

# Telehealth Toolkit Residential Aged Care Facilities

This toolkit has been developed by Country to Coast, Queensland as part of Telehealth Grants for Residential Aged Care Facilities program, funded by the Department of Health and Aged Care



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### Introduction

County to Coast QLD (CCQ) has developed this resource toolkit to assist residential aged care facilities to commence conducting Telehealth Consultations for their residents. The promotion and sponsorship for these telehealth services is an initiative of the Department of Health and Aged Care.

Telehealth consultations allow residents of the Residential Aged Care Facility (the facility) with timely access to GPs and other health professionals rather than travelling to or waiting for an inperson visit or appointment.

The resources contained within the toolkit are purposefully broad, for facilities to adapt to their specific needs during the early implementation and longer-term maintenance of telehealth services. The majority of templates include reasonable detail for tailoring, where others are much less defined.

The toolkit is a practical resource for facility staff to refer to and use and may be beneficial for gaining a better understanding of telehealth services. The resources will be complemented by CCQ providing linkages to education provided by appropriate telehealth software vendors.

Each resource presented within the toolkit has a cover page with the name of the resource, a description, and its purpose. Lists of sources and links to further information are also provided. In the first resource these lists are given with each procedure, for others the lists are on the cover page. This additional information is recommended for facilities to access when adapting and developing their own resource.

**Disclaimer:** The content and templates provided in this toolkit are for guiding information purposes only. The intention of the resources is for facilities to make use of those that apply, when introducing and commencing telehealth services. Facilities are to consider, tailor, and develop their own unique range of materials based on their needs. The resources in the toolkit are not a substitute for professional care or legal advice.



# Guide to creating Telehealth Policy & Procedures

Resource Number	1.0
Resource Name	Guide to creating Telehealth Policy and Procedures
Description	This template is a foundational resource targeted at supporting the facility towards developing and implementing organisational processes, policies and procedures that guide the effective use of telehealth.
	Telehealth consultations are a service using an interactive audio and video telecommunications system that permits real-time communication between a clinician at another site and a resident at the facility.
	The example policy and procedures within this template are for Residential Aged Care Facilities to use the as a starting place, to discuss, explore and customize for their individual situations and set-ups.
Purpose	Incorporating telehealth into everyday work is a notable change from traditional practice. It impacts staff scheduling, Information Technology systems, workflows, and relationships with external clinicians, as well as necessitating additional staff training.
	This is a template for creating a telehealth policy and procedures resource for Residential Aged Care Facilities.
	The process of developing and defining procedures by the organisation should be undertaken whilst introducing and implementing and working towards telehealth consultations becoming normal practice.
Resource Guides	A listed selection of numbered and cross-referenced guidelines and toolkit resources aimed at supporting the development of individual procedures, provide supplementary information as appropriate. Source documents and additional online resources are presented in alphabetical order.
Date Stamp	6 June 2023



# **Policy & Procedures**

Policy – Telehealth Consultation			
Example Policy	The policy at <i>[insert RACF Residential Aged Care Facility]</i> is to provide telehealth consultations as an option for health care service delivery to enhance access in ways that are convenient, safe, and equitable for our residents.		
	Clinical personnel will offer residents in need of care by an external health care professional a telehealth consultation that meets the standards outlined in the following procedures.		
Procedure Ref No.	Example Procedure	Procedure Description	
TH01	Quality and Standards – Telehealth Equipment and Privacy	Manage consultation in accordance with best practice clinical standards and models of care.	
TH02	Resident Selection and Clinical Appropriateness – Telehealth Consult	Facilitate screening of resident against an agreed set of governance criteria to confirm safety and appropriateness for telehealth.	
тноз	Informed Consent – Telehealth Consult	Ensure the resident (and family) understand what telehealth is, are given the opportunity to ask questions, and agree to proceed.	
ТН04	Scheduling a Telehealth ConsultationConsultation is scheduled in collaboration with the external provider and is communicated to others as required.		
TH05	IT Support – Connection, Equipment &Facilitates regular maintenance of equipment and system updates, and a troubleshooting guide for staff.		
TH06	Telehealth PhysicalTo replicate as closely as possible to an in- person consultation, relating to safe health care, privacy, and efficiency.		
ТН07	Telehealth Communications & Privacy	Ensure that required resident information shared between providers enables safe appropriate clinical assessment and care, in accordance with relevant privacy standards.	
TH08	Conducting a Telehealth Consultation	Facilitate a telehealth session, which is timely, convenient, and safe whilst maintaining the same practice standards for a consultation delivered in person.	

