

Q&A for Healthcare Providers: Telehealth/Virtual Care Appointments

Compiled by the IC3RG – April 2020

<https://www.dal.ca/sites/ic3rg.html>

1. What is telehealth/virtual care??

- Broad terms referring to the use of electronic information and telecommunications technology to support clinical healthcare, patient and professional health related education, public health, and health administration.
- It can include support delivered by telephone, video conferencing, email, text messaging and more.

2. What is expected of patients during telehealth/virtual care?

- Telehealth patients must be able to take an active, cooperative approach – more so than during in-person appointments.
- Patients should be able to set up the videoconferencing or telephone system, maintain the appropriate computer/device settings, establish a private spaces, and cooperate to manage the appointment safely.



3. When may a patient not be good candidate for telehealth?

- Patients for whom the provider cannot manage medical aspects without conducting initial or recurring physical examinations. Patients who cannot set up or maintain telehealth technology, or participate safely in sessions.

4. What technology and related considerations are required?

- Videoconference, telephone, text messaging, email, or other electronic communication.
- Relevant provincial and federal privacy legislation should be followed at all times.
- Web technology that provides an encrypted link between the patient and healthcare provider.



- The Canadian Association of Occupational Therapists suggests the following video conferencing platforms for telehealth:
 - JaneApp <https://jane.app/>
 - Live Care <https://livecare.ca/>
 - On Call: <https://oncallhealth.ca>
 - Owl Practice <https://owlpractice.ca/profession-occupational-therapist.php>
 - TheraByte: <https://therabyte.app/>



5. How should I set up my space?

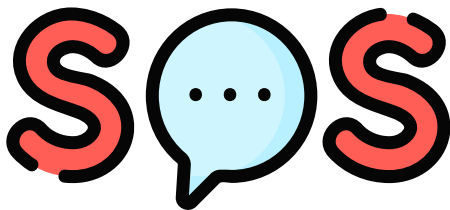
- Ensure privacy by choosing a space where the conversation cannot be overheard by others. If possible, patients should try to do the same.
- If using video conferencing, place camera at the same elevation as the eyes with the face clearly visible to the other person. The patient should try to do the same.
- Ensure lighting is maximized. This may involve adjusting blinds or overhead lights to ensure the video image is clear.

6. What should I add to my informed consent process?

- Tell the patient that if they experience any medical symptoms, complications, or emergency, the virtual encounter shall be terminated, and the client referred to the appropriate local healthcare provider or emergency service.
- Any available alternative options for care.

7. What information should I verify and document at the beginning of the call?

- The name and credentials of the provider and the identity of the patient.
- The location(s) of the patient during the session.
- Immediate alternate contact information such as a cell phone number, for both the provider and patient (particularly for internet technology).
- Contact information for another relevant support person (Patient Support Person – See below).



8. How do I prepare for an emergency?

- Ask patient to designate a 'Patient Support Person' (family, friend, or community member selected by the patient who can be called upon for support in the case of an emergency).
- Contact the Patient Support Person to request assistance in evaluating the nature of the emergency, or initiating 911 from the patient's home.
- Ensure you are aware of the local emergency resources and numbers.

9. What considerations are there for different populations?

Child/Adolescent

- Consider safety of youth and the availability of supportive adults and their ability to respond to emergent situations.
- Adhere to the usual in-person practices for including relevant adults in appointment.

Geriatric

- Include family members, if clinically appropriate, and with permission of the patient.
- Ensure someone is available to assist, if necessary, before, during and after the appointment.
- If administering cognitive tests, be aware of how the instrument may be impacted by video conferencing.



Mental Health

- See below for best practices for telemental health.

10. What resources were used to compile this fact sheet and where can I consult for further information?

- **American Telemedicine Association Best Practice Guidelines**
https://www.americantelemed.org/resource_categories/practice-guidelines/
- **Best Practices in Videoconferencing-Based Telemental Health – April 2018**
Shore, J. H., Yellowlees, P., Caudill, R., Johnston, B., Turvey, C., Mishkind, M., ... & Hilty, D. (2018). Best practices in videoconferencing-based telemental health April 2018. *Telemedicine and e-Health*, 24(11), 827-832.
- **Strategies for Implementing Telehealth**
Schwamm, L. H. (2014). Telehealth: seven strategies to successfully implement disruptive technology and transform health care. *Health Affairs*, 33(2), 200-206.
- **CAOT Practical Considerations for Occupational Therapists who are Considering Telehealth (March 2020)**
https://www.caot.ca/document/7171/Practical%20Considerations%20for%20OTs%20and%20Telehealth_covid19_March25.pdf
- **COVID-19: Virtual Health Care Services: Ensuring Continuity of Care**
https://www.caot.ca/document/7154/COVID-19_Telehealth%20Resource_2020.pdf