Holland Bloorview
Kids Rehabilitation Hospital

Virtual Care Guidelines for Clinicians

For any questions related to Virtual Care at Holland Bloorview, please contact virtualcare@hollandbloorview.ca

Holland Bloorview Kids Rehabilitation Hospital Virtual Care Guidelines

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Virtual Care Flow Chart

> **Understand Virtual Care (VC) Guidelines at Holland Bloorview**
> *(Definition, obligations, considerations, privacy and security)*

> **Choose a platform**
> Decide which PHIPA video service best suits the client/family needs/situation and the clinical care context
> - **OTN** - Requirements & clinician tools
> - **Zoom Healthcare -** Requirements & clinician tools

> **Explain VC and obtain client/family consent** (verbally or written) prior to appointment using provider consent script

> **OTN**
> Client/family instructions sent automatically to email once scheduled in OTN

> **Zoom Healthcare**
> Send client/family instructions

> **Meditech Expanse**
> Document consent in client chart using VC consent documentation template
> - Schedule VC appointment type in expanse to reflect virtual visit under your appointment type

> Review Third party supports to deliver VC if client requires a third party to participate (interpreter, caregivers, support person).

> **Verify the identity of the client/guardian**
> (2 client identifiers)

> **Complete the Consent Checklist**
> (for setting expectations and providing orientation to platform)

> **Try leading practice strategies for structuring your VC**

> **Check in virtual visit in Meditech Expanse**
> Schedule VC appointment type

> **Include the following in your documentation:**
> - Informed consent discussion(s) for VC
> - Platform used (OTN or Zoom Healthcare)
> - Care provide during a virtual care visit, including management plan and any follow-up plans

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Virtual Care at Holland Bloorview Kids Rehabilitation Hospital

"*Virtual care has been defined as any interaction between patients and/or members of their circle of care, occurring remotely, using any forms of communication or information technologies with the aim of facilitating or maximizing the quality and effectiveness of patient care.*" (Shaw et al., 2018)

Inspired by this definition, virtual care at Holland Bloorview Kids Rehabilitation Hospital:
- provides members of the health care team and client or family communication to inform care when in different physical locations
- leverages technologies such as video, telephone and email
- roots itself in Holland Bloorview's mission, vision and values
- embodies the principles of client and family centred care
- provides accessible care to diverse populations in a variety of settings based on the needs of the client and family
- upholds the same professional practice standards, ethics and evidence-based care as in-person care within the scope of what virtual care may offer
- can include one or more of the following: assessment, treatment and consultation.

Holland Bloorview Kids Rehabilitation Hospital supports and encourages activities that promote safe client care. The provision of high quality care and service to clients may involve virtual care. Benefits of virtual care include enhanced access to health care and more efficient delivery of care for the client/family. Virtual care may be considered a high-risk activity due to the lack of face-to face contact and hands-on physical assessment of the patient however, risk can be reduced when the client is known to the Health Care Provider (HCP or "provider") and when the HCP has the knowledge, skills and judgement to provide virtual care.

Virtual visits at Holland Bloorview include three different modalities which are software/platform that conform to PHIPA.

- Use of OTN (Ontario Telemedicine Network) (audio and video)
- Use of Zoom Healthcare (audio and video)
- Use of telephone (audio only)

Provider Obligations

- Prior to initiating virtual care all HCP should familiarize themselves with and abide by organizational policies and directives specific to virtual care
- Regulated Health Professionals should consult with their college for the standards, policies or guidelines the college has issued for this practice and adhere to the same.
- At this time HB only supports the use of virtual care when both the HCP and the client are in Ontario, i.e., practicing across provincial jurisdictions is not permitted.

- Similar to meeting a client face-to-face, health care providers will explain their scope of practice and any benefits or limitations of virtual care so that the client/family understand the service and the HCP can manage expectations.
- The health care provider must also:
    - Ensure that the provision of virtual care service is in the best interests of the client/family and clinically appropriate.
    - Consider whether virtual care is an appropriate way to deliver the service and be able to manage any unexpected reactions or events that may occur with the use of technology.
    - Ensure that they have the necessary competencies, knowledge and skills to provide appropriate intervention via virtual care.
    - Ensure that the virtual technology is of sufficient quality to:
        - Communicate effectively, ensuring that the quality of the audio is appropriate for the intervention being provided;
        - Provide safe interventions; and
        - Form an accurate professional opinion and/or make care decisions
    - Obtain client/family consent similar to an in-person visit. Clearly outline the nature, risks, limitations, and potential outcomes of the virtual care session or service. Provide the client/family with opportunities to ask questions about the virtual care session and explore any potential risks or concerns. Document virtual care consent in your clinical documentation.
- Clinical documentation standards apply to virtual care sessions. Include information about the use of virtual care including what technology was used and whether any limitations were experienced.

Considerations
- Health care providers must consider the client's needs, the reliability and security of the IT system, internet access, and technical support.
- Before deciding on the use of virtual care, ensure that there will be minimal interruptions in service (e.g., internet) and have a plan as to how to contact the client if disruptions happen.
- Ensure that the technology being used is secure for the purposes of transmitting personal health information in order to protect the privacy of the client and family.
- Consider the environment where virtual care will take place, both the provider's and the client's location. For example, when videoconferencing what appears in the background? Is there a risk of people interrupting and coming into the room? Is there a risk to maintaining professional boundaries? **See Working from Home Tip Sheet.**

