Behavioral Health Institute (BHI)
Training, Workforce and Policy Innovation Center
TeleBehavioral Health 401 Training Series

Behavioral Health Telehealth Resource
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November 17, 2023

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Behavioral Health Institute (BHI)
Training, Workforce and Policy Innovation Center

The Behavioral Health Institute is a Center of Excellence where innovation, research and clinical practice come together to improve mental health and addiction treatment. BHI established initial priority programs which include:

- Improving care for youth and young adults with early psychosis
- Behavioral Health Urgent Care Walk in Clinic
- Behavioral Health Training, Workforce and Policy Innovation Center
- Expanded Digital and Telehealth Services

Speaker Disclosures

None of the series speakers have any relevant conflicts of interest to disclose.

Planner disclosures

The following series planners and team have no relevant conflicts of interest to disclose:

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DISCLAIMER

Please be aware that policy changes may take place after the original date of this presentation.

Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.

Please consult with legal counsel, billing & coding experts, and compliance professionals, as well as current legislative and regulatory sources, for accurate and up-to-date information.

We gratefully acknowledge the support from

TeleBehavioral Health 401

Lessons Learned from the Psychotherapeutic Use of Hypnosis via Telemedicine

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NOVEMBER 17, 2023

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Learning Objectives:

1. Anticipate some of the problems that are likely to occur when inviting telemedicine patients to "try something new" during a telemedicine visit

2. Anticipate, prepare for, and manage unexpected events during telemedicine visits

3. Articulate ethical dilemmas and their management when conducting telemedicine visits

What is hypnosis?

- "Hypnosis is a focused experience of attentional absorption that invites people to respond experientially on multiple levels in order to amplify and utilize their personal resources in a goal directed fashion." (Yapko, 2019, p. 8).

- "A state of consciousness involving focused attention and reduced peripheral awareness characterized by an enhanced capacity for response to suggestion." (Elkins, Barabasz, Council, & Spiegel, 2015, p. 382)

Types of Hypnotic Phenomena

- **Catalepsy** – postures and positions can be sustained for long periods of time, without fatigue; slowed psychomotor activity

- **Time distortion**, or altered sense of time (contraction, expansion)

- **Dissociation** – variously described as conscious and unconscious, separation of thought behavior, and feeling, splitting of hierarchical systems

- **Amnesia** – forgetting, or inability to recall

- **Hypermnesia** – enhanced ability to recall – details become more vivid

- **Age regression** – re-experiencing memories from an earlier time

Edgette & Edgette, 1995

Types of Hypnotic Phenomena (Cont)

- **Age progression** – (future orientation) – seeing oneself in the future

- **Negative hallucination** – alters sensory stimuli (experienced through hearing, sight, taste, smell, touch) so these are not experienced

- **Positive hallucination** – produces sensory stimuli that are not present

- **Automatic writing** – similar to dissociation, writing something without conscious awareness of it

- **Posthypnotic suggestion** – executing a suggestion after hypnosis is concluded, based on a cue

Edgette & Edgette, 1995

Types of Hypnotic Phenomena (Cont)

- **Analgesia** – dulling of awareness of pain

- **Anesthesia** – complete lack of awareness of pain

- **Hypesthesia** – enhanced sensitivity

- **Hypnotic dreaming** – directed, suggested dreaming

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AGE REGRESSION EXAMPLE

Common Myths and Misconceptions

- Concerns about autonomy
- Belief that it will not "work"
- Belief that hypnosis produces a magical cure
- Fear of saying or doing unwanted things
- Belief that memories can be uncovered and are precise recordings of events
- Belief that one cannot be hypnotized/is easily hypnotized
- Belief that hypnotist has special powers
- Fear of being unable to emerge from trance

Therapeutic Methods Similar to Hypnosis

- Progressive muscle relaxation
- Guided imagery
- Mindfulness, mindfulness meditation
- Autogenic training
- Meditation
- Breathing retraining, box breathing, breathwork
- Yoga (e.g., Hatha)

Hypnotic Technique	Used In
Progressive Muscle Relaxation	
Guided Imagery	
Mindfulness, mindfulness meditation	
Autogenic training	
Meditation	
Breathing retraining, box breathing, breathwork	
Yoga (e.g., Hatha)	

Lessons Learned

- Technology doesn't always work the way it is supposed to.

- People do things online that they would never do in your office.

- Cats do whatever they want, whenever they want, and wherever they want to.

- A person is not a rectangle.

- People are intrigued by what is happening and want to understand it.

Technology doesn't always work the way it is supposed to.

- Cameras fail

- Microphones fail

- Speakers fail

- Sessions time out

- The power goes out

- Your kid unplugs the router to charge their smartphone

- Someone forgets something

People do things online that they would never do in your office.

