

## Wyoming Telehealth Network

### April Provider Spotlight

**Amanda DeDiego, PhD, NCC, BC-TMH**



Dr. Amanda DeDiego holds a MS degree in Community Counseling from the University of North Georgia, and a PhD in Counselor Education from the University of Tennessee. She has a National Certified Counselor (NCC) and Board Certified Telemental Health Provider (BC-TMH) credential from NBCC. She is part of the Winds of Change, LLC private practice group in Casper, and coordinates the mental health counseling graduate program on the UW Casper campus.

She believes in the value of the therapeutic relationship. Her background includes trauma-informed counseling work with clients across the lifespan. She is trained in EMDR therapy and complex trauma. She supports clients struggling with issues impacted by mental health, career issues, relationship problems, sexual/gender identity, and other life situations. She is proud to offer affirming and inclusive care regardless of client gender expression, relationship style, or sexual orientation.

1. When did you first hear about telehealth? How did you feel about it then? How do you feel about it now?

Amanda DeDiego: I have been teaching about the ethics of telehealth care for a long time. I had mixed emotions about early iterations of telehealth care. However, with advancement of technology tools, I plan to continue to provide the telehealth option as part of my practice. I find this option opens up resources beyond what is available in the immediate community for clients.

2. When did you begin offering telehealth services? What prompted the need to offer these services?

Amanda: As a provider, I had never used telehealth until the pandemic. With the rapid shift to online services, I found that the telehealth option actually works better for some of my clients. Especially in offering LGBT+ care, offering telehealth opens up safe provider options when they are not available locally. I also have clients who want to avoid stigma of seeking help, so seeing someone who is not local via telehealth is a great option.

3. What motivates you to continue offering telehealth services?

Amanda: I try to provide a range of options for clients, so each person can choose what works best for them. Some clients find telehealth is a perfect option for them. Others prefer in-person services. Some like to do telehealth most of the time with some in-person appointments. I am motivated to provide options, and to expand my reach for the trauma work I offer for the specialty populations I love to serve.

4. What is your proudest accomplishment with telehealth?

Amanda: I was part of a group of counselors advocating for telehealth parity laws in Wyoming. The law for insurance parity for mental health and substance use was passed in 2021. I was invited to attend the signing ceremony for SF0052 with Governor Gordon in April 2021. The next big goal is to advocate for the counselor licensing compact to pass in Wyoming in 2023.

5. What advice would you give patients wanting to try telehealth?

Amanda: Talk to your provider about your worries and questions. Sometimes just trying one session via telehealth will help clients to know if that option will be a good fit for them.

6. What advice would you give providers wanting to start offering telehealth?

Amanda: Seeking training is a great way to feel comfortable with something new, just like any new strategy or skill you hope to add to your counseling toolbox. It is really important to make sure that telehealth practice is conducted ethically and safely, with fidelity to theory or interventions being used.

7. What was the biggest barrier in providing telehealth services? Have you overcome it?

Amanda: One of the biggest challenges I have encountered is providing services to clients for whom home is not a safe or secure place to talk with a provider. Also, clients may not have reliable internet services or appropriate devices to use at home. I developed a project called WyPATHS which creates a network of HIPAA-secure telehealth access points in public libraries throughout Wyoming. I am hoping to launch our first pilot sites this summer, so stay tuned!

8. How do you think implementing telehealth now will affect how things will be done at your organization after the pandemic is over?

Amanda: I work in a small private practice, so we will not see too much change. However, with growth of telehealth in the future and with changes like the counseling and social work licensing compacts, there will be so many new options for collaboration and specialty care in Wyoming. This is a huge benefit for the community.

9. Is there anything you learned the hard way in telehealth implementation?

Amanda: Put a lot of thought into adapting your intake paperwork, instructions, and general practice protocols before you engage in telehealth care. It typically does not work to just try to duplicate your in-person process with telehealth. With a little extra attention, things will go more smoothly when working with a new client via telehealth.

10. Do you have any telehealth hacks or tricks?

Amanda: This is very simple, but when the internet connection starts to lag, I just mute the computer and call the client on speaker phone. Then we can still see each other but we can talk without awkward lag when the internet connection is not as stable. Also, headphones! Clients often feel much more secure when wearing headphones because only they can hear me.

Bonus Question: Do you have a favorite podcast, book, or author?

Amanda: Mad in America by Robert Whitaker is a well-researched history of psychiatric care. It is important context for understanding the stigma around mental health needs today.