Summary of Virtual Care Appointment Stages

Prior to the Virtual Care Appointment

1. **Obtain client/guardian consent (written or verbally) to**:
   a) Use email to communicate. Communication by email is required to send the link to the virtual appointment.
   b) Virtual care tools such as OTN and Zoom are not as secure as in–person appointments, but there are safeguards in place to protect client information. See **Consent for Use of Virtual Care Delivery.**
   c) If a client/guardian refuses to participate in a virtual care visit, provide the client/guardian with the options available for an in-person appointment if appropriate.
   d) Document in the client chart that informed consent (indicate whether it was written or verbal) was obtained to use email to communicate virtual appointment details and to conduct a virtual care appointment using telephone, OTN, or Zoom. The following statement may be used to document consent to using electronic communication and receiving care through a virtual appointment:

      "Verbal consent was obtained from this client / guardian to communicate through email and to provide virtual care using electronic communication. The client/guardian has been informed of the security risks related to using electronic communications and steps they can take to help protect their information. They are aware that virtual care cannot replace the need for a physical examination or an in-person visit for urgent problems. "

   e) Double check the client/guardian's e-mail address before sending the virtual appointment invitation – this will prevent inadvertent privacy breaches due to email errors.

2. **Schedule virtual appointment**
   a) Staff schedule the client appointment, documenting the client/guardian's email address in the chart (if applicable)
   b) Appointment Service staff create/modify the client registration to reflect virtual visit
   c) Registration staff make a reminder call 3-7 days prior to obtain demographics, Family/Pediatrician physician and validate health card.

3. **Recommendations to client/family:**
   a) The client/guardian should use a private computer/device and have a private environment available for the time of their virtual appointment. The client/guardian will be able to join the virtual meeting via a computer, tablet or smartphone device
   b) Provider helps the client/guardian to understand functionalities of the software/hardware (Telephone/OTN/Zoom) by providing OTN or Zoom Information Handouts

4. Ensure you have necessary functionality and environment to host virtual visit
   a) Working Offsite Security: the provider should be in a space that provides a private environment for the virtual appointment
   b) Ensure video quality: the provider should conduct a pre-visit test to check the quality of their Internet and video feed prior to starting a virtual appointment.

During the Virtual Care Appointment
   1. Verify the identity of the client/guardian:
   a) Suggested method: "We want to ensure we are speaking with the right person. Can you tell me your child's name, date of birth, OHIP #?"
   b) Optional: Where the HCP wishes to further confirm the identity of the client the following questions may also be asked:
      o What is the name of your Primary care physician, or
      o When was your last visit to Holland Bloorview, or
      o What was the last clinic you visited at Holland Bloorview

   2. Complete the Consent Checklist to review product functionality and set expectations once on the platform

   3. Documentation: Notes should be documented within the electronic health record, using the available provider-specific screens and should include:
   a) Informed consent discussion(s) and client agreement to a Zoom/OTN/Telephone visit
   b) Care provided during the virtual care visit, including management plan and any follow-up plans

After the Virtual Care Appointment
   1. Appointment check-in and Registration for a virtual visit must be completed simultaneously on the day of the appointment, so that the visit will be available in the electronic health record for physicians/clinical staff to document their notes electronically.
   2. Once the Virtual Visit is complete:
      a. Physicians will notify the Clinic Coordinator to arrive the client in Expanse to show the Virtual Visit has been completed.
      b. Providers enter in a Demo recall (instructions below) for their completed Virtual Visit.
   3. If a visit does not take place (e.g. due to client no-show or refusal), the provider advises the clinic coordinator staff to re-pend the appointment, at which point the visit is rescheduled by the booking staff.
      a. If an Inpatient client visit does not take place, provider marks as no show or cancel, reschedules the visit, or notifies the inpatient scheduler to reschedule. (It is recommended that the provider create a document on the scheduled visit, to indicate that an attempt was made at a visit, etc.)

Submitting Offsite/After-Hours Visit Information for Registration

Use this routine when you see a client who was not registered when they arrived for their appointment.
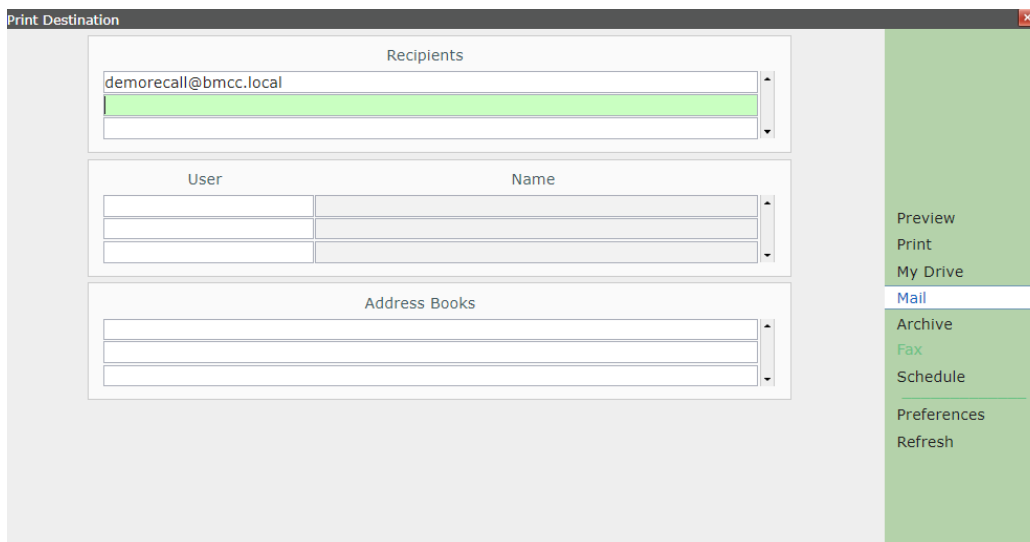
The "Visit Info to Registration" routine is located off of the RAD menu.
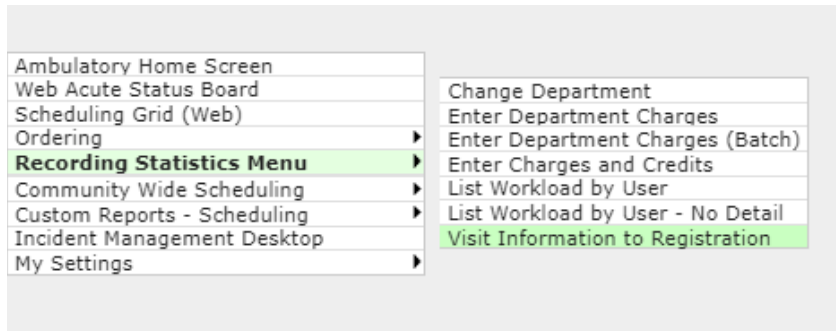
All of the fields are mandatory fields (marked by an asterisk).

