Virtual Care Quick Reference Checklist for Providers

Target audience: Physicians, clinicians, and clinical support staff

Before a Virtual Care Visit (VCV)

- ☐ Have you considered what clinical conditions can be safely assessed and treated (scope of practice) through a VCV?
- ☐ Do you have access to the appropriate clinical information needed for assessment and treatment during the VCV?
- ☐ Is relevant patient information gathered prior to and during the VCV and documented in a secure way?
- ☐ Have you used secure Southlake email or called the staff assigned to your clinic to provide them with the following information for each patient you would like booked for a VCV?
    - o Patient full name,
    - o Patient date of birth, and
    - o Patient MRN (if available)
    - o The type of virtual visit you are requesting (telephone, OTN, or video-conference)

- ☐ Clinic Staff will then complete the following steps with the patient/caregiver prior to a VCV:
    1. Schedule the visit based on the request (includes confirming they have appropriate technology, internet access, etc.).
    2. Obtain consent to conduct a VCV and document this in the patient chart.
    3. Create or modify patient registration to indicate this will be a virtual visit (telephone, OTN, or video)
    4. The visit will be "opened" in Meditech by clinic staff, ready for you to document your notes when the visit takes place. If using Microsoft Teams, you will receive an Outlook email invitation to attend the visit.

Supporting Documents:
- *Template script for obtaining verbal patient consent*
- *Registration and Scheduling Appointments in Meditech (coming soon)*

During a Virtual Care Visit (VCV)

- ☐ Have you adopted virtual etiquette in your services? Examples include camera at eye level, confidential and quiet environments, badges visible to patient, removing visual distractions behind clinicians, and being punctual for appointments with patient.
- ☐ Advise the patient that the visit is in a privacy-protective setting. If applicable, identify anyone else who is present on your side of the call, and explain why they are there.
- ☐ Confirm the patient's identity by asking them to state their name and date of birth (i.e., two person-specific identifiers), and compare this to the patient chart.
- ☐ Obtain/document the patient's consent for participation in virtual care at the start of the VCV
- ☐ Did you confirm that no one else is with the patient whom they don't wish to be present during the visit?
- ☐ Did you provide patients information on their rights and responsibilities regarding VCV?

☐ Are the appropriate resources and information provided to patients to promote and enable self-management?

☐ Are you answering final questions and clarifying instructions before closing the session?

Documentation Requirements (for telephone or video visits):

In addition to standard documentation about the care provided, please also document **informed consent discussion(s)** regarding the virtual visit in your note. Below is some standard text, approved by the Ontario Medical Association, that can be added to clinical notes documenting a virtual care visit (telephone or video-conference):

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

Virtual Care Visits can be documented in Meditech through either of the following ways:

- Physician documentation (pdoc)
- Voice-recognition dictation (aka front-end dictation, Fluency Direct, microphone dictation)
  - o Note: you need to be trained to use this technology and workflow; not avail. offsite
- Telephone dictation (least preferred method)

After a Virtual Care Visit (VCV)

☐ In the event of a transition of care after the VCV, has all relevant clinical information been communicated to the patient and receiving clinical team in a timely way?

VCVs are scheduled, registered and "opened" in Meditech on the assumption that the visit will take place. If you are unable to reach the patient, or the visit does not take place for any other reason (e.g. patient decides to withdraw consent), please do the following:

1. Document a note on the visit, indicating that the visit did not take place / was cancelled, and provide the reason
2. Contact staff in the clinic by Southlake secure email or telephone, to inform them that the visit did not take place. If needed, provide information for rescheduling, including desired time, and type of visit (telephone, videoconference, or in person).

Virtual Care Billing Resources:

- OHIP temporary billing schedule (K-codes) for virtual care services
- OHIP billing & technical guidance for virtual services
- Expanding OHIP coverage for uninsured patients