



HEALTHY COMMUNITIES AND

WORLD CLASS HEALTHCARE

CARING | PASSIONATE | TRUSTWORTHY

Telehealth: Resource Package

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1. Introduction

Purpose

Telehealth offers incredible potential to transform the healthcare delivery system by overcoming geographical distance, enhancing access to care and building efficiencies.

One of the challenges is the degree and variation in telehealth processes around usage and documentation. Bendigo Health identified a need to develop a Telehealth Resource Package as a simple, practical tool which could meet the needs of clinicians.

The resource package highlights two telehealth technology platforms used within Bendigo Health, Health Direct and Cisco CMS. Health Direct is a video call management platform which is web-based that lets healthcare providers offer video call option as part of their day to day operations. Whilst the Cisco CMS brings premises-based video, audio and web communication together to meet the collaboration needs of the modern workplace. It works with third-party devices and provides intuitive user experiences. Both telehealth technology platforms have their advantages. Firstly, Health Direct is better suited to stream to a patient home and does have the option of having multiple consumers in the one room (virtual waiting room). Whereas the Cisco CMS works better for clinician to clinician consultations (i.e. hospital to hospital).

The Telehealth Resource Package was created to provide a generic high level resource that includes a toolkit of templates and checklists which can be customised to meet local demand. Clinicians should choose a platform that they believe will best suit the needs of the provider and the consumer.

Bendigo Health has also made available further resources that can be found on the intranet page. For further information, please click [here](#)

2. How to use Health Direct (Telehealth)

Overview

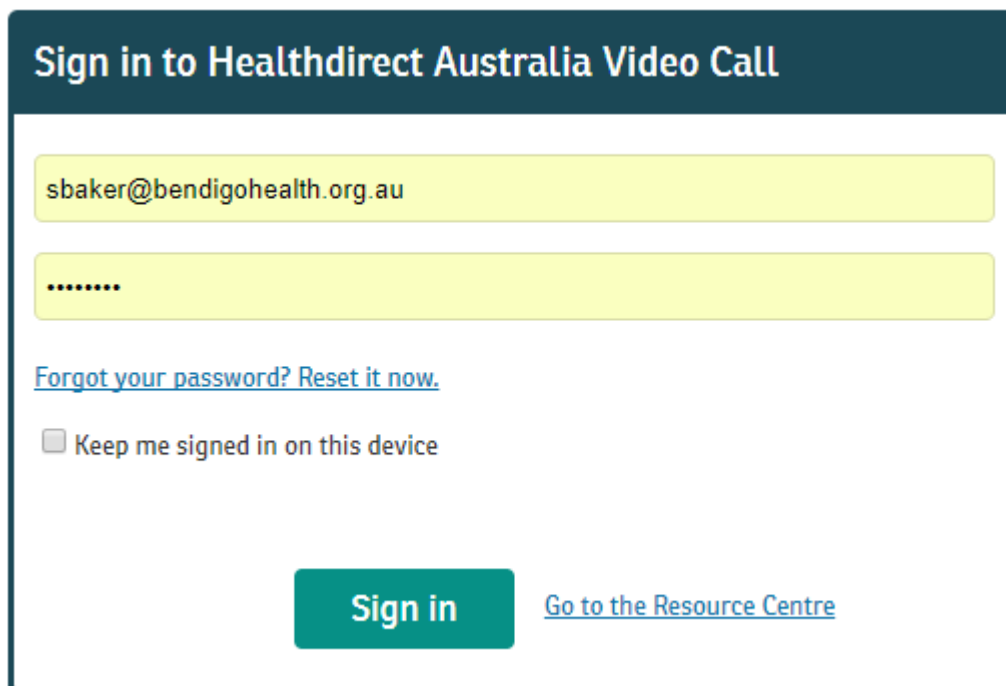
Telehealth is a normal medical consultation between a patient and a medical specialist using video conferencing software and an audio and visual link over the internet without having to attend Bendigo Health in person. As stated, Health Direct works best with direct where a telehealth consultation can be streamed directly into the patient home.

How does Health Direct Work?

Using a computer, iPad, smart phone or other related device, you need to connect in using Health Direct to see the patient. You would require a good internet connection, a private, well lit area and a web camera, speakers and a microphone.

How to logon to Health Direct?

Users will first need to request a logon from Bendigo Health's Coordinator Multimedia. Once a logon account has been triggered by ICT, you register with your BH email address, followed by the creation of a password. You will need to remember the password to make a video call.



The screenshot shows a sign-in interface for Health Direct Australia Video Call. It features a dark teal header with the text "Sign in to Healthdirect Australia Video Call". Below the header are two yellow input fields: the first contains the email address "sbaker@bendigohealth.org.au" and the second contains a masked password ".....". A blue link "[Forgot your password? Reset it now.](#)" is positioned below the password field. A checkbox labeled "Keep me signed in on this device" is located below the link. At the bottom, there is a teal "Sign in" button and a blue link "[Go to the Resource Centre](#)".