Please click on the MAIL tab and enter the email address demorecall@hollandbloorview.ca and click "OK".

Consent for Use of Virtual Care Delivery with Holland Bloorview Providers

<div style="text-align:center">**THIS CONSENT OUTLINE CONTAINS IMPORTANT INFORMATION**</div>

"*Virtual care has been defined as any interaction between patients and/or members of their circle of care, occurring remotely, using any forms of communication or information technologies with the aim of facilitating or maximizing the quality and effectiveness of patient care.*" (Shaw et al., 2018)

Virtual care at Holland Bloorview Kids Rehabilitation Hospital:

- Leverages technologies such as video, telephone, and email
- Upholds the same professional practice standards, ethics and evidence-based care as in-person care within the scope of what virtual care may offer
- Includes one or more of the following: assessment, treatment and consultation.

Virtual Visits at Holland Bloorview include three different modalities which are software/platform that conform to PHIPA.
- Use of OTN (Ontario Telemedicine Network) (audio and video)
- Use of Zoom Healthcare (audio and video)
- Use of Telephone (audio only)

Potential Benefits of virtual care delivery	Potential Risks of virtual care delivery
- Enhanced access to health care - Efficient delivery of care for the client - Cost-efficient and convenient - Increased opportunity to integrate care into the home/community environment	- Unreliable internet connection (at times slow or lagging) - Security, privacy and confidentiality of PHI can be compromised - Risks specific to your therapy – goals, interventions and outcomes may need to be adjusted should be discussed with your care provider

Please note that while Virtual care may be considered a high-risk activity due to the lack of face-to-face contact and hands-on physical assessment of the client, risk can be reduced when the client is known to the provider and when the provider has the knowledge, skills and judgement to provide virtual advice and care.

Conditions of Virtual Care Delivery

Privacy and Security
- Our health care providers have taken steps to protect your privacy while using the virtual delivery platforms listed above. While we do our best to protect the privacy and security of your child's health information, electronic communications have an increased risk of unauthorized disclosure or interception of personal health information.
- Sessions will be conducted from a private setting within the provider's home or workspace.
- To protect your/your child's private health information please always connect to virtual appointments in a private setting. We also recommend not using someone else's computer/device as they may be able to access your information at a later time.

Confidentiality
- Participants (client, family or other logged on members) may not record or screenshot any part of the session without prior informed consent.
- You will be informed of the presence of other individuals participating in the session, such as interpreters or other team members within your circle of care.
- Should you participate in a group meeting, your name, your child's name, image and video feed may be available to other participants. It is understood that there will be no sharing of information beyond the confines of the group session.
- Because of the risks outlined above, the providers cannot guarantee the confidentiality of virtual care delivery and will not be liable for improper disclosure of confidential information that is not the direct result of intentional misconduct.

OTN Client and Family Instructions

Welcome to your [OTN](#) Quick Start Guide! We hope this guide makes your virtual appointment experience more enjoyable. Let's begin….

After OTN coordinator completed a successful test call, OTN coordinator will schedule the OTN visit with your Holland Bloorview provider or MD. A personal invitation will be sent to your email address and will look like the image below.

Note: If you don't see the invitation in your Inbox, please check the Junk Mail and Spam folders as well.
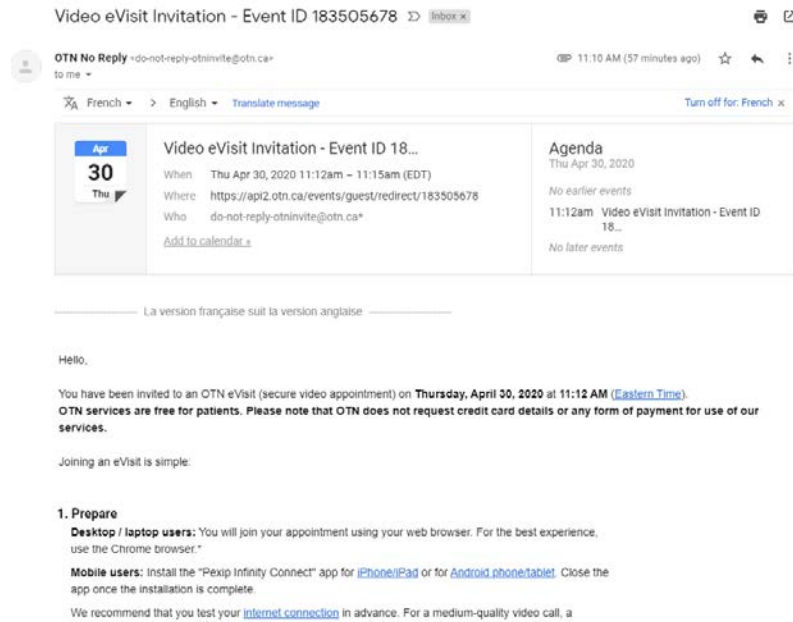
5 minutes before your appointment start time, go to your OTN invite email. Scroll down to point **2. Connect** where you will see a blue box that says **Start eVisit**. Click on this box.

