Ethical Considerations for Implementing Telemental Health in Play Therapy:
A Reflective Exercise for Play Therapists
Based on the Association for Play Therapy’s Best Practice Guidelines

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The Association for Play Therapy (APT) developed its professional identity over 35 years ago, in 1982. Since then, APT has grounded its existence on the dedication to the professional development of its members, its Registered Play Therapists and Registered Play Therapist Supervisors (collectively, RPT/S), School Based-Registered Play Therapists (SB/RPT), the children and families play therapists service, and the greater mental health community. To this effect, APT operates to execute several important ends policies: Because APT exists, the public is aware of play therapy and its positive benefits (5.01); mental health professionals can increase their play therapy knowledge and expertise (5.02); licensed mental health professionals can earn and display credentials to publicly promote their play therapy expertise (5.03); reliable and credible research supporting the efficacy of and related to the field of play therapy will be shared and opportunities for further research will be promoted (5.04); and mental health professionals can access the benefits of an engaged and vibrant play therapy community (5.05). With over 7,500+ members (professional, affiliate, international), 4,300+ RPT/Ss and SB-RPTs, 31 approved centers, and 360 approved providers of education offering over 15,000+ hours of approved training, APT strives to support its members though this pandemic.

Play therapists are ethically required to provide services within the scope of their practice, gaining the appropriate education, knowledge, and supervision to do so. Although typical laws governing mental health practice may be rescinded in times of crises, it is each professional’s ethical obligation to obtain appropriate education, training, and supervision. APT encourages all members, RPT/Ss, and SB-RPTs to subscribe to APT’s (2019) Best Practices, and also to consider the future implications of servicing clients past the 2020 pandemic. It is imperative that members, RPT/Ss, and SB-RPTs servicing the greater community via telemental health, practice both professionally and ethically during the COVID-19 crisis to ensure the integrity, fidelity, and effectiveness of play therapy services. The information below summarizes APT’s (2019) Best Practices and, furthermore, offers
play therapists reflective considerations to think through in order to ensure appropriate service delivery. We recommend that play therapists read through considerations and actively engage in evaluating their current practices. To this end, a downloadable workbook is available on the APT website that includes space for play therapists to record their personal reflections and thoughts.

Note: at the time of this publication, APT was reviewing the Best Practice Guidelines. This document will be updated once those guidelines are finalized.
SECTION A: The Therapeutic Relationship

A.1 Commitments and Responsibilities to the Client

Play therapists will collaborate with the client and/or her/his legal guardian in creating a therapeutic treatment plan. Play therapists may explain the developmentally responsive treatment plan in an understandable manner to the client and/or her/his legal guardian, if applicable. Play therapists review this plan regularly, which should contain measurable outcome goals, to ensure viability, effectiveness, and the continued support of the client and the involvement of significant others in achieving the therapeutic goals.

1. Have you set up an initial parent consultation prior to initiating telemental health services with the child to review their treatment plan in order to assess objectives and goals and to include the provision of telemental health services?
2. Is telemental health the most effective medium for delivery of play therapy for this particular client?
3. Have you considered the child’s background (i.e., trauma, adverse experiences, attachment) in creating the treatment plan and making the decision to deliver play therapy through a telemental health platform?
4. How are you assessing the child’s level of regulation during and after the session?
5. What is your plan for helping the child regulate during and after the session?
6. Have you prepared the parent for the child’s emotional reactions following the session and how to respond to their child?
7. What are the boundaries that need to be considered regarding your virtual presence in the child’s home? How will you address those boundaries with both parent and child?
8. What are the boundaries that need to be considered regarding the child’s virtual presence in your home/office? How will you address those boundaries with both parent and child?

A.3 Rights of Clients

Play therapists inform clients and/or their legal guardian, when applicable, of the purposes, goals, techniques, procedural limitations, potential and foreseeable risks, risks of inconsistent compliance, and benefits of the services to be performed.

1. Have you informed parents of the procedural and therapeutic limitations and risks involved in telemental health delivery of play therapy?
2. Have you informed parents that there is currently no research that examines the effectiveness of play therapy through a telemental health platform?

Reflective Thoughts:  
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SECTION B: Parents and Family

B.1 Parents

Play therapists make a reasonable effort to ensure privacy for the client and maintain professional boundaries with the client/family during home-based therapy sessions and educate parents/family members regarding the need for privacy and confidentiality and maintenance of professional boundaries in a home-based therapy session.

1. Have you explained how you will be working with the child without the parent in the room? Have you provided parents a detailed overview of your objectives in their child’s sessions?
2. Is it emotionally and physically safe to include (or not to include) the parent in the room?
3. What is your decision-making model for determining if parent or others should be in room for a telemental health session?

Reflective Thoughts: ____________________________________________________________
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SECTION C: Confidentiality

C.1 Right to Privacy
Play therapists should refer to the most up to date HIPAA regulations and/or the guidelines from their state licensing laws and/or legal and ethical code of their professional organization regarding client confidentiality. Play therapists inform clients and their legal guardians of the limitations of confidentiality and identify foreseeable situations in which confidentiality might be breached. But, for authorized exceptions, play therapists also comply with all applicable regulations in the Health Insurance Portability and Accountability Act (HIPAA) and any other relevant regulations and professional guidelines.

1. Although the laws pertaining to practicing telemental health have been temporarily suspended by mental health licensing boards, clinicians should still pursue using HIPAA compliant software first.
2. Have you informed your clients of potential breaches that may occur if you do not use HIPAA compliant software prior to their consent for services?