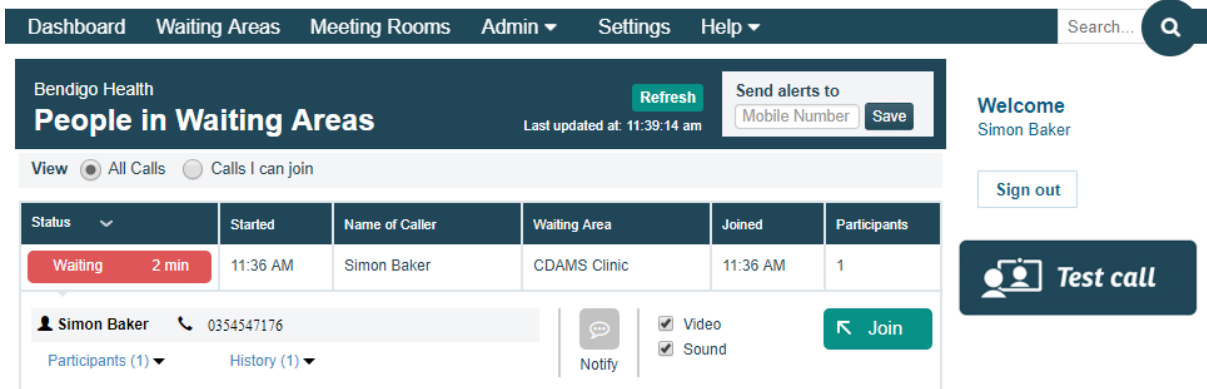
This will take you to a 'dashboard' screen where you can see the clinical area/s that have been assigned against your profile.

Once the patient has arrived in the 'waiting area', please join the call, introduce yourself and check patient details. Same process as face-to-face. When your patient has logged in, the waiting area labelled "0 waiting" will turn orange and say "1 waiting". Double click on the orange "1 waiting".

- A list will appear of people waiting in the waiting room. Select a patient from the Waiting Area.

Status	Started	Name of Caller	Waiting Area	Joined	Participants
Waiting 0 min	11:30 AM	Simon Baker	CDAMS Clinic	11:30 AM	1

- Then click on the "Join" button.



The screenshot shows the 'People in Waiting Areas' section of the HealthDirect interface. It includes a navigation bar with 'Dashboard', 'Waiting Areas', 'Meeting Rooms', 'Admin', 'Settings', and 'Help'. The main content area displays a table of waiting calls. The first call is for Simon Baker, who has been waiting for 2 minutes. The interface also shows options to refresh, send alerts to a mobile number, and a 'Join' button. A 'Test call' button is visible on the right side.

Status	Started	Name of Caller	Waiting Area	Joined	Participants
Waiting 2 min	11:36 AM	Simon Baker	CDAMS Clinic	11:36 AM	1

- The call screen opens. You can see the patient. Your image is a thumbnail at the bottom right hand corner of the screen.
- Complete your three-point check with the patient and advise that they will be placed back in the waiting room for the doctor to pick up.
- Move mouse into top right hand corner of screen, buttons will appear, choose “END” button, then red “Disconnect MY call only” (middle button of three).
- Waiting area appears with patient sitting as red “IDLE” while awaiting for doctor.
- When doctor picks up call patient, idle will turn to green “ATTENDING”.
- Once the doctor finishes the call and hangs up, he/she will use Q Manager to inform the administration staff of the outcome. At the end of the consultation the clinician will let the patient and the administrator know that they will be discharged from the clinic or that they require a follow up in x/12. An appointment letter, along with telehealth information will be sent in the mail to the patient.

**Volume controlled by function keys – F5 volume down; F6 volume up
The Mute button is F4**

At end of telehealth session, be sure to:

- Bend surface pro mouse back to flat shape (this turns it off) and pack Surface Pro up into case with adaptor and plugs;
- After the telehealth consult is completed (or at the end of the clinic);
- Please ensure that both CoW and Surface Pro are returned to storage and the CoW is plugged in so that it can charge for the next clinic to use;
- Turn of the CoW and the mouse using switch underneath.

The Consultant will return the patient history to reception and a further follow up appointment can then be made with the patient by phone or email on return to the office.

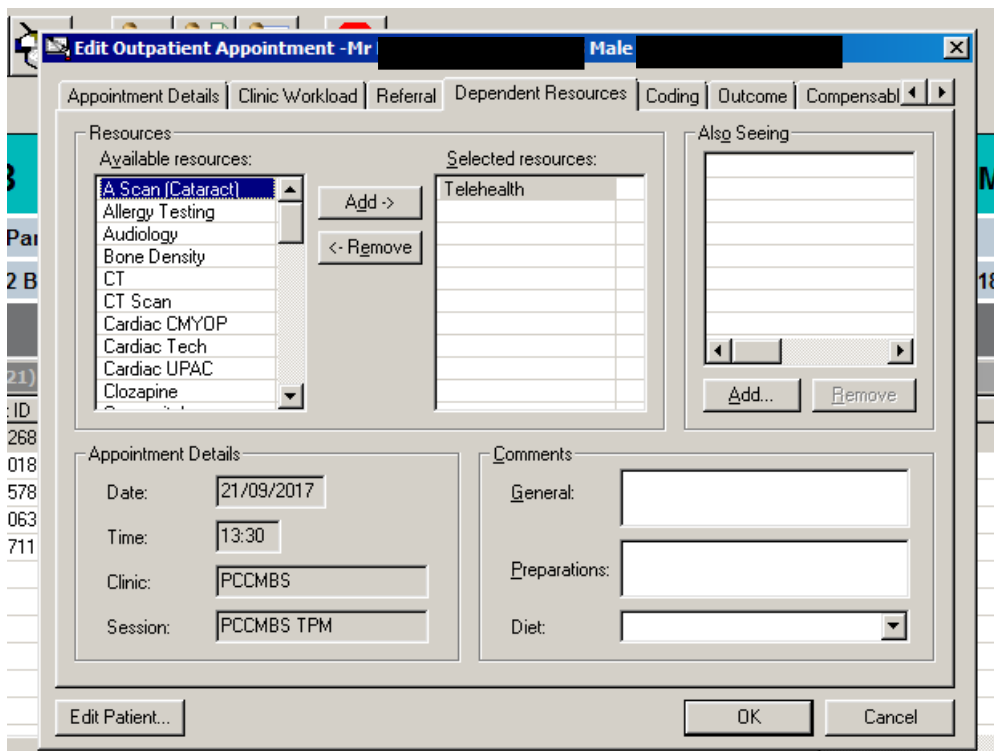
Troubleshooting

Troubleshooting guides are available for providers and consumers, by visiting the [Bendigo Health telehealth webpage](#).