Hello,

You have been invited to an OTN eVisit (secure video appointment) on **Thursday, April 30, 2020** at **11:12 AM** (Eastern Time).
OTN services are free for patients. Please note that OTN does not request credit card details or any form of payment for use of our services.

Joining an eVisit is simple:

1. Prepare
Desktop / laptop users: You will join your appointment using your web browser. For the best experience, use the Chrome browser."

Mobile users: Install the "Pexip Infinity Connect" app for iPhone/iPad or for Android phone/tablet. Close the app once the installation is complete.

We recommend that you test your internet connection in advance. For a medium-quality video call, a minimum of **1 Mbps** download and upload speed is needed.

2. Connect
When it's time for your appointment, click the button below to join.
Mobile users: You must install the mobile app before joining. After you open the app using the button below, click on the green video icon to connect to the call.
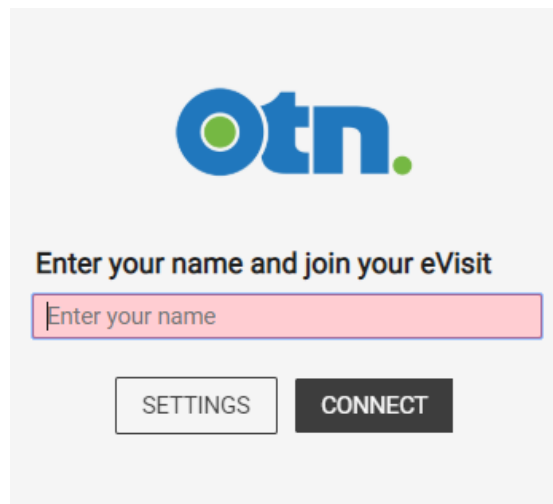
Start eVisit

Need help?
If you have questions about your health care or appointment, contact your health care provider.
If you are experiencing connectivity/video quality issues, or if you have questions about how to prepare for or connect to your appointment, please visit eVisit Help Centre.

If you are seeing your family doctor or specialist, please return to this email after your eVisit and take a short survey about your experience. All information will remain confidential.

The first instruction to appear will ask you to enter your name. Once you have done this, click **Connect**.

The next instruction gives you the option to do a quick test of your microphone and camera. Feel free to test your device before the call, but this is not necessary since you have already completed a successful test call with us before the appointment. Click the **Start** button.

Once you have completed these steps you will be admitted to the virtual appointment. Your image will appear in the upper right hand corner of the screen and your provider or MD's image will appear in the larger, central screen.
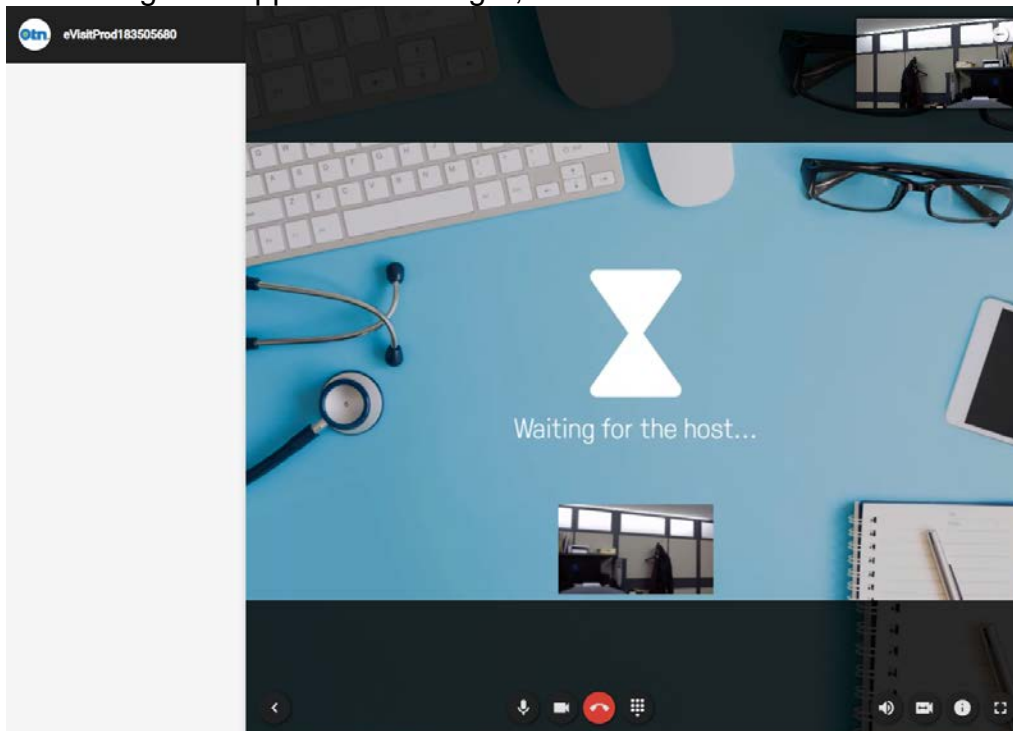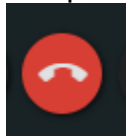
If you cannot see or hear your provider or MD, please check to make sure your microphone and video are turned on. The icons should look like this:
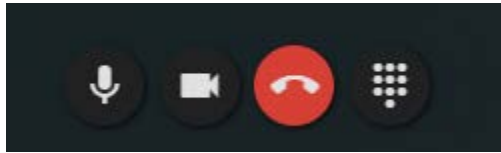
                          not this
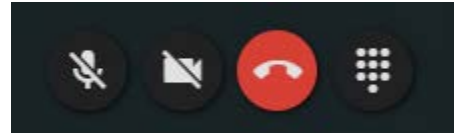
When the visit is finished simply click on the **red button** on your screen. You may have to tap on your screen (for phone/tablet) or move your cursor (for laptop/desktop computer) for the icons to appear.