Telehealth Toolkit for Residential Aged Care Facility



Telehealth Example Procedure – Quality and Standards		
Procedure Ref. Number	TH01	
Example Procedure Name	Quality and Standards – Telehealth Equipment and Pri	vacy
Reason for this procedure	To describe the standards for implementing telehealth mo whilst ensuring effective and safe delivery of health care to	
Example Procedure		Refer To
<ul> <li>Australian regulations a</li> <li>2. Equipment, software, approved guidelines.</li> <li>3. The software used by the telehealth video consult</li> <li>4. The facility has consult organisations to ensure</li> <li>5. The software is confirm healthcare professionals</li> <li>6. The systems and processionals</li> </ul>	and communications networks are installed according to he facility is <b>designed specifically</b> and has functionality for ations. Ited appropriately with other participating health care they meet Australian standards. ned as <b>compatible</b> with the systems used by participating	
Effective Date	<ul> <li>ii. Australian Medical Association <u>10 Minimum Standards for</u></li> <li>iii. Australian Telehealth Society <u>Guidelines for developing for services</u></li> <li>iv. Digital Health, <u>Information for healthcare providers</u></li> <li>v. End of Life Directions for Aged Care (ELDAC) <u>Becoming of manual for aged care services</u></li> <li>vi. Health Consumers Queensland, <u>Queensland Digital Heal Charter</u></li> <li>vii. Health Direct, <u>Introducing video telehealth to your aged</u></li> <li>viii. International Organisation for Standardization, 2021, <u>ISC Health Informatics</u> — <u>Telehealth Services</u> — <u>Quality Plan</u></li> <li>ix. The Medical Board of Australia <u>Guidelines for technolog</u></li> <li><u>consultations</u></li> <li>x. The Royal Australasian College of Physicians <u>Telehealth Office of the Chief Allied Health Office Services</u></li> <li>xi. Queensland Health, Office of the Chief Allied Health Office Services (Service)</li> </ul>	telehealth digitally ready a lth Consumer care service D 13131:2021 ming Guidelines y-based Guidelines and
Effective Date Replaces Procedure	<i>[insert start date]</i> New Procedure	
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Telehealth Example Procedure – Selection & Appropriateness		
TH02		
Resident Selection and Clinical Appropriateness – Tele	health Consult	
appropriate care and treatment decision for a person with a condition (Allied Health Professions Australia (AHPA), 20	a specific clinical 020). The AHPA	
	Refer To	
clinical staff at the facility in collaboration with the health I governance responsibility where relevant, will determine teness for a telehealth consultation.	Procedure Guideline <b>TH02E</b>	
<b>Ith and clinical prioritisation</b> , current version will be used cility when determining selection and appropriateness for th and clinical prioritisation' document is supplementary to doe developed by the facility, requiring regular review.	Annexure TH02A Procedure Guideline TH02	
<ul> <li>A range of clinical and non-clinical factors will be considered by staff, including adapting to the unique needs of the resident, when determining suitability of a resident for telehealth.</li> <li>This 'range of clinical and non-clinical factors' is an additional supplementary document (or sub-division) to this procedure, to be developed by the facility.</li> </ul>		
or if the resident needs emergency services, the same hould be followed as was in place prior to the launch of		
ard outpatient appointment with a known Specialist, and nealth consultations, residents may utilise the telehealth		
	be developed by	
[Insert copy of Range of Clinical and Non-Clinical Factors for Cons	sideration to be	
Procedure Guideline TH02C       Depending on the resident's situation, some example health conditions that the facility may decide as criteria and prioritisation for telehealth consultation, may include: <ul> <li>Residents needing urgent pain relief, wounds review or falls management.</li> <li>Residents with immunocompromised conditions or weakened immune system.</li> <li>Residents with a debilitating illness where travel is not advised, such as frailty.</li> <li>Residents receiving palliative or end of life care.</li> <li>Residents requiring monitoring or care planning for their mental health or chronic disease.</li> </ul> <li>Page</li>		
	<ul> <li>TH02</li> <li>Resident Selection and Clinical Appropriateness - Telef</li> <li>Clinical appropriateness assists health care providers to appropriate care and treatment decision for a person with a condition (Allied Health Professions Australia (AHPA), 20 guide suggests clinical, quality, safety, and practical factors when assessing suitability for telehealth.</li> <li>Clinical staff at the facility in collaboration with the health al governance responsibility where relevant, will determine teness for a telehealth consultation.</li> <li>If th and clinical prioritisation, current version will be used clility when determining selection and appropriateness for the developed by the facility, requiring regular review.</li> <li>mon-clinical factors will be considered by staff, including needs of the resident, when determining suitability of a and non-clinical factors' is an additional supplementary to this procedure, to be developed by the facility.</li> <li>or if the resident needs emergency services, the same hould be followed as was in place prior to the launch of the facility here]. See Procedure Guideline TH02C.</li> <li>(Insert copy of Criteria for telehealth and clinical Factors for Come developed by the facility here]. See Procedure Guideline TH02D.</li> <li>Depending on the resident's situation, some example here that the facility may decide as criteria and prioritisation to management.</li> <li>Residents with a meunocompromised conditions immune system.</li> <li>Residents with a debilitating illness where travel is no as frailty.</li> <li>Residents receiving palliative or end of life care.</li> <li>Residents receiving palliative or end of life care.</li> <li>Residents receiving monitoring or care planning for health or chronic disease.</li> </ul>	

