I. **APPLICABILITY**: This policy applies to all Child, Adult, and Forensic State Psychiatric Center’s Inpatient Units including Forensic units.

II. **POLICY STATEMENT**: The purpose of this policy is to establish and facilitate the safe and therapeutic use of Devices/iPads by child and adult patients while receiving treatment in State Psychiatric Center Programs.

III. **RELATED STATUTES AND REGULATIONS**:  
   a) Telemental Health Regulation 596  
   b) Public Health Law Section 2999-dd.

IV. **DEFINITIONS**
   a) **Guided activity use** - clinical or non-clinical staff recommending, teaching or assisting patient to use a device application to support treatment.  
   b) **Onsite technology facilitator** - Staff to facilitate services via telemental health with patient.  
   c) **Patient agreement** - a written agreement that must be signed by patient and program manager or designee prior to patient device use. The agreement should clearly outline patient’s responsibility in using the device  
   d) **Patient consent** - a written informed consent document that patient must sign prior to receiving services via telemental health.  
   e) **Profile** - a group of applications on the device enabled for use  
   f) **Self-directed patient use** - Patient independently, or with appropriate staff supervision, using the device for approved activities including family visitation.  
   g) **Telemental Health** - two-way real time-interactive audio and video equipment to provide and support mental health services at a distance. For purposes of this policy, this will include provision of therapeutic and forensically related services by staff that includes but is not limited to rehabilitation staff, recreation staff, nutritionist, chaplain, peer specialist or other support staff as well as forensic evaluators and attorneys

V. **POLICY**
   a) **Uses for Devices/iPads**:  
      i. **Telemental Health** - two-way real time-interactive audio and video equipment to provide and support mental health services at a
distance. This can be for Clinical services (see “Guidance on Use of Telemental Health for Inpatient Psychiatric Services in PCs”) for purposes of this policy, this will include therapeutic and forensic services by staff that includes but is not limited to rehabilitation staff, recreation staff, nutritionist, chaplain, peer specialist or other support staff as well as forensic evaluators and attorneys.

ii. Guided activity use- staff recommending, teaching or assisting patient to use an application. For purposes of this policy, this will include therapeutic and forensic services by staff that includes but is not limited to rehabilitation staff, recreation staff, nutritionist, chaplain, peer specialist or other support staff. For example, a therapist meeting with a patient, identifying an app and teaching the patient how to utilize it to support their treatment.

iii. Self-directed patient use can include:
   a. Therapeutic activities, as defined by facility policy
   b. Recreational activities, as defined by facility policy
   c. Educational activities, as defined by facility policy
   d. Language support, such video remote interpreting (VRI)
   e. Contact with family or other therapeutic community supports (for example- teacher, care manager, etc.)

b) Programs for device use
   i. Inpatient units- Adult (including civil, forensic, and SOTP) and children’s units will be able to utilize devices/iPads for telemental health, guided activity, and/or self-directed patient use.
   ii. Residential programs- Adult and children’s residences and respite programs will be able to utilize devices/iPads for patient’s to receive services via telemental health, guided activity use, and/or self-directed patient use.
   iii. Outpatient programs- Adult and children’s outpatient programs will be able utilize devices/iPads for providing services via telemental health and guided activity use.

c) Facility administration responsibility for all programs
   i. Device tracking and management
      a. Upon receipt, facilities will verify devices/iPads, serial numbers, and accessories with Central Office and ensure they are clearly identified as OMH property.
b. Facility will establish a procedure to track and manage each device for each program.

c. Ensure that at least one device/iPad is always available for telemental health use and additional devices/iPads are prioritized for telemental health use.

d. Facility will determine a time allotment for self-directed patient activities.

e. Facility will ensure that policy related to use of devices/iPads is guided by the view of devices as an extension of treatment. Use of devices for therapeutic and family visits may be limited in consideration of concerns related to individual or community safety, but should not be driven by a system of rewards and consequences. Any limitations for use will be determined by the treatment team and documented. Policies related to use of devices for recreational purposes, if allowed, may be based upon determinations of safety, as well as clinical considerations related to therapeutic benefit and associated application.

