

Virtual care

Embedding safety in practice

Safety is fundamental in the provision of healthcare, regardless of the mode of delivery. All processes put in place to support safe practice also apply to virtual care. This includes undertaking risk assessments, mandatory reporting requirements and reporting of incidents into the NSW Health Incident Management System.



Core principles

Governance and leadership

- There should be strong organisational and clinical governance to help clinicians identify when virtual care is an appropriate modality for patient consultation.
- There should be established safety and quality systems in place. Clinicians should have access to the required medical and technical devices to provide high quality care.
 - Monitor and analyse adverse events relating to virtual care and take appropriate action to improve the safety and quality of care for the patient/family.
 - Monitor compliance by regularly reviewing and reporting best practice principles using nominated measures and report through Mortality and Morbidity (M&M) meetings and local Clinical Governance and Consumer Committees.
- All NSW Health employees sign a code of conduct and must protect information from unauthorised access and misuse:
 - Consultations should always take place in a suitable and private environment. This applies at all points of connection.
 - Clinicians must ensure that clinical information is always secure and entered into the electronic Medical Record (eMR) at the point of care. Any paper documentations should be secured in a locked bag, entered into the eMR as soon as possible and then destroyed using secured shredding bins.
 - Staff should ensure that appropriate anti-viral and anti-malware software is used.

Standards and policies

- Clinical care standards, policies, guidelines and directives that apply to face-to-face consultations also apply to virtual care, regardless of the modality and location of care. These may need to be reviewed and adapted as virtual care modalities become more prevalent.
- Dedicated and appropriately skilled virtual care leads and clinical champions should be in place (typically at the LHD/SHN level) to provide support for individual models.

Skilled and confident healthcare providers

- Healthcare providers must be trained in using virtual care platforms and equipment. They require access to timely technical support.
- Providers should have access to appropriate well-informed and knowledgeable experts and clinical champions to help increase their knowledge of virtual care. This includes development of appropriate etiquette and support to adapt clinical practice and workflows.
- Providers should be prepared with key messages and collateral to communicate with clinicians, patients and their carers about the appropriateness and benefits of virtual care.
- Providers should be supported to become confident users of virtual care. They should be able to implement a secondary plan if technical issues arise prior to, or during, clinical consultations.



For clinicians

Clinical considerations

- The documentation requirements for virtual care are the same as in-person care.
- A patient's eMR should be updated at all points of care, including the modality used, participant details and their mode(s) of access. Where a Medicare item claim is anticipated, it is good practice to record the patient's consent.
- Clinicians must be confident to end a consultation when they cannot continue to deliver care virtually because of assessment or patient needs, or where the technology is not fit for purpose.
- If virtual consultations take place while a clinician is in the field, patient information must be documented and transmitted using a secure platform.

Environment

- Clinicians should always select a quiet and private environment with no background noise.
- Clinicians should maintain a professional appearance and be aware that patterned clothing and room lighting can affect the image quality when video conferencing.
- When using video conferencing, the camera should be positioned to capture a clear view of all participants in the room, or have the functionality to track to the speaker in the room.
- Clinicians must ensure that no confidential patient information is visible in the background or on screen. They should also remove any distracting photographs or other items from the background of their workplace. This includes using appropriate virtual backgrounds where the platform functionality provides this feature.

Equipment

- Appropriate, reliable and convenient equipment is needed to meet clinical requirements. The three fundamental technical requirements for quality video consultations are internet connectivity, hardware and a software solution.
- Clinicians should only use video conferencing platforms approved by NSW Health, and the approved vendor panel for remote monitoring devices and interfaces. Any remote monitoring, peripheral devices or applications required to perform clinical duties must be Therapeutic Goods Administration (TGA) approved.
- Virtual care equipment, such as phones, laptops, data storage devices and remote desktops, must be secure. Devices, firewalls and virtual private networks (VPN) must be updated with the latest security patches. A privacy and security assurance framework (PSAF) and penetration testing should be applied to ensure security expectations are met.





Patient considerations

Patient selection

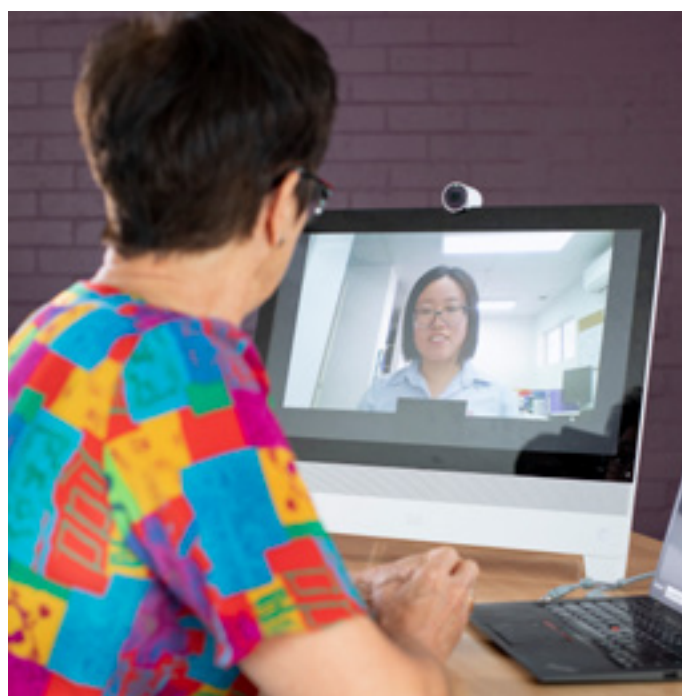
- When selecting a patient for virtual care consultation, clinicians should adapt to the situation and needs of the patient by considering:
 - the level of physical assessment required
 - if their clinical needs can be fulfilled through virtual care
 - their willingness and ability to participate, including any physical, mental, cultural, social and cognitive barriers
 - availability and access to support (where required), an internet connection, devices, software and an appropriate environment.

Patient support

- The provision of virtual care should be discussed with patients to help manage their expectations, increase awareness and provide flexibility and choice of access. They should understand that virtual care is only used when clinically appropriate and how it differs from in-person care.
- Patients should feel confident to ask any questions before, during and after a virtual care consultation. They should be assured there is a process in place to facilitate this.
- When deciding on the suitability of virtual care, a clinician should consider a patient's need for privacy and confidentiality in their setting.
- Before participating in a virtual care consultation, patients should review relevant information and advice to support a successful connection. They should understand the technology required, including an appropriate device and a stable internet connection. For example, smart TVs are not often considered when discussing suitable devices.
- In specific services, a risk assessment may identify the need for a support person to be present (e.g. due to mental health reasons or to reduce the risk of falls).

Patient communication

- Patients need to be assured that any communication via virtual care takes place through secure channels.
- Patients should be informed that they can change their mind at any time about how they access care, providing the mode they choose is appropriate.
- Clinicians must be considerate of the comfort level of patients and their carers. These should be openly addressed to determine any issues and resolutions.
- Patients are always offered the resources designed to support them, including:
 - how virtual care will support the provision of care
 - how to connect to the care team
 - who to contact if they have an issue.



For more information and resources to support virtual care, visit aci.health.nsw.gov.au/make-it-happen/telehealth.



© State of New South Wales (Agency for Clinical Innovation) 2020.
[Creative Commons Attribution-NoDerivatives 4.0 licence](https://creativecommons.org/licenses/by-nd/4.0/).

For current information go to: aci.health.nsw.gov.au The ACI logo is excluded from the Creative Commons licence and may only be used with express permission.