- [Video Call Consumer Information Sheet \(Health Direct\)](#)
- [Video Call Troubleshooting Reference \(Health Direct\)](#)

iPM - Booking a Patient for Telehealth through iPM, using the Health Direct Platform

Book patient in as you would normally. Either the GP or clinician will identify whether a telehealth consult is a suitable option and will discuss this with the patient. Should the patient agree to the appointment, the patient is booked into iPM book as per usual process. However, when asked if you want to add in Dependent Resources, select “yes”, scroll down available resources to “Telehealth” and add to the right side column, then select “OK” and continue as normal.



When sending or emailing out the letter to the patient to confirm the appointment, choose the appropriate telehealth letter on iPM, edit as required and print out a copy for the patient and for the GP. Enclose with the patient letter a brochure and three PDF attachments -

- [Video Call Consumer Information Sheet Bendigo Health](#)
- [Video Call Troubleshooting Reference](#)
- [Telehealth Brochure](#)

These documents can be found on the Bendigo Health website:
www.bendigohealth.org.au/telehealth

If emailing out the appointment letter, include the letter as well as the three attachments.

Billing - Medicare Billing Schedule (MBS)

MBS

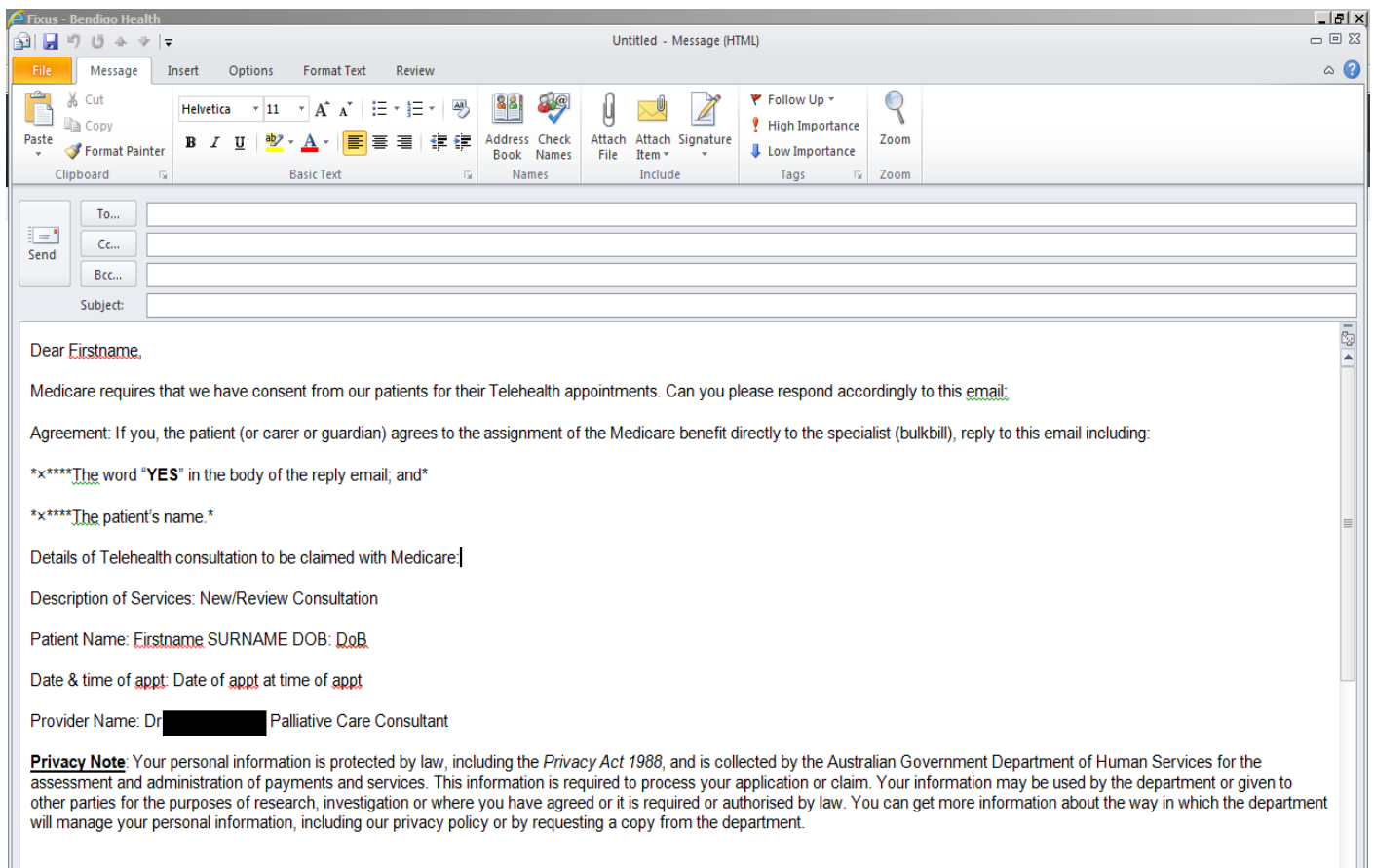
Firstly, the patient must have a valid referral from a GP.

