



**American Horticultural Therapy Association®**

# **Horticultural Therapy Telehealth Internship Guidelines**

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# **Guidelines for Telehealth Horticultural Therapy Internships**

## **I. Statement and Purpose of Guidelines for Telehealth Horticultural Therapy Internships**

The COVID-19 pandemic has challenged horticultural therapy practitioners to adjust to new demands of those in need and has created a need for horticultural therapists to become more innovative in providing horticultural therapy services than ever before. One of the biggest challenges that many horticultural therapists face at this time is how to adapt and accommodate horticultural therapy interventions to new modes of treatment such as virtual or telehealth channels. It is essential for the continued development of our profession to learn to adapt to our environment and the needs of our clients no matter what the challenge at the time may be. The American Horticultural Therapy Association (AHTA) recognizes that many of its members have successfully adapted the horticultural therapy modality to the telehealth medium, and for this, the Association is thankful to these members who have laid the groundwork for the continued development of our profession.

In addition to the adverse effects of the COVID-19 pandemic on professionally registered horticultural therapists, it has also affected horticultural therapy interns in their efforts to accrue direct contact hours to meet the requirements for professional registration. Since March 2020, the AHTA's position has been that horticultural therapy sessions held virtually are not accepted as direct client hours. At this time, the AHTA extended the timeline to complete an internship by one year to allow time to accrue face-to-face hours when programs open and return to in-person services. Given the current state of COVID-19 epidemiology, risk factors, status of therapeutics and treatments available, and uncertainty in returning to traditional horticultural therapy work with clients, the AHTA has adapted its response and has changed its position in regard to what is considered "direct contact client hours" for the horticultural therapy internship during COVID-19. **Effective September 1, 2020, the American Horticultural Therapy Association will allow horticultural therapy interns to accrue direct contact client hours through the use of virtual/telehealth Horticultural Therapy.** It is important to note that the AHTA continues to believe that in-person, face-to-face interactions are the ideal method to accrue direct contact hours and will return to this requirement post COVID-19.

In the interest of supporting the continued education of horticultural therapy interns in the time of COVID-19, the Professional Education Work Team of the American Horticultural Therapy Association has developed a guide for Internship Supervisors who are supervising interns at this time. While this guide is intended for use for intern supervision, it is applicable for any horticultural therapist who is conducting virtual horticultural therapy sessions or is considering conducting horticultural therapy sessions. In this resource, you will find information

and recommendations on adapting the horticultural therapy internship for telehealth to meet client needs while also simultaneously meeting the internship clinical goals for the intern. You will also find information on maintaining confidentiality and informed consent. A recommended protocol for virtual horticultural therapy sessions and sample informed consent template will also be provided.

## **II. Horticultural Therapy Internship Clinical Goals through Use of Telehealth**

There are numerous benefits of the direct, in-person, face-to-face interactions between a horticultural therapist (intern) and client. In an in-person, face-to-face session, the client is able to be supported in the moment during the therapy process, and the therapist or intern is able to observe the client as a whole within their environment and respond accordingly using that information. The AHTA recognizes that a virtual horticultural therapy internship can make it very challenging for the intern to develop and hone these skills, in addition to clinical reasoning, therapeutic use of self, and interpersonal skills. It is vital for a supervisor who is supervising an intern conducting virtual horticultural therapy sessions to be creative and develop new ways to ensure that the intern develops competency in these skills. Supervisors may choose to use techniques such as:

- Virtual role-play sessions between the supervisor and the intern to practice interpersonal skills/therapeutic use of self
- Use of video vignettes online or other media to assist in the development of clinical reasoning skills
- Encouraging the intern to engage in discussion groups with other therapists or interns to support the development of therapeutic use of self

The above recommended techniques are a few ideas intended to accommodate the virtual internship to meet clinical goals related to the direct contact client hours. Please refer to the AHTA Internship Handbook to review the complete list of goals for the internship.

## **III. Confidentiality**

Virtual horticultural therapy sessions pose a unique issue in regard to maintaining client confidentiality and minimizing breaches in protected health information (PHI) as identified in the Health Insurance Portability and Accountability Act (HIPAA) guidelines. The internship supervisor, in collaboration with the internship host facility, is responsible for the ongoing monitoring of the intern's practices in maintaining confidentiality so that the intern is acting in adherence with HIPAA guidelines. It is also recommended that the internship supervisor and internship host facility also monitor and remain informed of the rapidly changing state and national telehealth guidelines.

