POLICY BRIEF

CLINICAL STANDARDS AND BEST PRACTICES ON TELEPSYCHIATRY SERVICES FOR OVERSEAS FILIPINOS

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BACKGROUND

The mental health needs of Overseas Filipino Workers present unique challenges that require specialized professional expertise and solutions to address the gaps. In recent years, telepsychiatry has emerged as an innovative intervention through timely access to care. As the national professional organization of psychiatrists, the Philippine Psychiatric Association plays a crucial role in establishing standards, ensuring quality of care, and promoting ethical practice in telepsychiatry implementation. The emerging field of cross-border telepsychiatry provides both opportunities and barriers that require careful consideration of clinical, ethical, and practical factors to ensure effective service delivery. This policy brief outlines evidence-based professional standards and clinical best practices based on: (1) Focus group discussions with mental health professionals and stakeholders; (2) Clinical outcomes and protocols from Kuwait telepsychiatry implementation; and (3) Analysis of professional practice requirements for cross-border telepsychiatry.

EVIDENCE BASE

Research Findings from the Kuwait Telepsychiatry Study (Candelario et al., 2024):

- Diagnostic Distribution (n=55 females):
 - Mental health disorders: 40%
 - Acute stress disorder: 25.45%
 - Major depressive disorder: 9.09%
 - Brief psychotic disorder: 1.82%
 - Post-traumatic stress disorder: 1.82%
 - Adjustment disorder: 1.82%
- Clinical Outcomes:
 - High service satisfaction (4.77/5.00)
 - Successful culturally-sensitive care delivery through Filipino psychiatrists
 - Effective remote assessment protocols
 - Successful crisis intervention management and referral



Stakeholder Engagement Meeting:

- This policy brief draws from findings of a stakeholder engagement meeting conducted on November 22, 2024.
- Using purposive sampling, key representatives from seven critical organizations were selected based on their direct or indirect involvement with migrant workers, policy-making, mental health, psychiatry, psychology, telemedicine, e-Health, or information and communications technology.
- Individuals from the academe and private sector were also invited for a well-rounded discussion.









Focus group discussions with relevant stakeholders. Legend:

A - representatives from DMW-OWWA, DFA, DOST-PCHRD; B - representatives from DOH,

PHIC, DOST-PCHRD; C-representatives from DICT, PPA, PAP, DOST-PCHRD, private sector;

D - representatives from PMHN, private sector and academe.







BEST PRACTICES AND RECOMMENDATIONS

1. Clinical Standards

- Initial Assessment Protocols
 - Stepped care approach
 - Standardized screening and assessment tools
 - Clear documentation requirements
- Treatment Planning
 - Evidence-based intervention protocols
 - Crisis management procedures
 - Referral pathways for complex cases

2. Professional Requirements

- Qualifications and Training
 - Valid professional license and certifications
 - Specialized telepsychiatry training
 - Cultural competency certification
- · Continuing Education
 - Regular updates on telepsychiatry best practices
 - · Case consultation and supervision
 - Professional development requirements









The Philippine Psychiatric Association must take the lead in establishing robust clinical standards for OFW telepsychiatry services.

The evidence from Kuwait demonstrates both the clinical need and viability of telepsychiatry, but successful scaling requires clear professional standards and protocols.

As the national professional organization of psychiatrists, PPA must act now to develop comprehensive guidelines that ensure quality, ethical, and effective mental health care delivery through telepsychiatry platforms.

Our OFWs deserve nothing less than the highest standards of psychiatric care, regardless of their location.

RECOMMENDED IMPLEMENTATION STRATEGY

PHASE ONE 6-12 months

Establish Technical Working Group / Oversight Committee

• Develop comprehensive training curriculum covering telepsychiatry certification, cultural competency, digital platform proficiency, and emergency protocols

Develop Certification Processes

• Create tiered certification system with clear requirements for initial certification, renewal, and continuing education for different service levels

Create Supervision Frameworks

• Establish multi-level supervision system including peer networks, mentorship programs, and quality assurance mechanisms for international practice

PHASE TWO 12-24 months

Implement Clinical Protocols

 Develop standardized procedures for assessment, treatment planning, referrals, documentation, and emergency interventions specific to OFW telepsychiatry

· Establish Quality Metrics

• Create comprehensive measurement system covering patient outcomes, provider performance, service accessibility, and clinical effectiveness

Deploy Monitoring Systems

• Implement integrated monitoring framework for case reviews, incident reporting, outcome tracking, and quality assurance

PHASE THREE 24+ months

Regular Program Evaluation

 Conduct systematic reviews of clinical outcomes, service utilization, provider performance, and cultural competency effectiveness

Protocol Refinement

 Update clinical guidelines, procedures, and systems based on implementation experience and stakeholder feedback

Standards Enhancement

 Revise and strengthen professional requirements, quality metrics, supervision frameworks, and ethical guidelines based on program evaluation results