Telehealth Toolkit for Residential Aged Care Facility



Procedure Ref Number TH02 Continued		
Procedure Guideline TH02D	<ul> <li>Depending on the resident's situation some examples of clinical and non- clinical factors the facility may decide as suitable for telehealth consultation, may include: <ul> <li>The level of physical assessment required.</li> <li>If the resident's clinical needs can be met through a telehealth consultation.</li> <li>The resident's willingness and ability to participate, including any physical, mental, cultural, social, and cognitive barriers.</li> <li>Availability of personnel and other support to conduct the consult.</li> <li>Availability and access to technology, including internet connection, devices, software.</li> <li>An appropriate physical environment is available.</li> </ul> </li> </ul>	
Procedure Guideline TH02E	<ul> <li>An appropriate physical environment is available.</li> <li>The following resources may support the development of a resident selection and clinical appropriateness procedure, specific to the facility:         <ol> <li>Allied Health Professions Australia (AHPA), <u>Telehealth Guide for Allied Health Professionals</u></li> <li>Indications for a video consultation, written by Dr Andrew Baird, access from <u>Health Direct Video Call Resource Centre</u></li> <li>Queensland Health have developed a range of clinical practice <u>Telehealth Guides</u> including cancer, dementia, pain management, diabetes, respiratory, stroke, dysphagia, and others.</li> <li>RACGP <u>Guide to providing telephone and video consultations</u>, when to use telephone or video consultation, page 2.</li> </ol> </li> </ul>	
Effective Date	[insert start date]	
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Dated		
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Tele	health Example Procedure – Consent	
Procedure Ref. Number	ТН03	
Example Procedure Name	Informed Consent – Telehealth Consult	
Reason for this procedure	<ol> <li>To describe the actions required to ensure a resident ha consultation is fully informed, including understanding both the risks of the service.</li> <li>To document a resident's agreement to the delivery consultation. To obtain a resident' signature, or if applicable resident's representative, to verify consent.</li> </ol>	the benefits and of a telehealth
Example Procedure		Refer To
given. This is to be d	treatment by the resident or their representative, must be emonstrated by that person's signature on a Telehealth the delivery of the telehealth service	Procedure Guideline <b>TH03C</b>
<ul> <li>telehealth services in t</li> <li>a) Verbal explanation</li> <li>b) Consumer-friendly what it entails.</li> <li>c) Opportunity to read offered choices consultation.</li> <li>e) The right to declination.</li> <li>f) Advised that they consultations at a not affect their rigg</li> <li>g) Given an opporture consultation with</li> <li>3. Additional consent is</li> </ul>	<b>Sident</b> or their representative, in relation to the use of the management of their care, includes: In of the consequences, benefits, and risks. By, easy to understand written description of telehealth and ad prepared written material and the Consent Form. about the healthcare they receive via phone or video the the use of telehealth services. By can change their mind and stop using phone or video my time, including in the middle of a consult; and that it will with to ask for and receive healthcare. Unity to discuss and ask questions about the telehealth clinical staff. to be obtained and documented if there is a likelihood that rideo consultation is to be recorded or that images will be	Annexures • TH03A • TH03B
4. The Telehealth Conse	ent Form is to be signed correctly and recorded as per the	
facility's process for do Annexure TH03A	cumenting consent. [Insert copy of Telehealth Consent Form here]	
Annexure TH03B	[Insert copy of Telehealth Information Brochure here]	
Procedure Guideline TH03C	<ul> <li>The following resources may support the development of a consenting p your facility:         <ol> <li>Australian Commission on Safety and Quality in Health Care, <u>Au Health Care Rights</u></li> <li>Queensland Health, <u>What is Informed Consent</u></li> <li>The Office of Advance Care Planning Queensland - <u>Consent</u></li> </ol> </li> </ul>	
Effective Date	[insert start date]	
Replaces Procedure Dated	New Procedure	
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	r Residential Aged Care Facility	Page   9