OTN will confirm that you want to exit the visit. Simply click **Disconnect** and your visit is done!

Disconnect

Do you really want to leave the conference?

☐ Don't ask me again

CANCEL   DISCONNECT
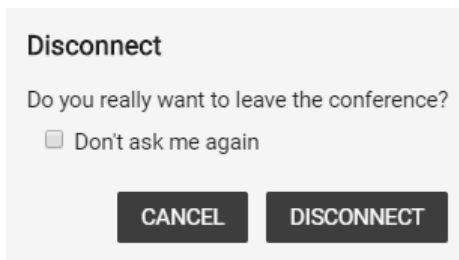
We hope you enjoyed your virtual visit with us here at Holland Bloorview!

Zoom Client and Family Instructions

Welcome to your <u>ZOOM</u> Quick Start Guide! We hope this guide makes your virtual appointment experience more enjoyable. Let's begin….

How to turn on Web Client setting in Zoom (this setting is off by default)
1. Log into Zoom
2. Click on **Settings**
3. Under **In Meeting (Advance)**, turn on **Show a "Join from you browser" link**

Show a "Join from your browser" link

Allow participants to bypass the Zoom application download process, and join a meeting directly from their browser. This is a workaround for participants who are unable to download, install, or run applications. Note that the meeting experience from the browser is limited

Starting a meeting using Web client
1. Log into Zoom in Google Chrome to start a scheduled meeting or Host a meeting
2. Click **Cancel**

Open Zoom Meetings?

https://zoom.us wants to open this application.

Open Zoom Meetings   Cancel
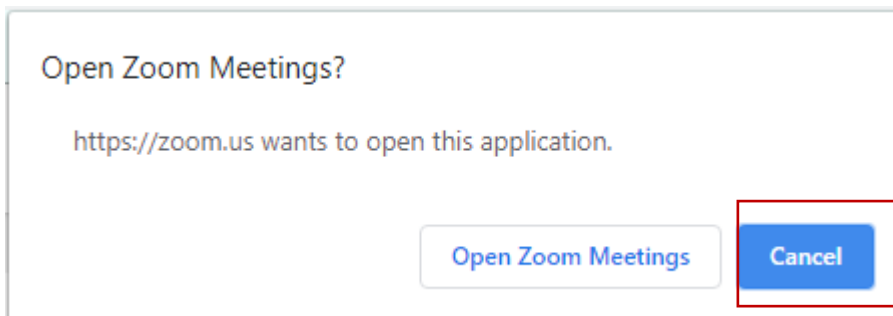
3. Click **start from your browser**

Please click Open Zoom Meetings if you see the system dialog.

If nothing prompts from browser, click here to launch the meeting, or download & run Zoom.

If you cannot download or run the application, start from your browser.

Email template to send to families for Zoom invite and instructions

Hello,

As per our telephone call, we have a Zoom video call on DAY AND TIME.

Despite our efforts, there are some risks from video call visits such as the transmission of the information could be interrupted by unauthorized persons and/or be disrupted or distorted by technical failures.

Joining this Zoom meeting [INSERT LINK] confirms you accept the risks associated with use of video calls.

To join a Zoom meeting:

Desktop/Laptop users
1. Join the meeting by clicking on the Zoom link provided above. NOTE: Google Chrome is the recommended web browser.
2. An option **Join from your browser** may appear automatically. If it does not, select **download & run Zoom**.
3. The option Join from your Browser will appear. Select **Join from your browser**
4. Input a first name and then select **Join**

Smart phone/Tablet users

1. Install the Zoom app onto your device (Google Play Store, App Store) if not yet installed
2. It is recommended that you update your Zoom app prior to the meeting
3. Join the meeting by clicking on the Zoom link provided by your CWAS team member
4. Follow the directions on Zoom app to connect to the call

Should you have any questions, concerns or experience any difficulty connecting to the Zoom meeting during the scheduled appointment, please contact me at ###.

Virtual Care Documentation Script

For the initial virtual visit document in the client chart that informed consent (indicate whether it was written or verbal) was obtained to use email to communicate virtual appointment details and to conduct a virtual care appointment using telephone, OTN, or Zoom. The following statement may be used to document consent to using electronic communication and receiving care through a virtual appointment:

"Verbal consent was obtained from this client / guardian to communicate through email and to provide virtual care using electronic communication tools. The client / guardian has been informed of the security risks related to using electronic communications and steps they can take to help protect their information. They are aware that virtual care cannot replace the need for a physical examination or an in-person visit for urgent problems. "

Scheduling Virtual Acute Care Appointments

1. All scheduling for Virtual Acute Care clients should be done via the Desktop version of Meditech, using this icon:

2. Access the Scheduler Desktop – Patient Mode.

3. Enter the client's name/chart number in the Name field.

4. Click the Book button.

5. Enter Facility as BMC/Holland Bloorview Kids Rehab

6. In the Account field, do a look-up to find the existing Pre-Registered or Registered **Acute Recurring** account with the Location of VIRAC. Do NOT create a new account.

7. In the Appointment field, enter in "Virtual" and do a look-up you should see the Virtual Acute Care appointment types. Select the applicable appointment type for the appointment you are scheduling.

8. The next screen that will come up will be the Appointment Questions. Use this screen to request an interpreter if necessary, and identify the virtual platform that will be used for the appointment.

