COVID-19 Best Practice Information: Crisis Counseling

Background

- During a pandemic it is common for individuals to feel emotional unrest. The healthcare system and various organizations are taking measures toward providing adequate aid and guidance for individuals with existing mental health conditions as well as those experiencing enhanced emotional distress during the coronavirus disease (COVID-19) outbreak.

- The following is a list of key findings and considerations as they relate to ongoing COVID-19 response operations across the country. These are best practices for consideration and do not constitute and should not be considered as guidance in any way.

Key Considerations

- The Centers For Disease Control and Prevention (CDC), World Health Organization (WHO), numerous mental health organizations, and healthcare providers are encouraging individuals to maintain familiar routines in daily life as much as possible; including taking care of basic needs and employing helpful coping strategies.

- The Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Distress Helpline provides 24/7, 365-day-a-year crisis counseling and support to individuals experiencing emotional distress related to disasters. The number for the Disaster Distress Helpline is 1-800-985-5990.

- Outpatient treatment should be utilized to the greatest extent possible to limit the spread of COVID-19. Individuals should contact health care providers regarding tele-therapy or mental health services online.

Lessons Learned Related to COVID-19 Operations and Crisis Counseling

Preventative Measures

- **Area for Improvement:** Mental health emergencies may increase as a result of a disruption in client support and ongoing treatment.¹
  - **Mitigating Action/Resource:** In case of a dangerous or life-threatening emergency, always dial 911 immediately. Request that Crisis Intervention Team (CIT) officers respond if available.²

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¹ 2017 TAP 34: Disaster Planning Handbook for Behavioral Health Treatment Program
² 2020 NAMI National Resource Directory
• **Area for Improvement:** Staff shortages may occur due to workers quarantined, avoiding exposure, or caring for ill family members.³
  - **Mitigating Action/Resource:** Identify alternative ways to serve clients including outpatient treatment, monitor by telehealth if appropriate, or transferring clients to other providers with mutual aid agreements.

• **Potential Best Practice:** Incorporate approaches for screening for COVID-19 symptoms prior to arrival if offering in-person appointments.⁴

• **Potential Best Practice:** Contact pharmacies to determine if they provide delivery services or longer supplies for prescription medication.⁵

**Isolation and Support Groups**

• **Potential Best Practice:** Individuals are advised to avoid watching, reading, or listening to news that causes them to feel anxious or distressed; seeking information from health care professionals only, at specific times of day, to inform steps to prepare plans and protect loved ones.⁶

• **Potential Best Practice:** The National Alliance on Mental Illness (NAMI) encourages individuals to check-in with at-risk loved ones via phone, e-mail, video conference or connecting on social media.⁷

• **Potential Best Practice:** NAMI encourages contacting a warmline. Warmlines are confidential, non-crisis emotional support telephone hotlines staffed by peer volunteers who are in recovery. NAMI Helpline Warmline Directory is a resource to finding local warmlines.⁸

• **Potential Best Practice:** Mental Health America (MHA) offers at home, free, anonymous, and confidential online tools and screenings to determine whether you are experiencing symptoms of a mental health condition.⁹

• **Strength:** NAMI provides a Helpline Resource Directory with an extensive list of online support groups and other mental health resources. Local NAMI Affiliates or State Organizations also provide support program information.¹⁰

**Telehealth**

• **Strength:** On March 17, 2020, the Trump Administration and the HHS announced steps to expand Americans' access to telehealth services during the COVID-19 outbreak. The HHS Office of Inspector General (OIG) provided flexibility for healthcare providers to reduce or waive beneficiary cost-sharing for telehealth visits paid by federal healthcare programs. The Centers for Medicare & Medicaid Services (CMS) proceeded to expand Medicare coverage for telehealth visits.

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³ 2017 TAP 34: Disaster Planning Handbook for Behavioral Health Treatment Program
⁵ 2020 MHA Living with Mental Illness During COVID-19 Outbreak – Preparing For Your Wellness
⁶ 2020 WHO Mental Health Considerations during COVID-19 Outbreak
⁷ 2020 NAMI COVID-19 (Coronavirus) Information and Resources
⁸ 2020 NAMI COVID-19 (Coronavirus) Information and Resources
⁹ 2020 MHA Living with Mental Illness During COVID-19 Outbreak – Preparing For Your Wellness
¹⁰ 2020 NAMI COVID-19 (Coronavirus) Information and Resources
Medicare beneficiaries are able to receive a specific set of services through telehealth including mental health counseling.11

- **Area for Improvement:** Some providers do not have access to Health Insurance Portability and Accountability Act of 1996 (HIPAA) approved technology to conduct a virtual video-enabled counseling session.12
  - **Mitigating Action/Resource:** As of March 17, 2020, The Department of Health and Human Services (HHS) Office for Civil Rights (OCR) announced it will waive potential HIPAA penalties for good faith use of telehealth during the emergency.13
  - **Mitigating Action/Resource:** Popular applications that allow for video chat including Apple Facetime, Facebook Messenger video chat, Google Hangouts video, Zoom, or Skype may be utilized during the current nationwide public health emergency.14

- **Potential Best Practice:** Providers should continue regular check-in with patients through the use of telemedicine where possible.15

- **Potential Best Practice:** Healthcare providers should communicate visit changes to patients. If offering TeleVisits, post information to the organization’s website, consider changing phone script to include this information at the beginning of your recording, call patients with upcoming appointments to offer TeleVisit. Consider targeted outreach to “high risk” patients.16

- **Potential Best Practice:** NAMI encourages those experiencing symptoms contact local mental health crisis teams in order to avoid further risk of exposure by reporting directly to the emergency room.17
  - Phone numbers can be found through the local jurisdiction’s department of Health and Human Services by searching “crisis” or searching “Emergency Mental Health Services”.18

- **Potential Best Practice:** Using telehealth promotes the practice of social distancing and reduces the risk of spread in high-volume/traffic areas such as waiting rooms.19

- **Potential Best Practice:** The SAMHSA Disaster Distress Helpline provides counseling and support before, during and after disasters and refer individuals to local resources for follow-up care and support.20
  - Call 1-800-985-5900 or text TalkWithUs to 66746. This hotline is a toll-free, multilingual and confidential crises support service available for all residents in the United States and its territories.

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11 2020 HHS Secretary Azar Announces Historic Expansion of Telehealth Access to Combat COVID-19
12 2020 OPTUM Behavioral Health: COVID-19 updates to telehealth policies
13 2020 HHS, OCR Announces Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency
14 This document contains references and links to non-federal resources and organizations. This information is meant solely for informational purposes and is not intended to be an endorsement of any non-federal entity by FEMA, U.S. Department of Homeland Security or the U.S. government.
15 2020 SAMHSA Considerations for Outpatient and Substance Use Disorder Treatment Settings
17 2020 NAMI Minnesota Mental Health Support and COVID-19
18 2020 NAMI National Helpline Resource Directory
20 2019 SAMHSA Disaster Distress Helpline