Telehealth Example Procedure – Scheduling			
Procedure Ref. Number	TH04		
Example Procedure Name	Scheduling a Telehealth Consultation		
Reason for this procedure	Define the requirements for scheduling a telehealth app staff, and for the external provider concerned.	ointment by facility	
Example Procedure		Refer To	
-	<b>provider(s)</b> to find a suitable date and time for the , based on the availability of clinicians.		
2. The <b>assigned timing</b> for for the health care revie	the telehealth consultation is consistent with the reason ew.		
scheduled with more th			
appropriate, about the	and the resident's family or representative where scheduled telehealth appointment.		
the day prior to the sch	nd their family or representative where appropriate on eduled telehealth consultation.		
family or representativ	<ul> <li>6. Telehealth Brochure and verbal information is provided to the resident and their family or representative. The procedure for obtaining consent prior to the scheduled appointment is facilitated by facility staff.</li> <li>Annexure TH04A</li> <li>Procedure Ref No</li> <li>TH03</li> </ul>		
	<b>ne</b> with external provider is attended on the day of the , at approximately one hour prior. Adjust if necessary.		
	are used by the facility to develop site specific scheduling ence to minimise errors and increase efficiencies.	Procedure Guideline <b>TH04C</b> Annexure <b>TH04B</b>	
Annexure TH04A	[Insert copy of Telehealth Information Brochure here]		
Annexure TH04B	[Insert copy of Coordinating a Telehealth Consultation Cl	hecklist here]	
Procedure Guideline TH04C			
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Approved by			
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Telehealth Example Procedure – Technology		
Procedure Ref. Number	TH05	
Example Procedure Name	IT Support – Connection, Equipment & Troubleshooting	
Reason for this procedure	To ensure telehealth technology is fully functional and secure technical difficulties are handled in a timely manner.	re and ensure that
Example Procedure		Refer To
<ol> <li>The purchase and main recognised guidelines an</li> </ol>	<b>tenance</b> of telehealth equipment by the facility is in line with d systems.	Procedure Guideline <b>TH05E</b>
2. Telehealth equipment i	s stored in a dedicated location <i>[insert location here]</i> .	
	<b>nsible</b> for maintaining telehealth equipment including esponding to the service register is assigned by the facility.	Annexure <b>TH05A</b>
	ne person responsible for maintaining telehealth equipment icated equipment location.	
	ices are available during the times the equipment will be	
to facility staff. <i>The na</i>	<b>nical assistance</b> , name and contact information is available one and contact information for network level technical t the specified dedicated location.	Annexure <b>TH05B</b>
7. Troubleshooting guide		
	nology problems during a consultation involves facility staff e number of the external clinical provider available.	
external clinical provider	<b>s</b> emerge mid-session, facility staff should telephone the to either continue the session by phone or reschedule the ned by the clinical situation.	
10. A Register of Telehealth	<b>Consultations</b> is to be maintained. <i>The dedicated telehealth location.</i>	Annexure <b>TH05D</b>
Annexure TH05A	[Insert copy of Telehealth Platforms and Software User Guid	de here]
Annexure TH05B	[Insert copy of Telehealth Technology Support Template her	re]
Annexure TH05C	[Insert copy of Troubleshooting Guide here]	
Annexure TH05D	[Insert copy of Register of Telehealth Consultations here]	
Procedure Guidelines TH05E	<ul> <li>The following resources may support the development of an IT support procedure specific to your facility: <ol> <li>Allied Health Professions Australia (AHPA), <u>Telehealth Guide for Allied Health Professionals</u>, page 10.</li> <li>Australian College of Rural and Remote Medicine (ACRRM), <u>Framework and Guidelines for Telehealth Services</u>, page 8.</li> <li>Health Direct Video Call Resource Centre, <u>Technical requirements for video call</u> and <u>RACF Technology and Troubleshooting</u></li> </ol></li></ul>	
Effective Date	[insert start date]	
Replaces Procedure Dated	New Procedure	
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Procedure Ref. Number         TH06           Example Procedure Name         Telehealth Physical Surroundings and Room Set-Up           Reason for this procedure         To ensure services provided via telehealth are safe, confidential, and efficient and will meet or exceed the quality of care provided in an in-person setting.           Example Procedure         Refer To           1. Model of telehealth care options for residents is determined by the facility or more residents own room, in consideration of privacy and appropriateness.         Procedure Guideling TH06E           2. Telehealth Consultation Checklist is developed by the facility or staff reference. All and available by facility staff prior to the commencement of the telehealth consultation.         Annexure TH06A           3. Allocated telehealth room for the consult will be checked to ensure it is safe, private, and available by facility staff prior to the commencement of the telehealth consultation.         Annexure TH06A           4. Additional seating may be needed if the resident's family or representatives are accompanying them during the consult.         More recording as a prive and available for resident staff approprive.           7. Time to ask questions is made available for residents and family.         Annexure TH06B           8. Telehealth equipment is checked by staff to ensure it is working properly, including an acceptable volume for both the external provider and resident.         Annexure TH06B           9. Telehealth equipment will be facilitated by facility staff before the consult begins.         Annexure TH06B           10.	Telehealth Example Procedure – Physical Set-Up			
Name         Construction of this procedure         To ensure services provided via telehealth are safe, confidential, and efficient and will meet or exceed the quality of care provided in an in-person setting.           Example Procedure         Refer To           1. Model of telehealth care options for residents is determined by the facility using recognised guidelines. These may involve a designated telehealth consult room or residents own room, in consideration of privacy and appropriateness.         Procedure Guideline THO6A           2. Telehealth consultation Checklist is developed by the facility for staff reference. All aspects of the checklist relating to before, during, and after the consultation are followed to minimise errors and increase efficiencies.         Annexure THO6A           3. Allocated telehealth room for the consult will be checked to ensure it is safe, private, and available by facility staff prior to the commencement of the telehealth consultation.         Annexure THO6A           5. Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including secort to the designated room as needed.         Annexure THO6B           6. For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.         Annexure THO6B           7. Time to ask questions is made available for residents and family.         Annexure THO6B           8. Telehealth equipment will be setup to achieve a positive resident-provider relationship.         Annexure THO6B           <			TH06	
procedure       and efficient and will meet or exceed the quality of care provided in an in-person setting.         Example Procedure       Refer To         1. Model of telehealth care options for residents is determined by the facility using residents own room, in consideration of privacy and appropriateness.       Procedure Guideline, These may involve a designated telehealth consult room or residents own room, in consideration of privacy and appropriateness.       Procedure Guideline, TH06E         2. Telehealth Consultation Checklist is developed by the facility for staff reference. All aspects of the checklist relating to before, during, and after the consultation are followed to minimise errors and increase efficiencies.       Annexure TH06A         3. Allocated telehealth room for the consult will be checked to ensure it is safe, private, and available by facility staff prior to the commencement of the telehealth consultation.       Additional seating may be needed if the resident's family or representatives are accompanying them during the consult.       Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including escort to the designated room as needed.       Annexure TH06B         6. For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.       Annexure TH06B         7. Time to ask questions is made available for residents and family.       Annexure TH06B         8. Telehealth equipment will be setup to achieve a positive resident-provider relationship.       Annexure TH06B	-	ure	Telehealth Physical Surroundings and Roc	om Set-Up