## **HIPPA-compliant Telehealth Options**

The AHTA and Professional Education Work Team recommend that all horticultural therapy virtual sessions are conducted through encrypted, HIPAA-compliant video communication products. A list of vendors that represent that they provide HIPPA-compliant video communication are:

- Skype for Business / Microsoft Teams
- Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet
- Cisco Webex Meetings / Webex Teams
- Amazon Chime
- GoTo Meeting

The AHTA has not individually reviewed these vendors in-depth and this list does not constitute an endorsement or recommendation of the technology, software, applications, or products provided by these vendors. Internship supervisors should work with the host internship facility to identify the appropriate technology to use for virtual horticultural therapy sessions.

In addition to the privacy concerns in regard to use of video communication services, there are additional privacy considerations to be made regarding the environment. To protect confidentiality, the horticultural therapy intern should ensure that while in session there is no one in the vicinity of the intern that can overhear the intern-client interactions. Internship supervisors should prompt interns to discuss with their clients how to approach situations where someone interrupts the session on the client's end. Typically, there are three options to handle such interruptions:

- 1) To incorporate the interrupting individual(s)/family member(s), etc. into the session
- 2) Change topics, or;
- 3) Discontinue and reschedule when the interrupting individual(s)/family member(s) are not present

Internship supervisors should prompt interns to present these options to the client at the beginning of the virtual session and be reassessed regularly. The client should be encouraged to make their own decision on how to handle interruptions to foster a sense of empowerment and autonomy.

## **IV. Consent for Telehealth Horticultural Therapy Services**

In alignment with Section D of the AHTA Code of Ethics, the AHTA recommends the use of informed consent by horticultural therapists and horticultural therapy interns for telehealth/virtual horticultural therapy sessions. Informed consent is a document that:

- Explains the risks and benefits associated with horticultural therapy treatment
  - Risks may include:
    - Ensuring information remains confidential
    - Challenges operating technology/technological issues
    - Crisis management and intervention
  - Benefits may include:
    - Minimizing Coronavirus (COVID-19) infection
    - Ensuring continuity of care
    - More convenient
    - Takes up less time from the client's day
- Ensures that the client understands the medium through which horticultural therapy will be provided, as well as, any limitations of the treatment provided via telehealth

### **What should be included in a Virtual Horticultural Therapy Informed Consent?**

It is best practice to obtain informed consent for telehealth horticultural therapy services before beginning to work with a client. The informed consent outlines the aspects of virtual therapy sessions and includes an explanation of what horticultural therapy is, what virtual horticultural therapy is, who provides the service and what information may be shared through telehealth. Included should be a list of risks and benefits of telehealth, and also identify what to do in case of emergency. Additionally, it may also be helpful to include an explanation of the type of technology that is being used and what technological requirements are needed.

Informed consent for virtual horticultural therapy services should also discuss:

- Scheduling Horticultural Therapy Sessions
- Privacy/security measures
- Potential risks
- Limits to confidentiality
- Explicit emergency plan
- Storage of client information and potential for technical failure
- Procedures for coordinating care
- Billing/payment arrangements

Due to the varying requirements from state to state and agency to agency, it is the supervisor's responsibility to work with the intern and the internship host facility to develop the informed consent form that meets the requirements for that facility. The informed consent form should be signed by the horticultural therapist/horticultural therapy intern, the client, and/or legal guardian and filed in a secure location, such as a client's medical record or treatment plan.

## **V. Guidelines for Conducting Telehealth Horticultural Therapy Sessions**

As mentioned above, as part of informed consent each client should be screened by the horticultural therapy intern to ensure that he/she/they understands the nature of horticultural therapy, agrees upon an appropriate treatment plan, and has access to the space and equipment necessary to facilitate a virtual/telehealth connection. The potential barriers to discomfort should also be identified with the client, such as discomfort with, or difficulty or inability to operate technology, communication barriers, and potential compliance issues (HIPAA compliance, keeping appointment times, rescheduling, unwillingness to work towards therapy goals, etc.)

