



ALLIED HEALTH

Aotearoa New Zealand

Allied Health Best Practice Guide for Telehealth

Allied Health Aotearoa New Zealand

Allied Health Aotearoa NZ (AHANZ) is an incorporated society with a membership of 29 allied health professional associations, representing the connected voice of 30,000 allied health professionals. AHANZ provides a forum for allied health professional associations to work together to raise their profile and develop reciprocal relationships with health sector and government stakeholders.

Position Statement

Telehealth is the practice of healthcare, education and consultation through telecommunications technology. This may include telephone, text, app-based systems and video conferencing. Telehealth is also referred to as telepractice, telemedicine and telerehabilitation. AHANZ has adopted the term telehealth to be used when referring to this practice.

This practice is well recognised internationally and nationally. AHANZ recognises the benefits to health care and education through telehealth and supports this model of service delivery.

The position of AHANZ on telehealth practice in New Zealand, is that best practice principles must apply. Clinicians working with clients and whānau using telehealth practices must abide by all ethical, professional and legislative requirements. This will include (but not be limited to) documents such as scope of practice documents; competency frameworks; ethical frameworks; health, safety, privacy and disability requirements; and codes of conduct. The clinician is advised to refer to these standards as set by their professional association and registering body.

AHANZ recognises that, while this is a growing model of service delivery in Aotearoa, it remains a developing field. AHANZ therefore recommends that all clinicians and services engaging in telehealth gain information and support on the resources required; education and ongoing supervision; privacy; confidentiality; and consent.

Project Leads: Philippa Friary and Cherry Holliday.

Working Group: Georgia Wakefield (Allied Health Aotearoa NZ), Michael Thorn (Royal NZ College of GPs), Sue Doesburg (Physiotherapy NZ), Antony McFelin (NZ Association of Counsellors), Cherry Holliday (NZ Orthotics and Prosthetics Association), Philippa Friary (NZ Speech-language Therapists' Association), Kelly Bohot (Waitemata DHB), and Jonathan Lloyd-Paine (Osteopaths NZ).

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Purpose

This Guideline highlights the main considerations identified by the use of technology in allied health practice. This document applies to allied health clinicians practising in New Zealand and/or overseas, as well as clinicians based overseas and providing telehealth services to patients in New Zealand (though this guideline does not address potential regulatory concerns in this instance).

Telehealth Definition

The AHA NZ definition of telehealth is:

The delivery of services and exchange of information relating to patient/client care that uses any form of technology including, but not limited to, video conferencing, internet and telephone, as an alternative to in-person interaction.

The principles outlined in this guideline may be applicable to broader technology use, e.g. video conferencing for supervision, professional development and education.

Principles

It is the position of AHA NZ that:

- Most health clinicians already use some form of information and communications technology when providing care.
- Increased adoption of telehealth offers significant benefits to allied health clinicians and their clients/patients, including better access to health services, and more efficient use of health resources.
- While there are many benefits to the use of telehealth, care must be taken to ensure client/patient safety.

Benefits

Many New Zealanders struggle to access the health services they need because:

- They live in rural or remote areas
- The specific health services they need are not provided locally
- Lack of transport, other commitments, or physical impairment may make attending appointments during work hours difficult.

Telehealth can help clients/patients in isolated locations receive necessary care, and provide clients with more convenient access to care.



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Challenges and risks

Telehealth consultations can pose challenges and risks not present in in-person consultations. This is particularly true when there has been no prior in-person contact between the allied health clinician and the client/patient.

Challenges and risks include:

- Establishing rapport with the client/patient
- Conducting any physical examination
- Recognition of emotion
- Cultural responsiveness
- Client concerns about data safety and security.

Most of these challenges and risks can be managed by following the guidelines outlined below.

Providing best practice care

When using telehealth, you should ensure services are consistent with the standards of care delivered in person. This includes standards relating to client selection; identification; cultural responsiveness; assessment; diagnosis; consent; maintaining the client's privacy and confidentiality; updating the client's clinical records; communication with other health clinicians involved in the client/patient's care; and follow-up.

If, because of the limits of technology, you are unable to provide a service to the same standard as an in-person consultation then you must advise the client of this.

When using telehealth, you should:

- Comply with local guidelines, such as those imposed by your employer, or specified in any contract for services. If providing services to clients/patients in another country by telehealth, you should familiarise yourself with the requirements of that country and ensure telehealth is covered under your indemnity insurance.
- Ensure you verify the identity of the client before providing care. Health bodies in Australia¹ recommend asking the client for three client identifiers, such as:
 - Client name (family and given names)
 - Date of birth
 - Gender (as identified by the client themselves)
 - Address
 - Patient record number where it exists.
- Make sure the client is fully informed with regards to the limitations of a virtual consultation, makes an informed choice, and provides their consent before providing a telehealth service.

¹ The Royal Australian College of General Practitioners (in criteria 3.1.4 of its 2013 *Standard for General Practices*) and Dietitians Association of Australia (in its 2014 statement on *Telehealth / technology-based clinical consultations*).