9. Enter the date and time for the appointment, then click Save.

10. You can copy and paste a scheduled appointment to different days by using the Copy button at the bottom of the screen. A new booking screen will come up where you can enter a new date and time. Please remember that all appointment queries (e.g. virtual platform selection) will also be copied. *Note: you can only do this when scheduling in the Desktop mode.
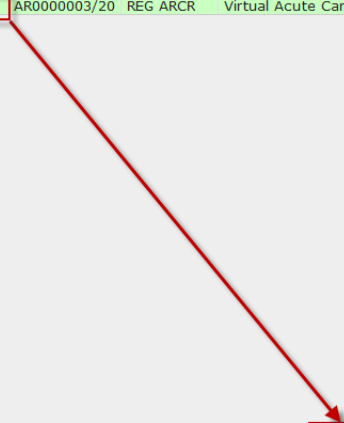
Checklist: Client consent to participate in a video visit

Steps to securing informed consent	√
1. Orientation • Introduce the client to the video solution, how it works, and how it can be accessed (via website or app). • Explain the email invitation with link and need to test the connection prior to the appointment.	
2. Confidentiality/Privacy • Assure the client that no other parties can see the interaction online and that the video visit is secure.	
3. Recording • Assure the client that the session, which takes place in "real time", is not recorded by OTN/Zoom.	
4. Technical Considerations • Explain the sound delay and the need to pause a beat before speaking. • Advise the client to wait their turn and pause before speaking. • Advise the client to use a normal speaking voice. • Advise the client to use the "self-view" to ensure they are positioned properly in front of the camera so the health care provider can see them.	
5. Contingency Management • Explain that the health care provider may determine during the interaction that an in-office assessment may be needed. • Explain that the client has the right to refuse to participate and the right to decline the video visit at any time. • Establish a plan in case there is a technical issue (e.g. ask the client to phone the office and ensure they have the phone number).	
Follow-up Instructions • Inform the client that the health care provider will communicate the need for additional appointments/tests/communication prior to the conclusion of the video visit as per the clinic's current process/clinical protocol.	
Opportunity for Questions and Feedback • Ask the client if they have any questions about the process. • Advise the client that the video solution platform may prompt them to	

participate in a satisfaction survey after the video visit.	
Consent • Request consent to participate in the video visit from the client or guardian. • Follow your organization's policies and procedures with respect to obtaining and documenting consent, as well as to determine which form of consent (implied or informed) is most appropriate. • For further information and guidance on obtaining and documenting consent, refer to the Canadian Medical Protective Association's [Consent to Use Electronic Communications]().	

Leading Practice Strategies for Virtual Care from Home Office
Working Off-site - Home Office Security Checklist

When working from home it is important to ensure that HB corporate information is kept secure and confidential and that the privacy of clients and families is protected. When working from home it is expected that staff will adhere to the following:

- ☐ Work in a private area preferably an office away from other family members or visitors. It is your responsibility to make household members aware of your obligations with respect to privacy and confidentiality at all times.
- ☐ Ensure paper files are locked in a locked drawer or a locked filing cabinet.
- ☐ Lock your computer whenever you are away from it –no matter how short the time.
- ☐ Do not download items from the shared electronic client record to your home computer.
- ☐ Use your secure Virtual Private Network (VPN) when working from home.
- ☐ Do not store client information on your hard drive (Drive C). Commit to maintaining client information in the client's shared record file. When working with reports use HB's VPN and only download to a secure HB drive (examples: drives F, R, V, or M).
- ☐ Do not download information to a portable device such as a mobile USB stick.
- ☐ Always empty your computer recycle bin when ending your work session.
- ☐ Do not share passwords or make passwords easily available to family members or visitors, for example; by posting them or writing them on a piece of paper.
- ☐ When speaking to clients from home, use *67 so as not to display your home phone number. Conduct the conversation in a private location.
- ☐ If using your personal computer ensure that antivirus software is installed and up to date.
- ☐ Do not click on suspicious or unknown emails. Never open attachments unless you are certain that the sender is a legitimate contact.
- ☐ Minimize the use of paper and paper notes and documents. All notes containing client information must be shredded using a cross cut shredder approved for medical/health information.
- ☐ Do not share devices used for work purposes such as laptops, USB sticks or wireless devices with other individuals, such as family members or friends.

For more information please review the following from Ontario's Privacy Commissioner:

https://www.ipc.on.ca/wp-content/uploads/Resources/wrkout-e.pdf

Virtual Care Client Candidate for Therapy and Assessment

The following suggestions may be used as a guideline when considering client preparedness for typical virtual therapy sessions.

Preschool Age:

- Can sit for 10 minutes
- Able to follow 1-step instructions (adequate comprehension for targeted tasks)
- Adequate visual and auditory abilities for computer use
- Motivated for intervention
- Able to use a computer mouse (if required)

Primary School Age:

- Can sit for 15-30 minutes
- Able to follow 1-step instructions (adequate comprehension for targeted tasks)
- Adequate visual and auditory abilities for computer use
- Motivated for intervention
- Able to use a computer mouse (if required)

Adolescents:

- Can sit for 30 minutes
- Able to follow 1-step instructions (adequate comprehension for targeted tasks)
- Adequate visual and auditory abilities for computer use
- Motivated for intervention
- Able to use a computer mouse

Young Adult Clients:

- Can focus for 30-60 minutes
- Able to follow 1-step instructions (adequate comprehension for targeted tasks)
- Adequate visual and auditory abilities for computer use
- Motivated for intervention
- Able to use a computer mouse or have support person to control computer
- Tolerates headphones if necessary
- Lacks fear of technology and/or has a support person

Parent/Caregiver Guide to Facilitating Virtual Care

What to expect:

Assessments:

