Pandemia: https://www.paho.org/es/documentos/covid-19-intervenciones-recomendadas-salud-mental-apoyo-psicosocial-smaps-durante

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