1. Model of telehealth care options for residents is determined by the facility using recognised guidelines. These may involve a designated telehealth consult room or residents own room, in consideration of privacy and appropriateness.       Procedure Guideline THOGE         2. Telehealth Consultation Checklist is developed by the facility for staff reference. All aspects of the checklist relating to before, during, and after the consultation are followed to minimise errors and increase efficiencies.       Annexure THOGA         3. Allocated telehealth room for the consult will be checked to ensure it is safe, private, and available by facility staff prior to the commencement of the telehealth consultation.       Additional seating may be needed if the resident's family or representatives are accompanying them during the consult.         5. Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including escort to the designated room as needed.       Annexure THOGB         6. For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.       Annexure THOGB         7. Time to ask questions is made available for residents and family.       Annexure THOGB         8. Telehealth equipment will be setup to achieve a positive resident—provider relationship.       Annexure THOGB         10. Introductions will be facilitated by facility staff before the consult begins.       Annexure THOGD         11. Permission by the resident's privacy is to be maintained at all times. Once all parties are in the consult			and efficient and will meet or exceed the quality	
recognised guidelines. These may involve a designated telehealth consult room or residents own room, in consideration of privacy and appropriateness.       TH6E         2. Telehealth Consultation Checklist is developed by the facility for staff reference. All aspects of the checklist relating to before, during, and after the consultation are followed to minimise errors and increase efficiencies.       Annexure TH06A         3. Allocated telehealth room for the consult will be checked to ensure it is safe, private, and available by facility staff prior to the commencement of the telehealth consultation.       Additional seating may be needed if the resident's family or representatives are accompanying them during the consult.         5. Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including escort to the designated room as needed.       Annexure TH06B         6. For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.       Annexure TH06B         7. Time to ask questions is made available for residents and family.       Annexure TH06B         8. Telehealth equipment is checked by facility staff to ensure it is working properly, including an acceptable volume for both the external provider and resident.       Annexure TH06B         9. Telehealth equipment will be setup to achieve a positive resident-provider relationship.       Annexure TH06D         10. Introductions will be facilitated by facility staff before the consult begins.       Annexure TH06D	Example Proced	ure		Refer To
aspects of the checklist relating to before, during, and after the consultation are followed to minimise errors and increase efficiencies.         3. Allocated telehealth room for the consult will be checked to ensure it is safe, private, and available by facility staff prior to the commencement of the telehealth consultation.         4. Additional seating may be needed if the resident's family or representatives are accompanying them during the consult.         5. Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including escort to the designated room as needed.         6. For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.         7. Time to ask questions is made available for residents and family.         8. Telehealth equipment is checked by staff to ensure it is working properly, including an acceptable volume for both the external provider and resident.         9. Telehealth equipment will be setup to achieve a positive resident–provider relationship.         10. Introductions will be facilitated by facility staff before the consult begins.         11. Permission by the resident to have any other person in the room during the consult acoust is to be facilitated by facility staff. If the resident declines, the person must leave.         12. Protection of the resident's privacy is to be maintained at all times. Once all parties are in the consult ation is to replicate as closely as possible the way the provider examines residents in a traditional, in-person situation. Position the monitor so the pro	recognised guid	delines. Th	nese may involve a designated telehealth consult room or	Procedure Guideline <b>TH06E</b>
and available by facility staff prior to the commencement of the telehealth consultation.         4. Additional seating may be needed if the resident's family or representatives are accompanying them during the consult.         5. Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including escort to the designated room as needed.         6. For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.         7. Time to ask questions is made available for residents and family.         8. Telehealth equipment is checked by staff to ensure it is working properly, including an acceptable volume for both the external provider and resident.         9. Telehealth equipment will be setup to achieve a positive resident–provider relationship.         10. Introductions will be facilitated by facility staff before the consult begins.         11. Permission by the resident to have any other person in the room during the consultation (at both ends) is to be facilitated by facility staff. If the resident declines, the person must leave.         12. Protection of the resident's privacy is to be maintained at all times. Once all parties are in the consult room, an occupied sign is placed on the room door so others will know not to enter the room. Inadvertent interruptions are to be avoided.         13. Telehealth consultation is to replicate as closely as possible the way the provider examines residents in a traditional, in-person situation. Position the monitor so the provider can view and effectively observe the resident throug	aspects of the followed to min	checklist imise erro	relating to before, during, and after the consultation are ors and increase efficiencies.	Annexure <b>TH06A</b>
accompanying them during the consult.         5.       Preparation of resident will be assisted by facility staff to support their comfort and clinical needs, including escort to the designated room as needed.         6.       For resident's first experience with telehealth, facility staff explains how the system works, emphasising confidentiality and compliance with relevant standards. Include advice about audio or video recording as it applies.         7.       Time to ask questions is made available for residents and family.         8.       Telehealth equipment is checked by staff to ensure it is working properly, including an acceptable volume for both the external provider and resident.         9.       Telehealth equipment will be setup to achieve a positive resident–provider relationship.         10.       Introductions will be facilitated by facility staff before the consult begins.         11.       Permission by the resident to have any other person in the room during the consultation (at both ends) is to be facilitated by facility staff. If the resident declines, the person must leave.         12.       Protection of the resident's privacy is to be maintained at all times. Once all parties are in the consult room, an occupied sign is placed on the room door so others will know not to enter the room. Inadvertent interruptions are to be avoided.         13.       Telehealth consultation is to replicate as closely as possible the way the provider examines residents in a traditional, in-person situation. Position the monitor so the provider can view and effectively observe the resident throughout the consult.         14.       Fe	and available			
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	14. <b>Feedback que</b> residents, their	<b>stionnair</b> represent	es developed by the facility should be distributed to	Annexure <b>TH06C</b>
	_	<u> </u>	1 of 2	<u> </u>