Bulkbill the telehealth appointments direct to Medicare. Patients who have a telehealth video consultation with a specialist have the option to assign their right to a Medicare benefit to the specialist through an email agreement (if no email we will post our hard copy).

At the time of the telehealth video consultation, tell the patient you wish to bulkbill Medicare for the service and they will need to:

1. Agree to the service being bulkbilled;
2. Check their details in the email that will be sent to their nominated email address; and
3. Reply to the email, which will be considered a signature agreeing to assign the benefit.

Here is a copy of the template to use for the email consent:



Dear Firstname,

Medicare requires that we have consent from our patients for their Telehealth appointments. Can you please respond accordingly to this [email](#).

Agreement: If you, the patient (or carer or guardian) agrees to the assignment of the Medicare benefit directly to the specialist (bulkbill), reply to this email including:

*x****The word "YES" in the body of the reply email; and*

*x****The patient's name.*

Details of Telehealth consultation to be claimed with Medicare:

Description of Services: New/Review Consultation

Patient Name: Firstname SURNAME DOB: DoB

Date & time of appt: Date of appt at time of appt

Provider Name: Dr [REDACTED] Palliative Care Consultant

Privacy Note: Your personal information is protected by law, including the *Privacy Act 1988*, and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services. This information is required to process your application or claim. Your information may be used by the department or given to other parties for the purposes of research, investigation or where you have agreed or it is required or authorised by law. You can get more information about the way in which the department will manage your personal information, including our privacy policy or by requesting a copy from the department.

When a reply is received, keep a copy of the email in electronic or hard copy format (as we need to keep these for at least two years for audit purposes).

This process has been developed to comply with section 10 of the *Electronic Transactions Act 1999*, which outlines the steps to be taken for an electronic signature to be recognised. It also meets the legislative requirement of a signature being needed to assign a Medicare benefit.

Here is example template that could be used for post or faxed consent. If the patient does not have an email address, then prefill and send this form to the patient either via hard copy, fax, to local medical centre - whichever method suits.



MEDICARE BILLING CONSENT FORM

PALLIATIVE CARE SPECIALIST CLINIC

UR Number
Surname
Given name
D.O.B. Sex: M F

Dear [REDACTED]

Medicare requires that we have consent from our patients for their Telehealth appointments.

Can you please sign this form after your Telehealth appointment and return via email to lmrpccs@bendigohealth.org.au or post to LMRPCCS, PO Box 128, Bendigo 3552.

Agreement: If you, the patient (or carer or guardian) agree to the assignment of the Medicare benefit directly to LMRPCCS (bulk bill), please sign the form below.

Details of Telehealth consultation to be claimed with Medicare:

Description of Services: Telehealth New/Review consultation
Patient Name: Mr [REDACTED] DOB: [REDACTED]
Date & Time of Appt: 6 October 2017 at 9.30 am
Provider Name: Dr [REDACTED] Palliative Care Consultant

Your personal information is protected by law, including the Privacy Act 1988, and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services. This information is required to process your application or claim. Your information may be used by the department or given to other parties for the purposes of research, investigation or where you have agreed or it is required or authorised by law. You can get more information about the way in which the department will manage your personal information, including our privacy policy or by requesting a copy from the department.

I, [REDACTED] authorise LMRPCCS, Bendigo Health, to send an account directly to Medicare Australia for my Telehealth appointment today.

Signed: _____ Date: _____

Further information can be found using the following link:
<https://www.humanservices.gov.au/organisations/health-professionals/enablers/bulk-billing-telehealth-video-consultation>

Creating an email message template

1. In Microsoft Outlook, click on the **Home** tab, in the **New** group, click **New E-Mail**.
2. In the message window, enter the content that you want.
3. In the message window, click the **File** tab.
4. Click **Save As**.
5. In the **Save As** dialog box, in the **Save as type** list, click **Outlook Template**.
6. In the **File Name** box, type the name of your template, then click **Save**.

Send an email message based on a template

1. In Microsoft Outlook, click on the **Home** tab, in the **New** group, click **New items**, point to **More items**, and then **Choose Form**.
2. In the **Choose Form** dialog box, in **Look In**, click **User Templates in File System**.
3. The default templates folder is opened. The folder location is **c:\users\username\AppData\Roaming\Microsoft\Templates**. If your template is saved in a different folder, click **Browse** and then select the template.
4. Select template and then click **Open**.
5. Make any additions or revisions to the recipients in the **To**, **CC** or **Bcc** boxes. You can also change the text in the **Subject** box and add contents to the message body.
6. Click **Send**.

