Telephone Delivered Therapy – Busting the Myths
Aims & objectives

• Help people to think differently about using telephonic therapy within their practice
• Understand the real challenges of delivering therapy using this modality
• Relate to clinical experience – what does practice based evidence have to say?
Do you believe that telephone therapy is as effective as therapy delivered face to face?

A. Yes
B. No
Would you use the telephone to deliver therapy?

A. Yes
B. No
Effectiveness of telephone CBT

Bee et al (2008) meta analysis

- good treatment effects
- therapeutic alliance may not be dependant on co-location of patient and therapist
- More research required
What challenges does the research suggest?

Challenges (Brenes et al., 2012)

- Development of therapeutic alliance
- Ethical & legal issues
- Privacy & confidentiality
- Crisis situations
- Psychotherapist adjustment
- Lack of control over the environment
Lack of control over the environment

In reality

- More control over the environment just balance of power has shifted with the individual choosing location, time, place of safety for emotional expression
- Setting session expectations exactly as would happen in face to face therapy minimises interruptions, inappropriate venues, eavesdropping
Privacy & confidentiality

From experience

- Robust processes ensure informed consent regarding data protection and storage of records is attained
- Telephone systems with capacity to record and hold data with password protection are in place
- Utilisation of landlines whenever possible
- No different to telephone banking!
Development of therapeutic alliance

We have found

- The therapeutic relationship is enhanced not hindered by nonauditory cues
- Empathy is verbalised with statements which are explicit rather than through nonverbal expression which can be missed or misinterpreted
- More invested in therapy as can express feelings more easily when not in the room – not judgin
Ethical & legal issues

Has not been problematic

- Specific telepsychotherapy guidelines are not available but codes of conduct are followed in exactly the same way as when seeing someone face to face
- If face to face more appropriate as supported by NICE guidelines the facility to refer for this is in place
- Supervision requirements met
- Secure communications and transfer of data in place
Crisis

Can be managed effectively

- Not unique to telephone therapy
- Clear risk assessment at triage
- Risk monitored throughout
- Clear escalation policy
- Risk management procedure in place
- Support systems for therapists
Psychotherapist adjustment

Our reality

- Was born out of necessity – service delivery is across the UK and limited availability of face to face therapists in some locations
- Practice what you preach
- Recruit therapists that endorse the model or at least willing to give it a go
- Sessions can be more not less focussed – intense concentration
Case study evidence – 100% data collection

- 2 site comparison
- Similar workforce demographic
- Outcomes analysis
- Site 1 – telephone assessment & face to face treatment model
- Site 2 – telephone assessment stepped care telephonic treatment model

- 100% cases at work on discharge
- Average scores on outcome measures moderate – normal
- All cases discharged below casesness
- No difference in PSQ score average of 96%
- ROI = 20:1
- Treatment Site 2 cost 63% less
# Case Study – 2 site comparison

## Measures of Success

<table>
<thead>
<tr>
<th>Measures of Success</th>
<th>Site A – F2F</th>
<th>Site B - Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Work Outcomes</strong></td>
<td>100% RTW</td>
<td>100% RTW</td>
</tr>
<tr>
<td><strong>Clinical Outcomes</strong></td>
<td>All below caseness</td>
<td>All below caseness</td>
</tr>
<tr>
<td>PHQ-9</td>
<td>13.8 – 1.8</td>
<td>12.5 – 0.2</td>
</tr>
<tr>
<td>Gad-7</td>
<td>9.2 – 1.0</td>
<td>11.2 – 0.2</td>
</tr>
<tr>
<td><strong>PSQ</strong></td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td><strong>Days in treatment</strong></td>
<td>68 days</td>
<td>32 days</td>
</tr>
<tr>
<td><strong>Return to work</strong></td>
<td>Average session 4</td>
<td>Average session 2</td>
</tr>
<tr>
<td><strong>Cost</strong></td>
<td></td>
<td>63% less than site A</td>
</tr>
</tbody>
</table>

**ROI 20:1**

NHS cases returned to work on average at least 63 days later
Practice based evidence points to ...

- **Acceptability**
  - High levels of satisfaction
  - Reduced drop out rates
- **Accessibility**
  - Flexibility in time & venue of appointments
  - Virtually all households have a telephone
  - Increased attendance
- **Equal if not better outcomes**
- **Reduction in stigma**
So the real challenge is....
Feedback on telephone therapy

• I understand that following my sessions with Rob Mellors that I can provide feedback to yourself. Unfortunately it is all good so there is no positive criticism. I admit to being dubious on having counselling initially especially over the phone as opposed to face to face. This was dealt with wonderfully challenging my anxiety etc over this and numerous other issues. It has helped me look at things differently and hopefully I will continue to do so in the future especially over negative thinking. Overall an excellent service that has no doubt had an effect on my new life!

• I have recently just finished my therapy sessions with one of your therapists and I would like to give positive feedback as he has done a wonderful job. He has been so understanding and patient and very helpful and was always clear and concise and always listened to my opinion and also made me comfortable as I was first sceptical about therapy, especially over the telephone but he has changed my mind and I would recommend this to everyone who is in need and I hope other people in my position are able to receive excellent service as well.

• To be honest when I first heard I am going to receive therapy over the phone, I thought what good is that? surely you need to be face to face with someone. The therapy really helped me to achieve where I am now today. I will never forget my accident but I know now from his teaching of dealing with these thoughts, I am able to drive with a lot more confidence.
Would you use the telephone to deliver therapy?

A. Yes
B. No
References


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For further information
please visit www.rehabworks.co.uk
or call 0845 263 8345