f. Facility will establish and follow protocols for devices/iPads to be charged in a safe, locked location and ensure accountability for the safety and security of the device.

g. Facility will designate staff to provide services via telemental health

h. Facility will establish infection control practices that are completed between uses.

i. Facility will ensure that should State IT equipment be lost, stolen or destroyed, a written report of the circumstances surrounding the incident will be completed. OMH has the discretion to not issue or re-issue IT devices and equipment to users who repeatedly lose or damage State IT equipment.

j. Facility will establish a patient agreement that will include but not be limited to:

   i. patient agreeing to use device appropriately (not for illegal or untherapeutic purposes)

   ii. patient agreeing that they have been educated about facility policy and using device appropriately

   iii. to stay within a designated area

   iv. to refrain from willfully damaging device

   v. to notify staff of problems or low battery

   vi. not have food or drink while using device.
d) Staff Responsibility
   i. Treatment Team Leader/Unit Manager/Program Manager for all program areas:
      a. Designate and train staff as onsite technology facilitators for Telemental health appointments.
      b. Designate staff who are able to distribute devices/iPads for self-directed patient use, in consultation with appropriate Chief of Service or designee.
      c. Coordinate staff to provide services via telemental health
      d. The treatment team leader or their designee will ensure devices are not used as a reward or consequence, but as an extension of treatment. Concerns regarding safety or any associated limitations regarding use shall be brought to treatment team for discussion.
      e. Develop procedures for staff to track devices/iPads
      f. Ensure that devices/iPads are prioritized for telemental health use.
      g. Develop procedures for patient to “check out” a device.
      h. Ensure Unit guidelines regarding devices/iPads are posted and accessible to staff and patients. Ensure any existing emergency procedures applicable to iPad use are included.
   
   ii. Staff responsibility/duties in all program areas:
      a. Staff will review and verify with program manager that they understand all procedures prior delegating devices/iPads to patients.
      a. Staff will allow patients to use devices/iPads and follow any limitations for use determined by the patient’s treatment team.
      b. Staff will confirm patient identity and ensure patient has signed iPad agreement established by the facility.
      c. Staff will provide patient orientation to device before use and document that orientation was completed.
      d. Staff will follow directions in ITS user guide to log into the device before giving it to a patient.
      e. Staff will shield login information from patient. If a patient learns the login information, staff will immediately report to the Treatment Team Leader/Program manager and follow ITS
procedure to reset the login.

f. When patient is finished using iPad/device, staff will follow the directions in ITS user guide to log out of device

g. Staff will ensure the iPad/device is sanitized according to facility infection control protocols in between uses.

h. Staff will ensure the iPad/device is stored in designated location and plugged in to charge battery.

i. Staff will report to Treatment Team Leader/Program Manager/Designee immediately, if device is missing or not functioning properly.

iii. Patient Responsibilities in all program areas

   a. **Patient Agreement** - Prior to the initial use of the iPad/device, patient will be oriented to the expectations, procedures, and acknowledge patient agreement to use the device in accordance with facility's policy and procedures.

   b. **Patient Consent** - This is for treatment services by clinicians via Telemental Health. Patients will be informed of the use of telemental health for treatment including advantages and limitations. For state-operated programs, written consent (signed by the patient or guardian) for participation in telemental health will be obtained and incorporated into the general consent form upon admission. A separate consent form for telemental health may be used if consent was not provided upon admission (See Telemental health guidance for more information)

   c. Devices/iPads will be available to patients as an extension of their treatment unless determined and documented by the patients’ treatment team reasons where Device/iPad use is clinically contraindicated.

   d. Patients will be assisted by the onsite technology facilitator to receive services via telemental health.