*Note: Changes made are not saved to the template. If you use the **Save** command, this creates a draft of your message, but will not update the template. To update the template, follow the steps above for creating an email message template.*

MBS Billing to Medicare - Accounts

In terms of billing Medicare for the consultation, billing is done with two item numbers, the usual item number for a new consult or review consult PLUS a telehealth number, for instance;

- Paediatrics: 112 (telehealth number) + 116 (review item number)
- Endocrinology: 112 (telehealth number) + 116 (review item number)
- Palliative Care: 3015 (telehealth number) + 3010 (review item number)

**All rules regarding referrals are valid for telehealth consultations as they are for face to face consultations.*

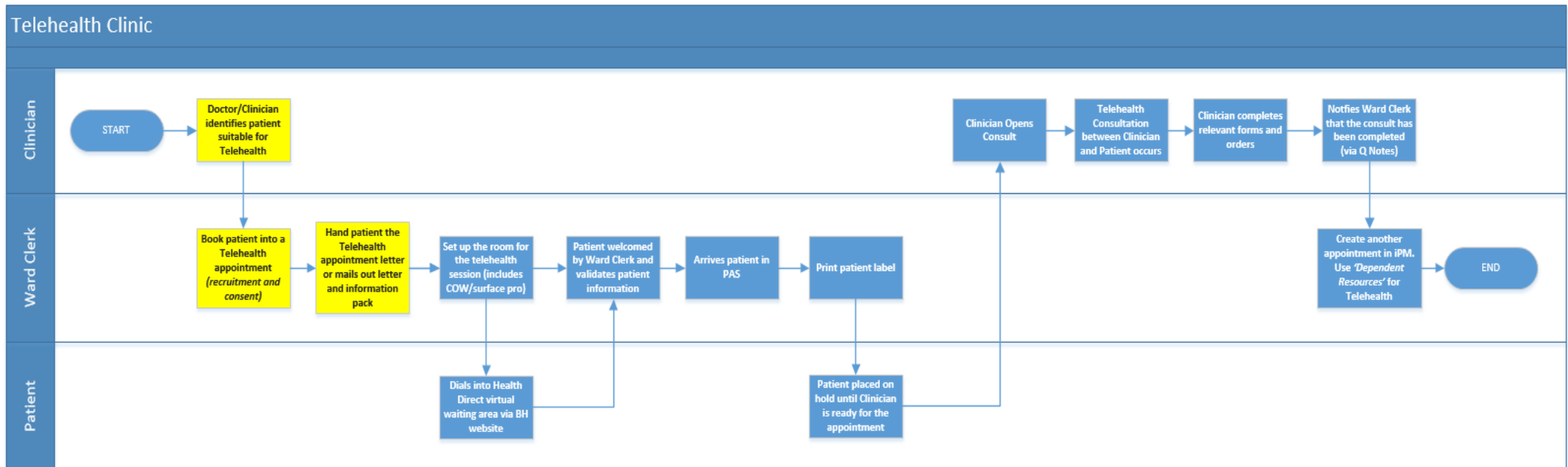
3. How to use Cisco Meeting Server (CMS)

This document outlines the user case workflow for the virtual outpatient use case as demonstrated by Cisco System using the Cisco Meeting Server, the Cisco Meeting App and Cisco Telepresence conferencing systems.

The outpatient consultation is a permanent space created on the Cisco Meeting Server. The space is administrated by a Bendigo Health administrator using the Cisco Meeting App. Patients join the space from a PC or Mac using a standard web browser or from a mobile device using the Cisco meeting App.

The LMRHA Virtual Outpatient Use Case Workflow is accessible on Bendigo Health's [intranet page](#). The Loddon Mallee Rural Health Alliance can be contacted on (03) 5434 1000 for further information.

4. Process Map Example - Telehealth Specialist Clinics



5. Resource Package

Clinician to Patient (Clinical) Resource Package

Resource Number	Title	Description	Page Number
#1	Checklist for Clinician to Patient Consultations	A practical checklist developed for clinicians undertaking Telehealth consultations. Outlines appropriate pathway of care.	18 - 19
#2	Telehealth Readiness Assessment Tools	These tools, developed by the University of Calgary provide a guide to identify any barriers or risks prior to implementation of telehealth services.	20 - 25
#3	Patient Information Sheet on participating in a Telehealth consultation	An example of information sheet you can provide to patients and their carers.	26
#4	Telehealth Consultation Consent	Example of written consent form for Telehealth consultation (optional).	27
#5	Telehealth Template for Documentation of Consultation	A template for documentation of Telehealth consultation	28
#6	Patient Evaluation Survey Questions & Evaluation Considerations	Some examples for patient evaluation of telehealth service	29 - 30

**ACI Guidelines for the use of Telehealth for Clinical and Non Clinical Settings in NSW*

Resource #1 – Checklist for Clinician to Patient Consultations

This checklist has been designed to offer the practical steps/prompts required to conduct successful telehealth sessions, for clinicians who are planning to undertake telehealth consultations with the patient/carers.

Stage	Pathway
Prior to the consultation	<ol style="list-style-type: none"> 1. Ensure Telehealth Readiness Assessment tools have been completed (refer to Resource #2 for example) 2. Consider the appropriateness for the consultation to be held via telehealth or by face to face 3. Ensure all patient information results have been sent to the clinician providing the consult in advance 4. Depending on your local health device, please consider secure messaging software – you can discuss this with your local Telehealth Manager or IT Manager (for sending information about patients) 5. Identify a contact at the far site where the patient will be and consider if a staff member is required to be with the patient during the consult 6. Identify if patient has a carer who should be included in all correspondence about the upcoming telehealth session 7. Receiver-end: provide patient and his/her carer information/brochure on telehealth 8. Confirm appointment with patient or his/her carer 9. It is ideal to build some rapport with the patient and his/her carer (if applicable) prior to the telehealth consultation to make team more comfortable (e.g. a phone call prior)
Day of the consultation	<ol style="list-style-type: none"> 10. Test the equipment 15-30 minutes prior 11. Ensure positioning of the camera and remember to look at the camera when talking. It is ideal to have the camera above the screen so when you look at the screen the camera is directed at your face (e.g. rather than your side) 12. Ensure all documentation has been received
Time of the consultation	<ol style="list-style-type: none"> 13. Put mobile phone to silent 14. Be aware there is a slight delay in using videoconferencing – when asking questions wait until the party has stopped speaking and then respond 15. If applicable in the multi-site telehealth consults – please ensure your site is on ‘mute’ if you are not talking 16. Provide an overview on how the technology works and how the session will run

