

Setting up Telehealth in your Service

What's needed?

Adding Telehealth consultations to your normal daily activity requires some forward planning so things run smoothly.

Getting started

The first few Telehealth consultations should begin with something simple such as a routine follow-up e.g Review by cardiologist of existing medications, or preoperative check-up.

Plan ahead – Set aside some time for your staff to read up on Telehealth and familiarize themselves with the equipment and software.

Make sure patient referral and information has been sent to the specialist prior to the Telehealth consultation, the software the specialist will connect with has been confirmed and any tests/medication lists have been sent with the referral to the specialist. Ensure changes in medication, further tests or clinical referral etc are followed up once the Telehealth consultation has completed.

The Room

Video consultations can either be conducted in a standard consulting room as long as the room has a door that can close, has a lock on the door or staff are able to put signage up to let other staff know that there is a consultation on and that the room is private and quite away from outside noise or road traffic that can interfere with the consultation.

An option is to place the video consulting equipment on a small trolley that can be moved about the service. Telehealth consultations can be conducted through a laptop offsite, as long as there is appropriate bandwidth, connection and there is a room available that is quite and private.

Selecting patients for Telehealth

Telehealth is beneficial for patients who:

• Can't readily travel to a specialist's rooms: e.g the elderly, frail, physically disabled and those with home, cultural or work responsibilities that make travel difficult or inconvenient. • Will clinically benefit from accessing specialist services in a timely manner.

Some issues for consideration are:

- People who are hearing impaired
- People who suffer from an intellectual disability
- People who have children attending the appointment. If the child is not the patient, it is best to find someone to care for the child, while the adult is having the telehealth appointment

Carers/power of eternity other than your clinician should be present with the patient during their telehealth appointment.

Patient consent

Make sure the patient understands what the Telehealth consultation will be like and why they are having it.

Verbal or written consent is needed – You can note verbal consent in free hand in the PIRS or use the VACCHO Patient Consent Form for written consent. More information on patient consent is provided in VACCHOs Seeking Consent for Telehealth information sheet.

Specialists

The combination of Telehealth and National Registration has greatly expanded the number and range of specialists available to see your patients.

Wherever possible it is advisable to use existing referral pathways to specialists who have an ongoing relationship with your patients and your health service, and who the patient could travel to see in person if this becomes necessary.

Also consider whether or not the patient will need to see the specialist on a regular basis. If the Telehealth referral is for a one-off assessment or just for a second opinion, the location of the specialist is less important.

If you have any issues finding out which specialists are Telehealth enabled, contact the Telehealth Project Officer at VACCHO on 03 9411 9411.

Bookings and administration

Bookings

Your administration staff need to know which consultations will be via Telehealth, so that they can book the room, the equipment and allocate the appropriate staff member to sit with the patient throughout the Telehealth appointment. Booking a series of Telehealth appointments with the one specialist is often easier.

Allocation time

Particularly when first getting started, video consultations are likely to take more time than an in-person consultation. Most of this extra time is needed at the beginning, to check the operation of the video link, that the patient is positioned well, and that everyone can hear adequately. Therefore ask the patient to arrive about 10 minutes before the Video call commences, and allow at least the first 5 minutes to be taken up with adjustments to sound, lighting and positioning of the patient and camera. The extra time will decrease with experience and familiarity with equipment.

Billing

Telehealth is unique in that two clinicians can receive MBS rebate for seeing the patient at the same time. Details of the item numbers are available from MBS Online at: http://www.mbsonline.gov.au/telehealth

For more information on MBS items see Telehealth MBS Pathways Poster.