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- To ensure cultural responsiveness, it is advised a kanohi ki te kanohi (in-person) consultation should always be offered prior to a telehealth consultation, especially if there are concerns regarding cultural responsiveness.
- Ensure that any device, software or service you use for the purposes of telehealth is secure and fit for purpose, and preserves the quality of the information or image² being transmitted.
- There are technical standards that apply to the use of telehealth in New Zealand³, and you should ensure that your IT vendor complies with these.
- Consider whether a physical examination would add critical information before providing care. If a physical examination is likely to add critical information, then you should not proceed until a physical examination can be arranged. In some circumstances, it may be reasonable to ask another practitioner in the patient/client's locality to conduct a physical examination on your behalf. Use of a Therapy Assistant during a telehealth intervention may be considered. In those instances, it is important that you obtain the patient/client's consent for that arrangement, communicate your request clearly to the other practitioner, and are available to answer any queries that the other practitioner might have.
- Keep clear and accurate patient/client records that report relevant clinical information; all options discussed; decisions made and the reasons for them; any information provided to the patient/client; and the proposed management plan. All correspondence with the patient (via email, video or telephone) must be recorded in the patient notes indicating it was a telehealth intervention, i.e. state type of contact and confirm consent was given at all times. Shared clinical records will alleviate the challenges of record keeping using telehealth technology.
- Respect the privacy, security and sensitivity of patient information. It is imperative that you act within the rules of the Health Information Privacy Code 1994, and that any sensitive information is protected. Be fully informed regarding security issues specific to the use of email. For example, it is difficult to verify a patient/client's identity via email; some families and groups share a common email address; and computers (particularly family computers) may be accessed by multiple users. For these reasons, you should follow your contractual obligations regarding email verification and/or check with the patient/client before sending him or her sensitive information by means of email, to ensure that the information only goes to the intended recipient. Password protection or encryption is also recommended for file sharing between professionals.
- Refer to your professional regulatory body regarding legal restrictions on issuing prescriptions by electronic means.

² Additional consent may need to be sought for use of images or audio recording.

³ The Telehealth Resource Centre outlines the various technical standards and how they apply at <http://www.telehealth.co.nz/technical/technical-standards>.



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Where to get advice

For more helpful information about using technology-based consultations please see:

- NZ Telehealth Forum and Resource Centre. [Implementing Telehealth](#). 2014.
- NZ Telehealth Forum and Resource Centre. [Telehealth Resources](#). 2014.
- Australian College of Rural & Remote Medicine. [e-Health Resources](#). 2016

Please refer to the Appendices for Example Consent Forms.

Links to other relevant documentation

- NZ Telehealth Forum and Resource Centre. [What is Telehealth](#). 2014.
- Dietitians Association of Australia. [Telehealth / Technology-based clinical consultations](#). October 2014.
- New Zealand Audiological Society. [Professional practice standards](#). July 2015.
- Australian Physiotherapy Association. [Telerehabilitation and physiotherapy](#). 2009.
- Medical Council of New Zealand. [Statement on telehealth](#). June 2016.
- Medical Council of New Zealand. [Statement on use of the internet and electronic communication](#). December 2016.
- Medical Council of New Zealand. [Cole's Medical Practice in New Zealand \(12th ed\)](#). February 2013. Chapter 15 Medicine and the Internet.
- The Royal Australian College of General Practitioners. [Standard for General Practice: Standards for General Practitioners Offering Video Consultations \(4th ed\)](#). 2011.
- Australian College of Rural & Remote Medicine. [Telehealth Standards Framework](#). 2016.
- The Psychotherapists Board of Aotearoa New Zealand [Psychotherapists and Electronic Media Position Statement](#) 2014.
- The Health Information Privacy Code 1994
- The Code of Health & Disability Services Consumers' Rights 1996
- The Official Information Act 1982
- The Health Act 1956
- The Evidence Amendment (No.2) Act 1980
- Health and Disability Sector Standards 2009
- Mental Health Act 1992
- Criminal Justice Act 2006
- Service Specifications Specialist Community Allied Health Services. (MOH, DHBNZ)2002
- HPCA Act 2003



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APPENDICES

- i. Example Consent Form (Adult - Independent)
- ii. Example Consent Form (Parent - Guardian)



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Appendix (i): Example Consent Form (Adult – Independent)

Client Details

Name:

Address:

DOB:

Nominated email address:

Referring Doctor:

Consent statements

I _____ consent to the passing of information in relation to my treatment to be sent to the nominated email address.

I _____ declare that the information provided on this form is true and accurate at the time of signing and that my identity is that stated on this form.

I give permission for _____ to contact my referring doctor in reference to my treatment.

I give permission for _____ to contact further specified health professionals (list) in reference to my treatment.

Signed

(Client)



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Appendix (ii): Example Consent Form (Parent / Guardian)

Client Details

Name:

Address:

DOB:

Nominated email address:

Referring Doctor:

Guardian Details

Name:

Address:

DOB:

Consent statements

I _____ declare that I am the legal guardian to the client _____ and that the information provided on this form is true and accurate at the time of signing and that my identity is that stated on this form.

I _____ consent to the passing of information in relation to _____ 's treatment to be sent to the nominated email address.

I give permission for _____ to contact the referring doctor in reference to their treatment.

I give permission for _____ to contact further specified health professionals (list) in reference to their treatment.

Signed

(Guardian)