<p>Time of the consultation (continued)</p>	<ol style="list-style-type: none"> 17. Speak naturally 18. Introduce yourself and other people in both rooms and their roles 19. All clinicians at all sites have agreed to participate in the consultation and document where possible any additional staff who enter the room during the consultation – document names in the telehealth documentation template 20. Receive verbal consent from patient and his/her carer to continue with the consult and document in notes (refer to Resource #4 for example) 21. Confirm Medicare bulk billing (if applicable) 22. Inform the patient and his/her carer that this session is private; is a confidential secure link and it will NOT be recorded 23. Record notes to the consult at both ends (refer to template) 24. Discuss next steps and follow up appointment (if required) 25. Ensure the patient, his/her carer and other staff involved in the consultation are clear on the next steps and don't have any other questions
<p>After the consultation</p>	<ol style="list-style-type: none"> 26. Ask staff / and or patients and their carers to complete a survey based on their experience (if appropriate) 27. Enter the Occasion of Service for Activity Based Funding if applicable – submit to Medicare if applicable 28. Send any scripts/medication to receiver end (if applicable) or local pharmacy 29. Enter patient notes in their medical record 30. Organise follow up (if applicable)

**ACI Guidelines for the use of Telehealth for Clinical and Non Clinical Settings in NSW*

Resource #2 – Telehealth Readiness Assessment Tools

Using the five-point scale rate **YOUR ORGANISATION** on the following statements:

1 = Strongly Agree | 2 = Disagree | 3 = Neutral | 4 = Agree | 5 = Strongly Agree | 0 = Don't Know

A. ORGANISATIONAL CORE READINESS

Your Organisation	Score
Is aware of, and able to clearly articulate needs	
Expresses and feels dissatisfaction with the ways it currently has available to deliver care (e.g. status quo)	
Other (please explain)	
(A) Sub-total	

B. ORGANISATIONAL ENGAGEMENT & PLANNING READINESS

Your Organisation	Score
Has organisational buy-in for telehealth	
Has individuals who are champions for telehealth (clinical/provider, senior administration, community champions)	
Has leadership who are risk-takers and pioneers for reaching novel innovations	
Is aware of organisational dynamics between innovators and resisters	
Has the commitment and support of senior administration	
Has access to sufficient ongoing funding from local, provincial and federal institutions	
Has established collaborative partnerships	
Has in place methods for telehealth communication/profiling/awareness, and is actively involved in promoting these	
Has examples and evidence of telehealth applications in similar contexts/environments/communities	
Exhibits healthy inter-organisational dynamics in telehealth promotion activities	
Is willing to consider short-medium and long term timelines for implementation	
Has established mechanisms of knowledge transfer among staff members	
Participates in a community consultation process	
Conducts ongoing needs assessments and analysis	
Has a strategic business plan, including: <ul style="list-style-type: none"> • A marketing, communication, and evaluation plan • A cost benefit and cost effectiveness assessment, including benefits and risks • Financial readiness for sustainability 	
Other (please explain)	
(B) Sub-total	

C. ORGANISATIONAL WORKPLACE READINESS (Administrative, Human and Physical Structures)

Your Organisation	Score
<p>Ensures the workplaces are prepared for telehealth technology and equipment:</p> <ul style="list-style-type: none"> • Establishes proper facilities (e.g. location, lighting, size and other equipment) • Located telehealth equipment where it is convenient for providers to use as a tool to deliver patient care • Facilitates the creative use of equipment by practitioners and patients • Provides administrative support for clinical decisions, functioning and the process of using the telehealth system • Has a standardised, well defined easy to use referral system • Has a standard and consistent method of record keeping at both the receiving and referring site 	
<p>Recognises and addressed policies and procedures/professional and regulatory barriers:</p> <ul style="list-style-type: none"> • Ascertains that telehealth practices conform to health protection laws • Ascertains that telehealth practices conform to professional regulatory policies • Reviews existing policies, standards and procedures to determine if telehealth is covered under them, if not, revises as appropriate • Formulates and integrates written policies on reimbursement, liability, cross-jurisdiction use and privacy issues • Prepares related written procedure manuals • Formulates policies for defining who gets privileges to use telehealth at the receiving and referring sites 	
<p>Establishes open lines of communication:</p> <ul style="list-style-type: none"> • Manages open communication, keeping all stakeholders well informed • Participates in communication to facilitate team building • Liaises with practitioners, patients and the public as important players in the successful implementation of telehealth 	
<p>Addresses change management readiness:</p> <ul style="list-style-type: none"> • Has a change management plan in place to deal with organisational input • Has effective scheduling and integration of innovators into established practices 	
<p>Addresses human resources readiness:</p> <ul style="list-style-type: none"> • Has adequate and dedicated human resources to implement the strategic plan • Employs a local telehealth coordinator • Determines classification of roles and responsibilities in relation to specific telehealth application(s) 	

