

Subject: Telepractice	Date Approved: August 14, 2008
Approved by: Executive Director	Date Revised:
Specific to: All Staff	Next Review Date: September 2017

INTRODUCTION TO TELEPRACTICE

Telepractice is defined as the delivery, management and coordination of care and services provided via telecommunication technology (AAACN 2004, CNO 2005).

Telepractices are defined in terms of the functions; responsibilities and competencies expected in the practice setting(s). The professional-patient interaction must be consistent with the scope of practice; professional standards/regulations of the professional involved as well the needs of the practice setting

Telepractice should be part of an integrated health care service developed to enhance, not replace, existing health care services and to improve access, appropriate use and efficiency of health care services. The following framework and principles is critical to health professionals' providing safe, competent and ethical patient care that complies with professional practice standards (Adapted from Canadian Nurses Association Position Paper, the Role of the Nurse in Telepractice, 2001).

The National Initiative Framework Telehealth of Guidelines (NIFTE) provides a practice framework for professionals rendering clinical services via telecommunication modalities. The NIFTE framework outlines five main content areas for health professionals engaged in telepractice activities. These five areas are:

1. Clinical Standards and Outcomes,
2. Human Resources,
3. Organizational Readiness,
4. Organizational Leadership, and
5. Technology and Equipment.

PURPOSE OF TELEPRACTICE GUIDELINE:

To provide a framework for all Health Care Professionals employed by the North Huron Family Health Team engaged in the provision of care via telecommunications to 'known clients' or at the earliest possible opportunity become a 'known client' in accordance with the accepted definition. The provision of care may include but is not limited to calls for the purpose of giving professional advice, information, teaching and/or health counselling.

To provide guidelines regarding telepractices in order to meet legal and professional standards and recommendations as outlined by both the National Initiative for Telehealth (NIFTE) Framework of Guidelines and applicable professional regulatory colleges.

To provide a framework as the basis for a more standardized and consistent approach to telepractice applications, while recognizing and supporting the individual needs of various clinical application and practice requirements.

To provide guidelines for the documentation of telepractice clinical interactions and to provide an adjunct documentation record.

Review and renewal of these guidelines will be led by PAC initially in one year and biannually thereafter and include program and/or department quality assurance chart audit information.

IMPLEMENTATION CONSIDERATIONS:

The Regulated Healthcare professional is responsible for meeting the professional practice standards of their profession while providing care via telecommunications modalities.

Each program is responsible to integrate the telepractice NIFTE recommended guiding principles (Appendix A) and professional practice standards into the practice and processes within their respective program/department (s) to;

- Standardize the collection, storage and documentation of patient information and advice provided in accordance to professional practice standards.
- Delineate the responsibilities and communication of the professional providing advice and other members of the healthcare team.
- Provide and/or arrange for the necessary education for professional staff.
- Obtain profession specific support/assistance and regulatory professional practice requirements from the Executive Director.
- Integrate/develop a process to collect workload measurement data for professional telephone interactions
- Protocols and/or processes developed, as part of the implementation of these guidelines will be reviewed initially after one year and then bi-annually thereafter and will include no less than 5 chart audits.

DOCUMENTATION:

Document the telepractice encounter in accordance to department/program approved documentation template, interdisciplinary notes (including all mandatory information) and on the “Telepractice Documentation Record”. Additional information may be included within a patient’s interdisciplinary progress notes with appropriate cross-referencing patient’s health record.

Consent:

Compliance with the NHFHT’s policy related to confidentiality and the release of information, as well as relevant legislation and professional standards.

Obtain informed written (when possible) consent that includes a process for:

- Providing the patient with information such as the name, profession, how the information is documented and stored, who has access to information, who is present during the interaction, and alternative methods of care available, possible risks/benefits, responsibility for ongoing care and the right to withdraw consent.

APPENDIX A: DEFINITIONS:

Health Record: Health Records may be paper or electronic documents, such as computerized records, audio or videotapes, or mail, faxes and images. The health record is a collection of information about a client's health, needs, interventions and outcomes.

Implied Consent: Consent is implied when circumstances would lead a reasonable person to believe that consent had been given, although no direct, express or explicit words or agreement are uttered. The Personal Health Information Protection Act specifies that several conditions must be met to assume a client's implied consent. It is a custodian's obligation to fulfill these conditions by providing notice or information that describes the purposes for the collection, use and disclosure of personal health information.

Information Technology: The technology required for information processing. In particular, the use of computers and computer software to convert, store, protect, process, transmit and retrieve information from anywhere, anytime (Wikipedia, 2005, CNO 2005).

Known Client: The healthcare professional has a previously established therapeutic relationship with the client and possesses known information (e.g., diagnosis, health history, assessments, lab work, plans of care and other sources of data) regarding the client (CNO 2005).

Personal Health Information: Personal health information is any identifying information about clients that is in oral, written, or electronic form. This includes information collected by health professionals during the course of therapeutic professional interaction. Such information relates to physical or mental health, including family health history care previously provided; plan of service (Long-Term Care Act, 1994, donation of body); parts or substances, or information gained from testing of these body parts or substances; a person's health number; or the name of a client's substitute decision-maker (CNO, 2005).

Quality of Care: The degree to which the health care services for individuals and populations increases the likelihood of desired health outcomes and are consistent with current professional knowledge (IOM. 2000).

Security (of personal health information): The processes and tools that ensure confidentiality of information. Security pertains to the protection of personal health information from authorized or unintentional loss, theft, access, use, modification or disclosure (Canadian Institute for Health Information, 2002, as cited in the NIFTE Guidelines). Security involves protection of computer hardware and software from accidental or malicious access, use, modification, destruction or disclosure. Security also pertains to personal data, communications and the physical protection of computer installations (Institute of Electrical and Electronic Engineers, 1997, CNO, 2005).

Telecommunication: Referring to the extension of communication over a distance, this terms covers all forms of distance and/or conversion of the original communications, including radio, telegraphy, television, telephony, data communication and computer networking (Wikipedia, 2005, CNO 2005).

Telehealth: The use of communications and information technology to deliver health care services and information over large and small distances (Industry Canada, CNO 2005).

Telepractice: The delivery, management and coordination of care and services provided via telecommunication technology (AAACN, 2004, CNO 2005).

Teleradiography: The electronic transmission of radiological images from one location to another for the purposes of interpretation and/or consultation (American College of Radiography, 2003, CNO, 2005).

Health Care Professional: A Health Care Professional who has representation on the Professional Advisory Committee.