Virtual care: Implementation checklist

MAY 2023

This implementation checklist is designed to help guide your approach to offering virtual care services and enable their successful implementation.

This tool can be completed at any stage of virtual care implementation, both during initial set-up to identify key areas for inclusion in your service, and to identify areas for improvement once services are already offering virtual care.

Your service may not yet meet each of these requirements, but this shouldn't be a deterrent for using virtual care.

For further information, please refer to the ACI Virtual Care in Practice guide.

Consideration	Yes	No	Comments
Getting started			
Identify opportunities and a need for virtual care to enhance service provision.			
Engage as early as possible with the Telehealth/Virtual Care Manager or Lead regarding virtual care implementation, including: • understanding the current model of care and adaptions needed to support an effective virtual care workflow • broader considerations when implementing virtual care • identifying appropriate modalities (telephone, videoconference, remote patient monitoring, store and forward) • identifying the most appropriate videoconferencing platform in line with the services nere and equipment requirements, • quotes and demonstration of suitable solutions • how different patient cohorts will be supported to use virtual care platforms (e.g. patients with vision or hearing difficulties, or from culturally and linguistically diverse backgrounds).			
Identify a project lead for implementing virtual care.			
Establish executive support for virtual care. This may be from a Head of Department, Service Manager or Clinical Director.			
Ensure there is a mechanism for the project lead to discuss and escalate with the executive member.			

Consideration	Yes	No	Comments
Getting started (continued)			
Engage with key individuals affected by the addition of virtual care, this may include: • clinicians • administration staff • service managers • consumers and their families/carers • consumer participation, engagement and multicultural health managers who can advise on partnering with consumers during the planning, design and implementation process.			
Ensure there is a timeline of key tasks and milestones to embed virtual care in the service.			
Understanding the need for virtual care			
Consider if virtual care will be delivered in a standalone session or integrated into existing clinic sessions.			
Collect appropriate data to support the case for enabling virtual care.			
Identify which patients are in and out of scope for virtual care.			
Review existing administration processes for scheduling and communicating appointments to patients and how they will need to be adapted for virtual care.			
Planning the change			
Ensure there is an appropriate physical space to deliver virtual care.			
Identify an administration process to schedule patients for virtual care, that includes: • how patients will be provided information before and after the appointment • scheduling of follow up appointments (face to face or virtual) • how processes may be adapted to meet the needs of different patient cohorts • testing processes with consumers to ensure usability.			
Identify how and when virtual services will be promoted to consumers and other clinicians (e.g. verbal, posters, letters to GPs, referral triage forms, booking follow up appointments).			
Consider the safety and clinical governance implications of delivering care virtually, including: • escalation process in the event of deterioration, including processes that are available to patients and carers e.g. REACH • governance and leadership • local policies and guidelines • clinician confidence and skill • statewide virtual care policies and guidelines.			

Consideration	Yes	No	Comments
Planning the change (continued)			
Establish a standard and consistent method for: • recording consultation notes in a patient's medical record (if between NSW Health sites this needs to occur at both ends) • reporting occasions of service/activity (if between NSW Health sites this needs to occur at both ends).			
If the service intends to bill Medicare, consult with a revenue manager or business manager to ensure processes are compliant with Medicare rules. Consider: • the process to obtain a billing consent • the process to obtain an up to date referral.			
Consider how clinicians will access investigations (e.g. imaging, pathology) conducted at non-NSW Health facilities and how to process referrals, scripts and patient information following a consultation.			
Undertake a discussion with team members and other clinicians who will be engaging in consultations/case conferencing via virtual care. This may include: • changes in roles and responsibilities • training on how to use the platform • etiquette on delivering care virtually • how to access technical support (e.g. local desktop support, Statewide Service Desk and eHealth conferencing support).			
Conduct a virtual care pilot with select patient groups to test the proposed approach prior to wider implementation.			
Seek opportunities for patients to ask questions before, during and after their virtual appointment.			
Ensure patients have a device suitable for accessing virtual care, or an alternative option for care, if a suitable device is not available.			
Ensure patients have adequate data quota and internet bandwidth to access virtual care.			
Ensure patients receive all relevant clinical and service information and advice for participating in a virtual appointment in the most appropriate language or method. This may include: • service information e.g. operating hours, complaints process etc. • how to join the appointment • how to include carers, family and other health and social care providers in the virtual appointment • general patient information about virtual care.			
Establish a process to explain to patients that virtual care is only used when clinically appropriate. Ensure they have the opportunity to refuse a virtual consultation for any reason.			

Consideration	Yes	No	Comments
Making and sustaining the change			
Establish a process for monitoring outcomes, including: • occasions of service/activity • PREMs and PROMs • capturing patient stories • staff experience surveys.			
Consider opportunities to use monitoring data to undertake continuous quality improvement.			
Establish a process to evaluate the outcomes of the virtual service.			
Establish a way to communicate outcomes with the executive sponsor.			
Identify opportunities to share service outcomes and innovations that have been realised with the addition of virtual care e.g. presentations, conferences, local awards.			