Your Organisation	Score
Addresses training and continuing professional development (CPD) readiness: <ul style="list-style-type: none"> • Prepares staff and all end-users for initial and ongoing training • Has a training and CPD plan in place related to telehealth • Has part telehealth experience gained from projects or pilot programs and their evaluation 	
Other (please explain)	
(C) Sub-total	

D. ORGANISATIONAL TECHNICAL READINESS

Your Organisation	Score
Has addressed the technical feasibility and technical requirement issues	
Has established interoperability of equipment and technology	
Has a consistent approach to verification of the fidelity of data transmission	
Has validated that the technology actually works	
Has access to comprehensive technical support that is available locally	
Other (please explain)	
(D) Sub-total	

Total Score: A+B+C+=D = _____

SCORING

- 130 + The organisation is in a good position to implement telehealth successfully
- 86 – 129 Certain items may adversely impact successful telehealth implementation
- 0 – 85 There are barriers to successful implementation that need to be addressed before moving forward in implementation

**ACI Guidelines for the use of Telehealth for Clinical and Non Clinical Settings in NSW*

Resource #2 – Patient/Public Telehealth Readiness Assessment Tool

Using the five-point scale rate **YOUR RESPONSES** on the following statements:

1 = Strongly Agree | 2 = Disagree | 3 = Neutral | 4 = Agree | 5 = Strongly Agree | 0 = Don't Know

A. ORGANISATIONAL CORE READINESS

A: As a Patient/Public, in order to meet the requirements for CORE READINESS, I:	Score
Identify with a sense of isolation and a lack of access to healthcare	
Identify with a sense of dissatisfaction with the current state of health care	
Feel dissatisfied with usual doctor-patient interaction or have a desire for a more comfortable setting for obtaining health information	
Acknowledge unmet healthcare needs	
Have a desire for change and want to actively be involved in my health and health care condition	
Other (please explain)	
(A) Sub-total	

B: As a Patient/Public, in order to meet the requirements for ENGAGEMENT READINESS, I:	Score
Am knowledgeable about telehealth and/or want to know what telehealth is	
Acknowledge the benefits or anticipated benefits/risks	
Am comfortable with using telehealth equipment	
Believe that concerns specific to privacy/confidentiality/security have been addressed when using telehealth	
Believe that cultural issues can be addressed when using telehealth	
Am comfortable that telehealth is an adjunct to usual care, rather than a replacement	
Have a sense of ownership regarding my wellbeing and that of my community	
Other (please explain)	
(B) Sub-total	

Total Score: A+B = _____

SCORING

- Above 70 Patients are in a good position to use telehealth.
- Between 51 – 69 Certain items may adversely impact the use of telehealth
- Below 50 There are barriers to successful patient use of telehealth

**ACI Guidelines for the use of Telehealth for Clinical and Non Clinical Settings in NSW*

Resource #2 – Practitioner Telehealth Readiness Assessment Tool

Using the five-point scale rate **YOUR RESPONSES** on the following statements:

1 = Strongly Agree | 2 = Disagree | 3 = Neutral | 4 = Agree | 5 = Strongly Agree | 0 = Don't Know

A: As a Practitioner, in order to meet the requirements for CORE READINESS, I have:	Score
A feeling of dissatisfaction with the current available ways of delivering care, e.g. status quo)	
Firsthand experience of the negative effects of isolation from healthcare services (professional and educational)	
A driving need to address a public or patient healthcare problem (as opposed to a practitioner specific one) that could be met by telehealth	
Other (please explain)	
(A) Sub-total	

B: As a Practitioner, in order to meet the requirements for ENGAGEMENT READINESS, I:	Score
Am an innovator and/or champion for telehealth	
Have a sense of curiosity about the influences of telehealth on improving the delivery of healthcare (potential benefits)	
Have respect for others in the telehealth team	
Have the need to interact with other practitioners	
Have examples and evidence of telehealth applications in similar contexts, environments and communities	
Communicate with other practitioners / public concerning the benefits about telehealth	
Am willing to make the initial extra investment in time	
Other (please explain)	
(B) Sub-total	

C: As a Practitioner, in order to meet the requirements for STRUCTURAL READINESS, I:	Score
Believe telehealth can address scheduling concerns and apprehensions about overextended workloads	
Have 24 hours access to telehealth equipment	
Have telehealth reimbursement plans in place	
Have dealt with apprehensions about the reliability in telehealth equipment and have good technical support and backup plans	
Have access to an established reliable and available clinical consultation network (human) when using telehealth	
Am provided with reliable clinical content and continuing medical education (CME) through telehealth	
Attend to issues regarding liability and licensing when using telehealth	
Other (please explain)	
(C) Sub-total	



Total Score: A+B+C = _____

SCORING

- | | |
|-----------------|---|
| Above 80 | Practitioners are in a good position to use telehealth. |
| Between 61 – 79 | Certain items may adversely impact the use of telehealth |
| Below 60 | There are barriers to successful practitioner use of telehealth |

**ACI Guidelines for the use of Telehealth for Clinical and Non Clinical Settings in NSW*

Resource #3 – Patient Information Sheet on participating in a Telehealth consultation

What is a Telehealth consultation?

Telehealth is a normal medical consultation between a patient and a medical specialist using video conferencing software and an audio and visual link over the internet, without having to attend the appointment at the hospital (face to face).

Why use Telehealth?

A Telehealth consultation reduces the need for you to travel to large towns or cities to receive your treatment.

How will I see my specialist if we are not in the same room?

The most common piece of technology used to deliver telehealth consultations is videoconferencing. It is similar to a normal telephone call, with the added benefit of being able to see the participants at the other end. Most video conferencing equipment allows you to transmit data, e.g. presentations, photographs, x-rays and video.