- ✓ The child may be asked to do a variety of activities:
  - • Speech Language - sit and look at pictures/objects on the screen and name items or talk about them.
  - • Occupational Therapy – self-care activities, fine motor or cognitive-based activities
  - • Physiotherapy – sitting, standing, balancing, walking, movement-based tasks
- ✓ The child may find some tasks difficult and frustrating; however, it is important to complete as many tasks as possible.
- ✓ It is often an option to take breaks when the child needs them. You may be asked to accompany the child for a break (trip to water tap, quick visit to look outside, etc.)
- ✓ It is important that the child tries the activities as independently as possible so the therapist can understand the child's functional abilities.
- ✓ It is important that you are close enough to prevent your child from tripping or falling.
- ✓ The length of an assessment session is approximately 30-60 minutes

Intervention Sessions:

- ✓ Therapy is largely play-based and is intended to be fun
- ✓ Some activities may be worksheet or drill-based
- ✓ Therapy can require a great deal of repetition to be successful
- ✓ Some activities may require that the helper provides hands-on support to the child (eg. helping them sit upright, giving the child equipment, positioning them).
- ✓ Therapy is fast-paced to keep children engaged
- ✓ It is very important that the child and therapist can adequately hear and see each other
- ✓ You may be asked to model actions or tasks for a child depending on the goal.
- ✓ Family members may or may not be involved in the sessions.
- ✓ The length of a therapy session is approximately 30-60 minutes depending on the tasks and the child's tolerance for the tasks

Your Role:

Confidentiality:

- ✓ Ensure child confidentiality at all times (close door, notify therapist if you feel

confidentiality is not being achieved).
- ✓ Do not share information about the child with members outside of the child's 'team'
- ✓ Provide verbal consent to virtual care

Equipment Set Up:

- ✓ Have a telephone handy in the event of technical difficulties /share number with therapist
- ✓ Ensure camera and microphone (head set) are in place and working. Camera should be zoomed in as much as possible so that a large clear view of the client can be achieved.
- ✓ Clear the work space to make free of distractions
- ✓ Locate the "Materials Kit" and have close at hand (as required)
- ✓ Ensure the child is comfortably seated, making adjustments as necessary.
- ✓ Respond to video conferencing (ZOOM/OTN) invitation / connect call

Start of session:

- ✓ Introduce yourself and the child to the therapist
- ✓ Therapist will provide a brief description of what to expect during that session
- ✓ Let the therapist know anytime the visual or auditory quality is not ideal

During session:

- ✓ Stay with child to support them during the session
- ✓ Use strategies to keep the child focused on the computer screen and the activities (redirection strategies, behavioural strategies)
- ✓ Repeat instructions to the child as required
- ✓ Let the therapist know if something is happening in the room that is affecting participation
- ✓ Repeat the child's responses as requested by the therapist
- ✓ Do not answer for the child or give them hints toward the expected response unless requested by the therapist

End of Session:

- ✓ End video call
- ✓ Provide positive reinforcement to the child
- ✓ Share documents with teachers and others as requested by the therapist
- ✓ Clean up after each session
- ✓ Share any feedback with the therapist as to how a future session can be improved

Therapist's Role:

- ✓ Training of parent, caregiver.
- ✓ Schedule the appointments
- ✓ Prepare for each session: send materials ahead of time as needed (i.e.

materials kit or list of session aids required such as toys, writing materials, equipment)
- ✓ Equipment check prior to session
- ✓ Responsible/accountable for each session
- ✓ Provide instruction to the child and the session parent/caregiver.
- ✓ Implement strategies to help with attention and behaviour (collaborate regarding strategies with parent/caregiver)
- ✓ Provide documentation of each session to parents/caregivers
- ✓ Plan for next session: choose activities and strategies individualized to each child, which are conducive to virtual care context /equipment available.

Third Party Support Documents

Practitioner Information Sheet - Third Party Supports to Deliver Virtual Care

Where Virtual Care services are offered to clients, agencies are required to ensure they are accessible. The use of third party supports may be required so that the Virtual Care services can be delivered safely and effectively; however, the participation of third parties involves additional risks and considerations which must be addressed with the client prior to the delivery of the Virtual Care services.

<u>Use of Interpreters and Translation Services</u>

Each agency is responsible for ensuring effective communication between Practitioners and their clients/caregiver, including individuals who have limited English proficiency, who are Deaf, deafened or hard of hearing or who require communication assistance. It is the agency's obligation to pay for the use of interpreters, as a necessary adjunct to the provision of health care services.

Interpreters may not be necessary in all circumstances. The need for an interpreter depends on the complexity of the information being conveyed and the circumstances. For example, an interpreter may be required when obtaining informed consent or detailed discussions about the client's care plan or prognosis, but may not be required when providing "routine" care or where other accommodations are sufficient for the purpose (for example, lip reading, writing, etc.).

Where a client/caregiver requests an interpreter, the agency must assess the request and discuss with the client/caregiver. If you are of the opinion that the client does not require an interpreter in the circumstances, you may give the client/caregiver the option of using an interpreter at their own expense.

If you determine that the services of an interpreter are required to ensure the safe and effective delivery of services, this should also be discussed with the client/caregiver. In these circumstances, the Practitioner will advise that the services of an interpreter are required and that the agency will provide access to and pay for the interpreter at no cost to the client. Depending on the type of interpretation services that are required, it may take some time to coordinate these services and it is advisable to plan in advance.

Where the client/caregiver desires to use a family member or friend to provide interpretation or translation services, you should discuss the risks with the client/caregiver. A friend or family member may not understand medical terms relevant to the Virtual Care services, may misunderstand, add or leave out information. There is a risk that the family member or friend will not keep information about the client's health or health condition confidential.

If the client refuses the services of an interpreter, the Practitioner must assess whether it is possible to safely and effectively provide the Virtual Care services. The Practitioner may ask the client/caregiver to sign a waiver or it may be necessary to discuss other treatment alternatives.

