

Virtual Care resources for Canadian physicians 2020

Alberta

Alberta Medical Association

Great overview from the AMA with tips and reference to the super practical DTO toolkit.

<https://www.albertadoctors.org/leaders-partners/ehealth/virtual-care>

British Columbia

Doctors of BC

The Doctors Technology Office branch of Doctors of BC has some very practical resources to get a clinic up and running with Virtual Care, fast. Their two documents, listed below and attached, lead the clinic through the process in a practical, step by step approach to implementation.

Quick Start Guide

https://www.doctorsofbc.ca/sites/default/files/dto_virtual_care_quick_start_guide.pdf

*** DTO Virtual Care Toolkit ← very Practical

https://www.doctorsofbc.ca/sites/default/files/dto_virtual_care_toolkit.pdf

Manitoba

Doctors of Manitoba

Info page on Virtual Care during the COVID 19 crisis: <https://doctorsmanitoba.ca/2020/03/covid-19-coronavirus-updates/>

This page makes reference to the Provincial document “COVID 19 Guidance on Outpatient Care Delivery:

Includes info on MB-specific physician billing codes for virtual care and notes that in the Short Term, digital video conferencing solutions like Skype or Zoom are ok.

<https://sharedhealthmb.ca/files/covid-19-guidance-for-outpatient-care-delivery.pdf>

Ontario

eHealth Centre for Excellence

The eCe, based in Waterloo under the leadership of Dr. Alarakhia, has produced excellent resources on implementing virtual care, including some excellent case studies. While OMD and the OMA make reference to the eCe's resources, they need to be highlighted directly:

<http://ehealthce.ca/Virtual-visits.htm>

OMA

The following statements are pulled from a recent OMA document, for your reference:

Phone/Video Technology

There are no specific technologies required. You should note that there are regulated virtual care products that have passed PHIPA rules, where consent from the patient is handled at sign-up. There are also non-regulated products that have not undergone PHIPA testing. If you choose a non-regulated product, then you should ask patients for their consent and record that verbal express consent was obtained.

OMA Legal has prepared a short paragraph statement to initiate a Virtual Care patient encounter which has also been vetted by the CMPA:

“Just like online shopping or email, Virtual Care has some inherent privacy and security risks that your health information may be intercepted or unintentionally disclosed. We want to make sure you understand this before we proceed. In order to improve privacy and confidentiality, you should also take steps to participate in this virtual care encounter in a private setting and should not use an employer's or someone else's computer/device as they may be able to access your information.

If you want more information, please check the link on our [website/confirmation email/etc.]. If it is determined you require a physical exam you may still need to be assessed in person. You should also understand that virtual care is not a substitute for attending the Emergency Department if urgent care is needed. Are you ok to continue?”

A note should be placed in the patient's file:

Informed verbal consent was obtained from this patient to communicate and provide care using virtual and other telecommunications tools. This patient has been explained the risks related to unauthorized disclosure or interception of personal health information and steps they can take to help protect their information. We have discussed that care provided through video or audio communication cannot replace the need for physical examination or an in person visit for some disorders or urgent problems and patient understands the need to seek urgent care in an Emergency Department as necessary.

The more detailed information is available for your use on the following page and must be made available to patients.

Information for Patients for Virtual Care provided through K080, K081, K082 and K083

COVID-19 is placing stress on Canada's public health system. Our clinic is starting to offer virtual care to make sure that we can continue to care for our patients safely and effectively. This means that we will be using video and audio technologies for some patient visits rather than asking all patients to come into our office. Some of these technologies are provided by the Province. Others have been provided by vendors like Google, or Apple to help make discussions with your care provider as easy as possible during these difficult times. Some health concerns can be addressed with virtual care alone, but in some cases your doctor may ask you to visit a hospital or other health care facility if necessary, for a physical examination.

We do our best to make sure that any information you give to us during virtual care visits is private and secure, but no video or audio tools are ever completely secure. There is an increased security risk that your health information may be intercepted or disclosed to third parties when using video or audio communications tools. To help us keep your information safe and secure, you can:

- Understand that this method of communication is not secure in the same way as a private appointment in an exam room.
- Use a private computer/device (i.e., not an employer's or third party's computer/device) and a secure internet connection. For example, using a personal computer or tablet is more secure than at a library, and your access to the Internet on your home network will generally be more secure than an open guest Wi-Fi connection.

You should also understand that virtual care is not a substitute for in-person communication or clinical examinations, where appropriate, or for attending the Emergency Department when needed (including for any urgent care that may be required).

If you are concerned about using video or audio tools for virtual care, you can ask our office to arrange for you to visit a different healthcare provider or other health care center where you can be seen in person. However, please note that visiting a health care provider in person comes with a higher risk of coming into contact with COVID-19 and the possibility of spreading the virus.

By providing your information, you agree to let us collect, use, or disclose your personal health information through video or audio communications (while following applicable privacy laws) in order to provide you with care. In particular, the following means of electronic communication may be used (identify all that apply): videoconferencing (including Skype, Facetime, etc.).

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OntarioMD

This page provides a step by step overview of virtual care, and then links to the Ontario Health Quality document. Both very useful, but not as practical for actual implementation compared to the BC resource.

<https://ontariomd.news/>

Here is a link to very recent webinar recordings featuring primary care and specialist docs implementing virtual care:

<https://www.ontariomd.ca/pages/watch-physicians-demonstrate-virtual-care-tools-and-submit-your-questions-during-ontariomd%E2%80%99s-webinars-on-march-20.aspx>

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OCFP

This link provides a nice poster with messaging for patients / public relating to Virtual care/telemedicine:

<https://www.ontariofamilyphysicians.ca/tools-resources/timely-trending/novel-coronavirus-2019-ncov/ocfp-coronavirus-infographic-4-final.pdf>

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OTN

These links to their very useful resource and training pages includes practical examples and workflows that clinics could adapt, using any platform (not just OTN invite).

<https://support.otn.ca/en/connect-help>

<https://training.otn.ca/course/view.php?id=10090>

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Saskatchewan

Government of SK

Basic info on Virtual Care for Providers

<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers#virtual-care>

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NATIONAL Resources

National regulatory - FMRAC

Their relatively recent telemedicine policy provides high level reassurance that telemedicine is ok. Each provincial/territorial college has their own variations on this policy. ON, AB, and BC are good examples.

<https://fmrac.ca/fmrac-framework-on-telemedicine/>

National Medical Protective advice - CMPA

Similarly, providing reassurance re: virtual care, as long as due diligence is maintained in professional practice.

<https://www.cmpa-acpm.ca/en/covid19>

<https://www.cmpa-acpm.ca/en/advice-publications/browse-articles/2015/videoconferencing-consultation-when-is-it-the-right-choice>

National - CFPC-Infoway EMR Best Advice Guide - Advanced and Meaningful Use of EMRs

<https://patientsmedicalhome.ca/resources/best-advice-guides/best-advice-guide-advanced-and-meaningful-use-of-emrs/>

Modules 2 and 6 both cover most aspects of Virtual Care in a simple, quick read format for family docs. This is not an implementation guide, however.

National - Medical Association - CMA

Working together with the CFPC and RCPSC, the CMA recently released the excellent Virtual Care Task Force report. An interesting read providing a good current state overview, but not applicable for rapid implementation of virtual care in a crisis.

<https://www.cma.ca/new-report-roadmap-improve-virtual-care-canada>