Who will be part of the consultation?

At the time of the consultation you will see your treating clinician through a screen. There may be a staff member with you in the room if it is deemed appropriate and you are comfortable with that (for example, if they have to check your blood pressure or read through results). You can choose if a family member, your carer or other support person attends the appointment with you.

Consent for the consultation?

Verbal consent is required at the beginning of the consultation before consultation will proceed and all staff part of the consultation will be introduced at the beginning of the session. The three identifiers include (full name, date of birth and address).

Your follow up appointment?

A follow up appointment will be made if required.

How much will the consultation cost?

There should be no additional cost to you other than your usual consultation fees.

What if I don't want to be part of a Telehealth consultation?

You may choose not to participate in a telehealth consultation if you are uncomfortable. Or, if you are uncomfortable during the session, you can ask to finish the consultation.

Maintaining your privacy and confidentiality?

All consultations done via telehealth are private and secure and **WILL NOT** be recorded. Documentation will be taken during the consultation by the clinicians at both ends (if there are clinicians at both ends) and will then be entered into your medical record, as would normally happen if you saw your specialist face to face.

Bendigo Health Specialist Clinics – Brochure

As part of the Department of Health and Human Services funded Telehealth Specialist Clinic Project, a sample brochure can be found on the Bendigo Health website to provide further information.

[Bendigo Health brochure](#)

Resource #4 – Telehealth Consultation Consent

<p>Telehealth Consultation Consent</p>	<p>Affix ID Label Here</p>
<p>This procedure for conducting the telehealth consultation has been fully explained to me and I understand that:</p> <ul style="list-style-type: none"> • My participation is completely voluntary and I have the right to refuse to participate • I have the right to withdraw my consent and terminate the consultation at any time • Health professionals are permitted to take notes during the consultation • I agree to my medical information being used for case conference, ensuring that my right to confidentiality is maintained. <p>My consent relates to (Please tick appropriate response)</p> <ul style="list-style-type: none"> • <i>A single telehealth session</i> • <i>An episode of care involving several telehealth sessions</i> • <i>The use of medical information for a case conference</i> <p>For patient over 16 years</p> <p>Parent Name: _____ (Print)</p> <p>Signature of Patient: _____</p> <p>Date: _____</p> <p>For patient under 16 years / in Care / with Guardian</p> <p>Parent / Carer / Guardian Name: _____ (Print)</p> <p>Signature of Patient / Carer / Guardian: _____</p> <p>Date: _____</p>	

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Resource #5 – Telehealth Template for Documentation of Consultation

<p>Telehealth Template for Documentation of Consultation</p>	<p>Affix ID Label Here</p>
<p>Date of consultation: _____ Time: _____</p> <p>INTRODUCTION</p> <ol style="list-style-type: none"> 1. Introduce self (full name, date of birth and address) 2. Confirm patient details on ID label (if no label, please complete the ID fields above) <p>Staff present for consultation (at both sites) – include both their name and location</p> <ol style="list-style-type: none"> 1. _____ 2. _____ 3. _____ <p style="text-align: center;"><i>*All staff listed above have agreed to be part of this consultation</i></p> <p>Carer or other support person present with patient? Yes No</p> <p>Verbal consent sought from patient to conduct consultation via telehealth please circle Yes No</p> <p>SITUATION: _____</p> <p>Problem/s and symptoms _____</p> <p>BACKGROUND: _____</p> <p>Allergies and adverse reactions _____</p> <p>ASSESSMENT: _____</p> <p>Assessment and clinical findings _____</p> <p>RECOMMENDATION: _____</p> <p>Outcomes, recommended actions _____</p> <p>Next scheduled appointment: _____</p> <p>Form completed by: _____ Date: _____</p>	

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Resource #6 – Patient Evaluation Survey Questions

Below are some example questions that can be tailored to your service to assess the patient satisfaction of utilising a telehealth service

Question	Strongly Agree	Disagree	Neutral	Agree	Strongly Agree
The telehealth consultation was convenient for me?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The telehealth consultation saved me time and money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The telehealth service I received was as good as previous face to face appointments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was comfortable talking to the clinician/s using a computer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My safety and privacy were maintained during the consultation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would be happy to have more consultations using telehealth?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would prefer a face to face consultation with my clinician?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What would you change to improve the telehealth service?					
What were the benefits of the telehealth service?					

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Resource #6 – Evaluation Considerations

Other areas to consider when evaluating telehealth services include:

- User acceptability (patient and clinicians)
- The persons and practitioners experience (survey)
- Satisfaction with the process or service
- Reviews of any complications
- Morbidity
- Poor outcomes for the person
- Percentage of eligible encounters performed by telehealth (rural/regional)
- Total number of kilometres travelled by patients (includes travel costs and time for outreach clinician and/or patient)
- Total number/percentage – increase/decrease in the did not attend rates
- Diagnosis accuracy
- Validation of diagnosis
- Appropriateness of service delivered
- Information provided
- Referrals made
- The persons safety

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6. References

¹ *Telemedicine: A Guide to Assessing Telecommunications in Health Care* – NCBI

<https://www.ncbi.nlm.nih.gov/books/NBK45440/>

² *Department of Health: Telehealth*

<http://www.health.gov.au/internet/main/publishing.nsf/content/e-health-telehealth>

³ *ACI NSW Agency for Clinical Innovation: Guidelines for the use of Telehealth for Clinical and Non Clinical Settings in NSW*