   e. Patients will follow the facility procedures to access devices/iPads for guided activity use and self-directed patient activity use.

iv. Additional guidelines for Inpatient Unit Use
Use of Devices/iPads with Patients in State Operated Programs

a. Onsite Technology Facilitator Responsibilities will include but not limited to:
   i. Staff will be designated by program manager to be the onsite technology facilitator.
   ii. Based on clinical assessment and indication, a facilitator may provide a supervisory role by being present for the session.
   iii. Set up the device with conferencing app (see applications usability guidelines for information on approved applications) and help the patient navigate the screen view settings as needed.
   iv. Ensure battery life is adequate for the intended session length
   v. Communicate vital information to off-site clinician. There should always be an alternative method of communication between the off-site provider and between the facilitator and off-site provider and the unit.
   vi. Verify identification of patient
   vii. Be available throughout the telemental health session to troubleshoot technical difficulties that impact connectivity
   viii. Ensure the Device/iPad is sanitized according to facility Device/iPad protocol in between use
   ix. Ensure the Device/iPad is stored in designated location and charged.
   x. Report to Treatment Team Leader / Program Manager / Designee immediately, if device is missing or not functioning properly or if there is concern about profile safety/security
   xi. Follow emergency procedures established by facility

b. Unit Staff responsibilities
   i. Staff will supervise patient for self-directed patient use of device as designated by treatment team to ensure patient uses the device properly at all times.

c. Clinical and Non-Clinical Staff responsibilities:
   i. Designated staff may provide services via telemental health (see Telemental Health guidance for further information)
   ii. Identify activities on the iPad to support a patient’s treatment goals.
iii. Provide a guided activity with patient by recommending, teaching or assisting patient to use an app on a device/iPad to support treatment goals in accordance with facility policy.

iv. Document iPad activities into the patient’s treatment plan as appropriate.

v. Additional Guidelines for Residential Program Use
   a. Program manager will designate staff to track and distribute devices/iPads
   b. Program Staff will observe and/or check in with patient as designated by facility (for example, every 15 minutes) during device use to ensure patient uses device properly.
   c. The outpatient provider is responsible for getting any consent required prior to services via telemental health.
   d. Patients can utilize device for self-directed patient use and/or guided activity use as defined in program policy.

vi. Additional Guidelines for Outpatient Service Use
   a. Outpatient staff can use devices/iPads to provide services via telemental health. Staff must ensure logout of device between telemental health sessions.
   b. Outpatient staff can use devices/iPads with patient in sessions for guided activity use such as engagement, teaching therapeutic, supportive activities, cognitive remediation, video conferencing with community providers such as care managers, etc.

e) Device Support
   i. For problems with the device or accessing Wi-Fi, facility staff can contact their local ITS staff for support.
   ii. For Login reset or if the password has been compromised, immediately contact: CO.TELEHEALTH@omh.ny.gov
   iii. Availability of adding content and accessories
       a. Devices/iPads configured by ITS with profiles (for example, Telemental Health, educational, recreational, etc.) for patient use will be allowed on inpatient unit, residential, and outpatient programs.
b. Application profiles enable the iPads to be shared across units and patients. Each profile will have authorized Apps available to the users. The patient’s treatment team will determine which profile can be accessed. Logging out of the profile, removes all the Apps and patient private data so the device can be used by the next patient.

c. These devices/iPads will not allow apps to be purchased or added to the iPad.

d. Apps can only be added to the profiles by ITS with Central Office approval.

e. Internet browser access will be blocked. Patients will have no direct access to internet and can only access authorized applications based on clinical judgment of treatment team.

f. Accessories will have to be purchased through the facility business office or by patient if approved by the treatment team. All accessories must be in accordance with ligature risk guidelines and added to environmental risk assessments and clinical assessments as necessary.

VI. RELATED PROCEDURES

a) Guidance for Use of Telemental Health in Psychiatric Center Inpatient Units

b) ITS iPad user Guide