If there are no barriers to participation in telehealth horticultural therapy services, goals for virtual sessions are determined in the same manner as in-person, face-to-face horticultural therapy sessions, with consideration for the reason for referral, client/client family desired outcomes, and assessment of presenting issues. It is recommended that each client be issued a horticultural supply kit that includes all of the required supplies and materials needed to facilitate the telehealth connection. Activities may also be modified with household objects to accommodate clients who may not have gardening supplies available. It is the supervisor's responsibility to work collaboratively with the intern to accommodate therapy sessions for telehealth.

One of the most limiting factors in the use of telehealth technology is that the horticultural therapist and client have limited control of their camera placement during sessions, and cameras have a limited field of view. This means that the intern may find that they must choose between viewing the client's facial expression or viewing the client's horticultural process during a session; the intern is rarely able to view both at the same time. As a result, the intern may need to infer changes in client affect information *or* the intern may need to interrupt the client's horticultural process when they normally would not to ask the client to identify their feelings or thoughts.

Because telehealth limits visual information (what is seen is only what is visible on the screen) and does not allow for the hands-on technical assistance that is traditionally provided in in-person horticultural therapy sessions, physical, cognitive or communication barriers that prevent a participant from verbalizing their needs or responding to verbal cues may present an obstacle for treatment. In these cases, it is recommended that an appropriate care provider on

site with the client be on call to assist during virtual horticultural therapy sessions. Clients may decline to participate in virtual horticultural therapy sessions, however they must never be denied access to virtual horticultural therapy sessions because of the functional limitations of their disability/health condition.

It is recommended that interns working with a client with physical impairments should frequently assess the client for pain and fall risk, and work with the client to become adept in describing their posture, gestures, and physical sensations to the horticultural therapy intern. Fall risk assessment is important in face-to-face horticultural therapy sessions and assessing for fall risk during a virtual session is even more important given that the client may be in an environment that is away from staff, family, or anyone who is able to help. For virtual horticultural therapy sessions, it is recommended that the intern assess for fall risk during the initial session, and then assess in each subsequent session. Through the lens of a camera, it may be difficult or not possible for the intern to scan the environment for fall hazards. It is recommended that the intern verbally requests that a stable chair be within an arm's reach of the client at all times during the horticultural therapy session and the intern should also model this behavior to the client by having a sturdy chair on hand and using it for balance and stability when bending the knees, and balancing on one leg or rising on one's toes. In the weekly fall risk assessment, the intern should also evaluate:

- Any pain experienced by the client
- Vertigo
- Dizziness
- Whether or not the client has had and falls since the last session, and;
- Any other physical changes that may have occurred that might increase risk for fall or loss of balance

The horticultural therapy intern supervisor should ensure that the intern regularly reminds clients to move in a manner that is comfortable and to let the intern know verbally if there is any discomfort or pain experienced. Intern supervisors should also work to ensure that interns are knowledgeable of the observable signs of discomfort so that the intern is able recognize when their client may be in pain and also have the skills to intervene or end the session as needed.



## **VI. Sample Informed Consent for Telehealth Horticultural Therapy**

### **INFORMED CONSENT FOR TELEHEALTH HORTICULTURAL THERAPY DURING THE CORONAVIRUS (COVID-19) PANDEMIC**

This informed consent for telehealth horticultural therapy contains information on how horticultural therapy services will be provided using distance video communication. Please read this document carefully and let me know if you have any questions.

#### **What is horticultural therapy?**

Horticultural therapy is a rehabilitative and therapeutic modality in which plants and plant-based activity is used to achieve specific goals within an established treatment, rehabilitation, or vocational plan. A horticultural therapist will work with you to identify goals, treatment issues, or opportunities for change, create a treatment plan, and then schedule regular horticultural therapy sessions where you and your horticultural therapist will meet in person to engage in horticultural activity to address goals and/or treatment issues.

#### **What is telehealth horticultural therapy?**

Telehealth horticultural therapy is a therapy intervention in which the horticultural therapy session is conducted on-line through the use of video communication technology. In telehealth horticultural therapy, the therapeutic process remains the same as in-person horticultural therapy, however, the horticultural activities will be adapted so that the therapy intervention can occur remotely.