Procedure Ref Number TH06 Continued		
Annexure TH06A	[Insert copy of Coordinating a Telehealth Consultation Checklist here]	
Annexure TH06B	[Insert copy of Troubleshooting Guide here]	
Annexure TH06C	[Insert copy of Consumer Feedback Question Guide here]	
Annexure TH06D	[Insert copy of "Do Not Disturb" sign here]	
Procedure Guideline TH06E	<ul> <li>The following resources may support the development of a physical set- up procedure specific to your facility:         <ol> <li>Australian College of Rural and Remote Medicine (ACRRM), <u>Framework and Guidelines for Telehealth Services</u></li> <li>Health Direct, <u>Video Call Resource Centre</u> and <u>Aged Care Clinic</u> Administration</li> </ol> </li> </ul>	
Effective Date	[insert start date]	
Replaces Procedure Dated	New Procedure	
Approved by Page	2 of 2	



Telehealth Example Procedure – Communications & Privacy			
Procedure Ref. Number	ТН07		
Example Procedure Name	Telehealth Communications & Privacy		
Reason for this procedure	To promote the telehealth service and ensure information is shared in a timely manner betweer external clinical provider, to enhance resident safety a	n facility staff and	
Example Procedure		Refer To	
	vithin the facility, using existing mechanisms, such as scussions with residents and family, and promotional	Annexure <b>TH07A</b>	
disclosure of resident	<b>privacy principles</b> to ensure collection, use and information including fulfilling duty of confidentiality. h the policy of the facility.		
	3. <b>Comply with relevant privacy obligations</b> when delivering telehealth Procedure services in line with the policy of the facility. Guideline <b>TH07DTH07B</b>		
4. <b>Access to the external clinical provider</b> by direct telephone line is available for facility staff, for questions about treatment and care or any other issues about the resident. The external clinician's direct/personal number is not given to residents.			
the external clinician following the consultat This is to ensure qualit the resident's privacy a <i>Insert the nam</i> <i>A supplementa</i>	y and continuity of care whilst balancing the need for	Annexure <b>TH07B</b> Procedure Guideline <b>TH07C</b>	
6. <b>Document notes</b> relating the telehealth consultation in the resident's clinical file and attend clinical handover according to standard facility procedure.			
Annexure TH07A	[Insert copy of telehealth promotion flyer here]		
Annexure TH07B	[Insert copy of Sharing of Information Guide to be facility here]. See Procedure Guideline TH07C.	developed by the	
Page	1 of 2		



