



COVID-19 Toolkit

Virtual Care V: 2.0



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COVID-19 Toolkit

Virtual Care

Considerations for patients, health professionals and digital teams involved in Virtual Health

How to use this toolkit:

Patients, health professionals and digital teams are collaborating to create new or adapt existing virtual care encounters between health professionals and their patients amidst the COVID-19 pandemic. To assist organizations in the development of key elements to provide safe and reliable virtual care encounters (VCE), Accreditation Canada (AC) and Health Standards Organization (HSO) have created this complimentary toolkit. VCE can be defined as an interaction and/or document exchange through video conferencing, email and/or phone that is provided within a secure digital environment.

This document reflects actionable criteria found in the CAN/HSO 83001:2018 Virtual Health Standard and is meant to support virtual care encounters during the COVID-19 pandemic. **This toolkit does not replace any jurisdictional legislation or regulatory requirements.**

The toolkit is separated into three sections:

For patients: participating in a virtual care encounter

For health professionals: providing virtual care encounters and mixed care

For digital teams: building digital system frameworks

Each section has a series of questions to guide each audience prepare their virtual care encounters in the context of the COVID-19 pandemic.

A complimentary copy of the CAN/HSO 83001:2018 Virtual Health standard can be accessed here:

Virtual Health (EN), Télésanté (FR)

For use outside of Canada: Virtual Health (EN)

To support your Virtual Care Service operations plan, Accreditation Canada is also exploring other virtual care toolkits and new solutions to further guide professionals and organizations implementing and evaluating virtual care services post COVID-19 and will keep you updated.

To learn more and access additional HSO COVID-19 resources, we encourage you to visit https://covid19.healthstandards.org/







FOR PATIENTS

To lower the chance of spreading COVID-19, some healthcare teams may offer appointments online, by phone, or email. These are known as 'Virtual Care Encounters' (VCE). Your health care team may reach out to you to set up a Virtual Care Encounter. This may be new to many people, clinicians and patients alike. Here is a quick guide for making your virtual care encounter a successful one.

Encounter. This may be new to many people, clinicians and patients alike. Here is a quick guide for making your virtual care encounter a successful one.		
Setting Up Your Technology		
☐ You will need to know what kind of technology is needed to participate in a VCE.		
☐ Ask if it will be an email, phone call or video call. Which program or app will they be using?		
\square You may need to download an app and set up an account beforehand.		
\square If you are unsure of how to set up your technology, ask someone for help.		
Knowing Your Privacy, Safety and Confidentiality Rights		
Your health care organization should have information available on their website about respecting your privacy, safety and confidentiality. If you have any questions, please ask your provider at the beginning of your VCE.		
☐ Know how to report or inquire on a possible safety, confidentiality or security breach relating to your VCE.		
Getting Ready for Your Virtual Care Encounter		
 Make sure that your technology is set up properly. Are your microphone and video camera working properly, if needed? Are you in a quiet spot so you can easily hear and be heard? Do you want a family member or caregiver to be with you, to write notes or ask questions? 		
 ☐ Have all your materials ready before the meeting, including: ☐ Your health card; ☐ A pen and paper to write down information and instructions; ☐ A list of medications you are taking, whether prescribed or over the counter, including vitamins, herbal remedies, and supplements; ☐ Notes of your medical history, symptoms, and; ☐ Any questions you have. 		
Actively Participating in Your Virtual Care Encounter		
At the beginning of your VCE, your clinician will ask for your consent to participate.		
Your clinician will also verify your identity by asking for two types of identification, such as your name, birthdate, address, and/or health card number.		
☐ It's important that you actively express your needs, goals, and raise any other questions you may have during your VCE just as you would in person.		
☐ Together, you and your clinician will develop a care plan that meets your needs and goals.		
☐ Before the call is over, ensure you understand your plan going forward, how to manage your symptoms, and when you should be following up.		
i.e. bloodwork, tests, prescriptions, referrals, follow-up with other members of your care team, etc.		
☐ Do you have the resources and tools you need to effectively take care of your health during this time?		
Following Up		
Be sure to follow your care plan and know how to follow up with your clinician if your condition changes.		
Ask for copies of your patient records or other relevant information.		