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SECTION D: Professional Responsibility

D.1 Knowledge of Standards
Play therapists maintain current and accurate knowledge of state and/or federal statutes, regulations, and ethics codes. Play therapists are responsible for reading and understanding these Play Therapy Best Practices.

1. Have you reviewed your state laws? Profession’s ethical codes? APT’s Best Practices?
2. Have you consulted directly with your licensing board, attorney, insurance (and not relied solely on information from social media)?

D.2 Professional Competencies: Boundaries of Competence
Play therapists practice only within the scope of their competence. Competence is based on: training, supervised experience, professional credentials (state, national, and international), and professional experience. Play therapists commit to knowledge acquisition and/or skill development pertinent to working with a diverse client population.

1. Are you practicing within your scope of competence?
2. Have you received the appropriate training, supervision, experience, and certification based on your certification or licensing guidelines?
3. As a play therapist, have you committed to knowledge acquisition and/or skill development pertinent to working with a diverse client population via telemental health?

D.2 Professional Competencies: New Areas of Specialty
Play therapists practice a new specialty after obtaining appropriate education, training, and supervised experience. Play therapists take steps to ensure the competence of their work while developing skills in the new specialty.

1. Are you aware of the limitations of your theoretical orientation when implementing telemental health services?
2. Have you explained and discussed this change with your clients’ parents? Have you explained and discussed this change with your clients?
3. Have you received competent and direct supervision concerning the delivery of telemental health services?

Reflective Thoughts: ____________________________________________________________
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**D.2 Professional Competencies: Monitor Effectiveness**

*Play therapists monitor their effectiveness as professionals and pursue ongoing peer consultation, training, education, and/or supervision.*

1. How will you monitor the effectiveness of your telemental health services with your clients? Clients’ parents?
2. What is your assessment plan?

**D.2 Professional Competencies: Ethical Consultation**

*Play therapists consult relevant codes of ethics, professional standards, state and/or federal laws, with knowledgeable professionals and/or supervisors concerning questions regarding ethical obligations or professional practices.*

1. Despite national and state certification and licensing boards temporarily suspending requirements for the use of telemental health services, are you still continuing to abide by the ethical codes and laws that were promulgated?

**D.2 Professional Competencies: Continuing Education/Training**

*Play therapists acquire continuing education to maintain awareness of current research and best practice in play therapy, are open to incorporating new assessment and treatment procedures, and keep current with research regarding diverse and/or special populations with whom they work.*

1. There is no current research on the use of play therapy via telemental health services. How will you incorporate new assessment and treatment procedures in order to provide evidence-based services?

**Reflective Thoughts:**

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F.1 General

Play therapists provide the client and legal guardian appropriate information about: the assessments including the rationale, steps, and methods for assessment; the person who will receive the assessment results; and/or a feedback session of findings from the evaluation.

1. Mental health associations and APT recommends that clinicians utilize appropriate assessments in order to measure their clients’ progress.
2. What assessments are you using and have you discussed the use of assessments with your clients? Parents?
3. Are assessments standardized for telemental health?

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SECTION H: Supervision and Consultation

H.1 Supervisors: Supervision Preparation
Play therapists offering clinical supervision services are adequately trained in supervision methods and supervisory skills.

1. Does your supervisor have training and experience in telemental health delivery of services to children?

H.1 Supervisors: Responsibility for Services to Clients
Play therapist supervisors ensure that play therapy services provided to clients are professional and of high quality.

1. Are you ensuring that your supervisee is offering the highest possible level of quality services through telemental health?

H.1 Supervisors: Clinical Supervision Contract
Both supervisor and supervisee should ensure that the supervisor meets at least the minimum criteria set forth by their professional licensing and state boards, and that the types of supervision meet the same standards. Appropriate discussion points should include professional liability insurance, compliance with APT Best Practices, state licensing board rules, state laws, relevant code of ethics, duties of supervisor, duties of supervisee, billing for options for treatment, treatment records and bills.

1. As a supervisor, have you discussed the appropriate training, experience, supervision, and adherence to national and state recommendations and guidelines supervisees should be following?

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J.4 Use of Technology in Session

Play therapists who utilize or plan to utilize either computer or internet applications in play therapy including, but not limited to social networking sites, become fully aware of the potential benefits and limitations of this technology, and review the content to ensure appropriateness. Play therapists should refer to the most up to date HIPAA regulations and/or the guidelines from their state licensing laws and/or legal and ethical code of their professional organization regarding the use of technology in session.

Also, play therapists ensure that:

1. The client is developmentally capable of using and benefiting from the technology,
2. The technology meets the needs of the client and is culturally appropriate,
3. The client understands the purpose and operation of the technology,
4. The use of the technology is consistent with the treatment goals,
5. The client and guardian of a minor client fully understand the potential benefits and limitations of the technology,
6. All possible efforts are made to protect the client’s identity that may otherwise be compromised through the use of the technology,
7. Confidentiality issues and applicable state and/or federal guidelines, and/or legal and ethical code of their professional organization regarding the use of technology is carefully reviewed with clients and guardians of minor clients,
8. When utilizing technology for parent/legal guardian consultations, the play therapist will provide all parties with a written informed consent, including the benefits and or limitations of the technology being utilized.

1. Have you considered, followed, reviewed, and discussed all of the considerations with your client/client’s parents?
2. Have you assessed the appropriateness of telemental health delivery for each client?
3. What criteria are you using to determine each client’s appropriateness for telemental health delivery?
4. What is your decision-making model for determining each client’s appropriateness and treatment plan for telemental health delivery?

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References