Procedure Ref Number TH07 Continued					
Procedure Guidelines TH07C	A Sharing of Information Guide is aimed at balancing the benefits of exchanging resident information with the need for protection of privacy and confidentiality.				
	<ul> <li>Example types of information that might be shared securely with the provider prior to a consultation may comprise:</li> <li>a) Confirmation of the appointment date and time</li> <li>b) Reason for the telehealth consultation and resident's clinical information as applicable to the appointment, using ISBAR</li> <li>c) Details of who will be participating in the telehealth consultation i.e., resident family</li> </ul>				
	<ul> <li>Example types of information the provider might share securely with the facility following a consultation may comprise:</li> <li>a) Completed consultation summary note including diagnosis and treatments</li> <li>b) Changes to medications prescribed</li> <li>c) Actions that need to be coordinated by facility staff such as pathology, next appointment, or hospital transfer.</li> </ul>				
Procedure Guidelines	The following resources may support the development of telehealth				
TH07D	<ul> <li>ine following resources may support the development of telenealth communications and privacy procedure, specific to your facility: <ol> <li>The Australian Department of Health has created a <u>Privacy</u> <u>Checklist for Telehealth Services</u> to assist organisations with privacy compliance obligations when delivering telehealth services.</li> <li>The Australian Digital Health Agency have produced: <ol> <li><u>RACF Factsheet</u> - better access to healthcare information for facilities and residents</li> <li>Secure Messaging for health care providers</li> </ol> </li> <li>RACGP (Royal Australian College of General Practitioners), Aged care clinical guide (Silver Book part B), <u>Medical records at residential aged care facilities</u></li> </ol></li></ul>				
Effective Date	[insert start date]				
Replaces Procedure Dated	New Procedure				
Approved by					
Page	2 of 2				