In order to obtain informed consent, it is important for Practitioners to take reasonable steps to ensure that the client/caregiver understands the information. Where an interpreter is involved in the consent discussion with the client/caregiver, his/her participation must also be documented. The Practitioner should confirm with the interpreter that the consent discussion have been interpreted for the benefit of the client and that the interpretation appears to have been understood by the client/caregiver.**Use of Caregivers or Other Support Persons**

The agency and Practitioner delivering Virtual Care services will need to consider whether the client requires in-person supports from a caregiver or other support person in order to safely and effectively provide care.

In considering whether a caregiver or other support person should be involved in the delivery of Virtual Care services, it is important to keep in mind the responsibility to deliver safe and effective care rests with the agency and the Practitioner. If the Practitioner is satisfied that the caregiver or other support person can safely provide the services, has the necessary training to do so, and it is appropriate in the circumstances, the Practitioner must provide instruction to the caregiver or other support person about their role in the delivery of Virtual Care services.

It is advisable to obtain a waiver from the client/caregiver setting out the expectations for the caregiver or other support person's participation in the care. This also includes the ability to cease the provision of services as appropriate.

Process for Obtaining Client Consent for Third Party Supports

Sample additional provisions for consent have been provided which could be incorporated where appropriate when third party supports will be engaged.

The use of interpreters to obtain informed consent to Virtual Care services must be noted on the consent form and retained on the client's health record.

Any time a third party will be involved in the provision of care, there should be a discussion with the individual about their role and expectations for participation. This can be documented on the consent form or discussed verbally and noted on the client's health record.

Additional Terms for Consent Form - Use of Interpreter to Obtain Consent

> *This section may be added as part of the Consent Form if an interpreter is used to facilitate the informed consent discussion between the Practitioner and the Client for Virtual Care Services.*

Use of Interpreter

☐ An interpreter was used to facilitate the consent discussion, the Virtual Care Client Information Sheet and the Consent to Virtual Care Consent Form with the client/substitute decision-maker. The interpreter has confirmed that the discussion and documents have been interpreted faithfully and accurately for the benefit of the client/substitute decision-maker and it appears to have been understood by the client/substitute decision-maker.

_____   _____
Signature of Practitioner   Date

Name of Interpreter / Credentials (where applicable):

_____

Method of Interpretation (e.g. phone, virtual):

_____

Use of Caregivers or Other Support Persons

> *This section may be added as part of the Consent Form if a caregiver or other support person will be assisting in providing Virtual Care Services to the Client.*

The Practitioner has advised me that the in-person assistance of a caregiver or other support person is necessary in order to safely and effectively provide the Virtual Care Services.

I have been advised of the risks of using or not using a caregiver or other support person to assist with the delivery of the Virtual Care Services.

I understand that:

- if I do not have the assistance of a caregiver or other support person to help deliver the Virtual Care Services, the Practitioner has the sole discretion to determine whether it is safe and appropriate to deliver Virtual Care Services and may decline to do so

- the Practitioner may stop the Virtual Care Services at any time if there is any concern with the ability of the caregiver or other support person to safely and effectively assist in the delivery of the Virtual Care Services

- although the Practitioner has provided the caregiver or other support person with instruction, the Agency in no way certifies the caregiver or other support person's competency to assist with the Virtual Care Services

- I assume all risks associated with the use of a caregiver or other support person to assist with the delivery of Virtual Care Services, including the risk of personal injury to the Client or the caregiver or support person assisting with the delivery of the Virtual Care Services

_____   _____
Signature of Client/Guardian   Date

For completion by Practitioner for obtaining verbal consent:

☐ I have reviewed and discussed the information and risks relating to the use of caregivers or other support persons in the delivery of Virtual Care services with the client/substitute decision-maker.

_____   _____
Signature of Practitioner   Date

Waiver – Refusal of Interpreter

> *If an interpreter has been offered to facilitate the informed consent discussion between the Practitioner and the Client for Virtual Care Services and <u>has been refused</u>, then it is recommended that a waiver be obtained. Note that the Practitioner is <u>not</u> required to proceed to provide Virtual Care Services where they are of the opinion that such services cannot be provided safely.*

I acknowledge that the Practitioner has recommended the services of a qualified interpreter in order to ensure there is effective communication to obtain informed consent and/or to provide the Virtual Care Services. The services of an interpreter are provided to me at no cost. The interpreter is able to communicate with me in my preferred language.

I understand that there are risks if I choose to proceed with the Virtual Care Services without the assistance of the interpreter and/or have a family member or friend interpret for me. That person may:

- not know the correct terms related to the Virtual Care Services
- misunderstand, add or leave out information
- learn things about me and my health that I may not want to share
- tell others about my health condition

I understand that if I refuse the services of the interpreter offered by the Agency:

- the practitioner has the sole discretion to determine whether it is safe and appropriate to deliver Virtual Care Services without the use of an interpreter or an alternate interpreter chosen by me.
- the Agency will not be responsible to pay for the services of any alternate interpreter.

I hereby release the Agency and its directors, officers, employees and agents (including the Practitioner), from all actions, causes of action, suits, claims, liability, damages and demands of any kind, whether direct, indirect, special, exemplary or consequential, including interest thereon (the "**Claims**") which may occur as a result of my refusal of the interpreter services offered by the Agency.

I hereby agree to indemnify and hold harmless the Agency, and its directors, officers, employees and agents (including the Practitioner) from and against all Claims whatsoever incurred by the Agency or such other persons as a result of my refusal of the interpreter services offered by the Agency.

_____   _____   _____

Name of Client   Signature of Client/Guardian   Date

_____   _____

Signature of Practitioner   Date