#### **Benefits and Risks of Telehealth Horticultural Therapy**

One of the benefits of telehealth is that you and your horticultural therapist can engage in services without being in the same physical location. This is helpful during the Coronavirus (COVID-19) pandemic to ensure the continuity of your care while also minimizing the risk for infection. Many individuals find telehealth horticultural therapy to be more convenient. These benefits make telehealth horticultural therapy very appealing, but there are differences between in-person horticultural therapy and telehealth horticultural therapy, as well as, some risks. For example:

- Risks to confidentiality – Telehealth horticultural therapy takes place remotely using video communication software and as a result, there may be potential for people to overhear your session if you are not in a private place during your session. As your horticultural therapist, I will take reasonable steps to ensure your privacy. It is

important for you to find a private place for your horticultural therapy sessions where you will not be interrupted.

- Issues with technology – There is potential to experience issues with using technology in a telehealth horticultural therapy session. There may be issues connecting to the video communication software or the technology may stop during the session. As with all activity used over the internet, there is a potential for stored data to be access by unauthorized people or companies.
- Crisis management – Clients who are currently in a crisis situation and who would require high levels of support will benefit from direct, in-person care and telehealth horticultural therapy is not the best intervention for individuals who require this level of care. Before engaging in telehealth horticultural therapy, we will develop an emergency response plan to address potential crisis situations that may arise during the course of our work in horticultural therapy.

## **Confidentiality**

I have a legal and ethical responsibility to protect all communications that are a part of telehealth horticultural therapy sessions. The nature of electronic communications technologies, however, is such that I cannot guarantee that our communications will be kept confidential or that people will not gain unauthorized access to our communications. I will take all reasonable steps to protect and keep your information protected, and you should also take reasonable steps to protect your information. Ways to protect your information are to only use secure networks to access telehealth horticultural therapy sessions, and also to use passwords to protect the device you are using for telehealth. The telehealth horticultural therapy sessions are not to be recorded in any way unless agreed to in writing by mutual consent.

As your horticultural therapist, I respect your privacy and confidentiality and I practice the protection of information in accordance with the Health Insurance Portability and Accountability Act (HIPAA). This means that all notes and records, documents and data associated with your horticultural therapy sessions will be considered confidential. While this information is confidential, the information from horticultural therapy sessions may be shared with your treatment team, parent, or legal guardian in effort to facilitate the best treatment outcome possible.

Please let me know if you have any questions about confidentiality and exceptions to confidentiality.

## **Electronic Communications**

To participate in telehealth horticultural therapy, you must have a computer or smart phone to access the video communication technology. As a recipient of services, you are solely responsible for any cost to you to obtain any necessary equipment, accessories, or software to utilize telehealth horticultural therapy services.

For communication between sessions, I will only either email communication, telephone, or text messaging with your permission only and for administrative purposes unless we have made another agreement. This means that all interactions in-between sessions are for administrative purposes (setting up and changing appointment times, billing, etc.) and not for the purpose of horticultural therapy. I will not discuss any treatment specific information by email, text, or telephone and I encourage that you do not either. I also do not regularly check email or texts and do not respond immediately, therefore, these methods should be used for emergency purposes only.

Horticultural therapy treatment is most effective when you meet with your therapist at regularly scheduled sessions. If an issue arises you may reach me by phone, and I will try to return your phone call within 24 hours except on weekends and holidays. In case of an emergency and you are unable to reach me, please contact your doctor or visit the nearest emergency room. In the event I am unavailable for an extended period of time, I will provide you with the name of a colleague to contact in my absence, and/or we will discuss modifying the therapy schedule to meet at a time when I return.

## **Appropriateness of Telehealth Horticultural Therapy**

It is your decision to make if telehealth horticultural therapy is no longer the most appropriate form of treatment for you and if this is the case, it is important to let me know. We will discuss options for referrals to another profession or therapeutic modality in your location who can provide you with the services best for you.

## **Emergencies and Technology**

To address difficulties in assessing and evaluating threats and emergency situations we will create an emergency plan before engaging in telehealth horticultural therapy. I will ask you to identify an emergency contact person who is near your location and who I will contact in the event of a crisis or emergency to assist in addressing the situation at hand. A separate authorization form will need to be signed to allow me to contact your emergency contact person if the person is different than a parent or legal guardian.

**Fees**

The same fee rates will apply for telehealth as for in-person horticultural therapy. If there is a technological failure and we are unable to resume the connection, you will only be charged the prorated amount of actual session time.

**Informed Consent**

Your signature below indicates that you have been informed and are in agreement with the terms and conditions with telehealth horticultural therapy.

\_\_\_\_\_  
Client/Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Horticultural Therapist/Intern

\_\_\_\_\_  
Date