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FOR HEALTH PROFESSIONALS

Se	tting up your Virtual Care Service (VCS)
	Is the VCS integrated into your delivery of care model?
	Is the VCS optimizing service delivery in the context of maintaining essential health services during a pandemic?
	Are you considering triage protocol to determine which clients take priority for your VCS?
	Are there clear criteria and protocols available to you for targeted referral pathways to ensure you respect the health system's efforts to maintain essential services during the pandemic?
	Is the VCS being used appropriately to provide safe and reliable virtual care encounters (i.e. screen size, video and audio components, secure USB)?
	Does the VCE ensure continuity of care (i.e. timely inpatient encounter when clinically indicated in appropriate care environment, follow-ups, labs)?
	Are there processes in place to report and manage a breach in safety, privacy and/or violation of patient rights in accordance with your organizational policies and jurisdictional legislation?
	If you are using remote clinical monitoring, photography, or any other digital information, how is it being documented?
Pr	ivacy, Safety and Confidentiality
	Does the VCS meet all relevant safety, security, privacy and confidentiality legislation within your jurisdiction as well as professional regulatory bodies?
	Does the VCS ensure that confidentiality and privacy requirements regarding Personal Health Information are respected throughout the continuum of care; both in rest (in platform) and in transit (between platforms)?
Ge	etting ready for Virtual Care Encounter (VCE)
	Have you considered what clinical conditions can be safely assessed and treated (scope of practice) through a VCE?
	Do you have access to the appropriate clinical information needed for assessment and treatment during the VCE?
	Is relevant patient information gathered prior to and during the VCE and documented in a secure way?
	Are you monitoring virtual care services for timely responses to ensure essential services are respected (i.e. visits, Dx, consults, etc.)?
	Are you adopting virtual etiquette in your services? Examples include camera at eye level, confidential environments, badges visible to patient, removing visual distractions behind clinicians, and being punctual for appointments with patient.

Content Derived from: CAN/HSO 83001:2018 Virtual Health Standard







During Virtual Care Encounter (VCE) Are at least two person-specific identifiers used to confirm the client's identity to ensure they receive the service or procedure intended for them? Are you obtaining and documenting the patient's informed consent at the initiation of each VCE? Are you providing patients and families information on their rights and responsibilities regarding VCE? During the VCE, are the appropriate resources and information provided to patients to promote and enable self-management? Are you answering final questions and clarifying instructions before closing the session? After Virtual Care Encounter In the event of a transition of care after the VCE, has all relevant clinical information been communicated

to the patient and receiving clinical team in a timely way?





FOR DIGITAL TEAMS Setting up your Virtual Care Service (VCS) ☐ Is there a governance structure in place that defines VCS in your organization? ☐ Is the VCS integrated within your organization's operational plan? ☐ Is the VCS optimizing service delivery in the context of maintaining essential health services during a pandemic? Are there guiding principles for the development and procurement of digital technology (i.e. hardware, software, audio and visual, secure USB) to promote safe and reliable care in a virtual setting? ☐ Is there a secure documentation management system for Personal Health Information (PHI) and any other relevant clinical information (i.e. uploads of documents, clinical encounter notes, etc.)? Does the VCS strive for interoperability between digital platforms to support continuity of care? Are there procedures in place for all users, including patients, to report on privacy, security and safety breaches? Are there procedures in place for all users to manage privacy, security and safety breaches? ☐ If you are using remote vital sign monitoring, how is it being documented? ☐ Do patients have access to their PHI through the digital system? Privacy, Safety and Confidentiality Does the VCS meet all relevant safety, security, privacy and confidentiality legislation within your jurisdiction as well as professional regulatory bodies? Are your digital and care teams aware of compliance requirements for privacy and confidentiality of patient information, and following your applicable provincial, territorial or federal legislation? ☐ Is the VCS ensuring that confidentiality and privacy requirements regarding PHI are respected throughout the continuum of care; both in rest (in platform) and in transit (between platforms)? **Getting Ready for Virtual Care Encounter** ☐ Do you have procedures in place to communicate planned/unplanned downtime to all relevant stakeholders (patients, health professionals, clinical support staff)? Are the appropriate resources and training in place to facilitate the orientation of patients, health professionals, clinical support staff to the VCS? Are you communicating the new modes of access for the VCE to your patients (i.e. phones, websites, social media, portal messages, etc.) with specific details such as program scope, costs (if any), who has access to patient information, who is monitoring patient information, what safeguards are in place to protect patient information, how patient information is used, who owns patient information, considerations of how data may be used in the future, partner organizations involved in the VCS, how virtual care encounters are conducted, what patients should expect, and other services available to address the patient's needs?



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