- Stay in bed
- Remain naked
- Eat pizza
- Do drugs, smoke, and/or drink
- Ski
- Drive
- Walk
- Watch the neighbor's kids
- Multitask another meeting
- Fall asleep

Cats do whatever they want, whenever they want, and wherever they want to

- Purr

- Rattle the door

- Run on an enormous treadmill

- Sink their claws into your thigh

- Show off their backside on camera

- Sit on the camera

- Knock the camera over

- Knock over breakables

A person is not a rectangle

- Information is lost when we only see faces

- More information is lost when we only see very tiny faces

- Even more information is lost when we only see foreheads

- Many hypnotic techniques benefit from a full view of the patient, not just from the neck down
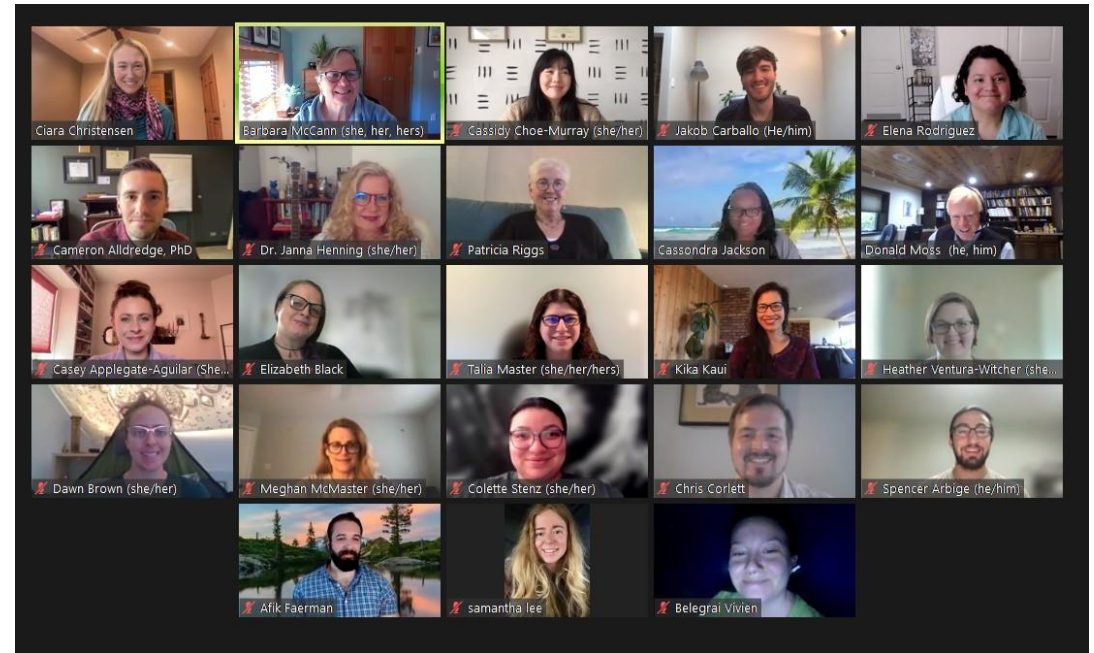
People are intrigued by what is happening and want to understand it.

- Other people may be in the room.

- Other people may be listening in.

- Other people may interrupt the session.

- Other people may disrupt the session.

- Other people may end the session.

- The session may be recorded without your knowledge.

Preparation for technology glitches

- Establish how to reconnect
- Plan to make a phone call to the residence and get someone else involved
- Make a contingency plan for a disrupted session
- Know your personal boundaries and limits and respect these
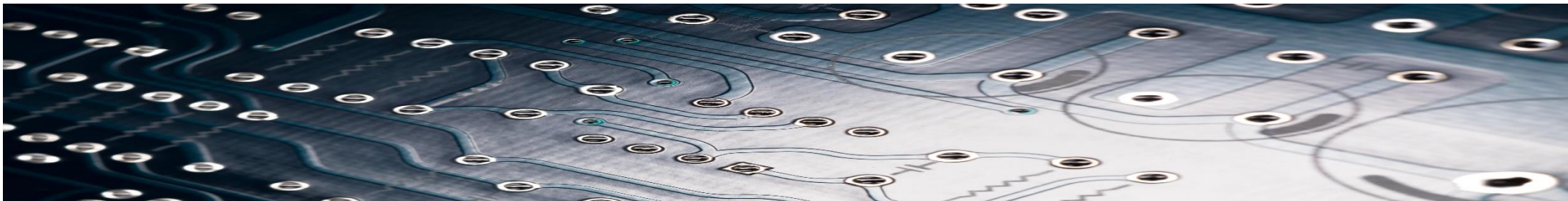
Set expectations for appropriate behavior

- Consider delineating this in a consent form or treatment contract
- Be willing to reschedule if needed
- Know your institution's policies and make these known
- Know your personal boundaries and limits and respect these

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Set expectations around cats and other pets

- <u>Your</u> pet(s) should never pose a potential distraction
- Encourage patients to limit distractions from household pets
- Know your personal boundaries and limits and respect these

Establish, and revisit as needed, what you must see to conduct the session

- If it is a telehealth visit, you should see the person's face

- Some interventions require you to see more than just the face

- Know your personal boundaries and limits and respect these

Expectations regarding privacy

- Establish clear guidelines regarding what is allowed
- Consider including this in a consent form or other written agreement
- Follow your institution's guidelines
- Know your personal boundaries and limits and respect these

- QUESTIONS & DISCUSSION

Additional <u>Free Resources</u> for Washington State Behavioral Health Providers

EDUCATIONAL SERIES:
- UW Traumatic Brain Injury – Behavioral Health ECHO
- UW Psychiatry & Addictions Case Conference ECHO
- UW TelePain series

PROVIDER CONSULTATION LINES
- UW Pain & Opioid Provider Consultation Hotline
- Psychiatry Consultation Line
- Partnership Access Line (pediatric psychiatry)
- Perinatal Psychiatry Consultation Line

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