Procedure Ref. Number	TH08		
Example Procedure     Conducting a Telehealth Consultation       Name     Conducting a Telehealth Consultation			
Reason for this procedureEnsure residents having a consultation with a health professional us video or telephone are offered an experience that closely replicates in-person healthcare visit.			
Example Procedure		Refer To	
	<b>practice standards</b> in conducting the telehealth equired for a visit with a health care professional	Procedure Re No: <b>TH01</b> Procedure Guideline <b>TH08G</b>	
using the facility specif a) Confirming reside b) Coordinating teleh c) Assessing the resi family and friends d) Ensuring the resi indicated consent		Procedure Re No: • TH02 • TH03 • TH04 • TH05 • TH06 • TH06 • TH07 Annexures: • TH08A • TH08B	
timeliness, convenien Procedures and Resou a) Using facility speci b) Familiarity with t support and troub	<b>ly support</b> the telehealth consultation to ensure ce, safety, and quality using the facility specific rces available, including: fic checklist to guide the telehealth consult relehealth platforms and software user guides, IT leshooting guide nt consenting processes	<ul> <li>TH08C</li> <li>Procedure Re</li> <li>No:</li> <li>TH03</li> <li>TH05</li> <li>Annexures:</li> <li>TH08A</li> <li>TH08D</li> </ul>	
Resources available, in a) Recording clinical b) Updating and atte	notes and handover nding resident's care plan ment in preparation for next use er of Consults	Annexures: • TH08E • TH08F	

Telehealth Toolkit for Residential Aged Care Facility



Procedure Ref Number TH08 Continued					
Annexure TH08A	[Insert copy of Checklist Template - Telehealth Consultation here]				
Annexure TH08B	[Insert copy of Telehealth Consultation Flowchart here]				
Annexure TH08C	[Insert copy of Complementary Services Template here]				
Annexure TH08D	[Insert copy of Platforms and Software Guides here]				
Annexure TH08E	[Insert copy of Register of Consultations here]				
Annexure TH08F	[Insert copy of Consumer Feedback Form here]				
Procedure Guideline TH08G	The following resources may support the development of a procedure to conduct a telehealth consultation specific to your facility:         i.       Australian College of Rural and Remote Medicine (ACRRM), Framework and Guidelines for Telehealth Services         ii.       Health Direct, Video Call Resource Centre         iii.       NBN Co., Create a positive telehealth experience for patients				
Effective Date	[insert start date]				
Replaces Procedure Dated	New Procedure				
Approved by					
Page	2 of 2				



### **Telehealth Promotion Flyer**

Resource Number	2.0		
Resource Name	Telehealth Promotion Flyer		
Description	This resource is to assist residents and their representatives to understand telehealth. It is a one-page flyer for display or hand-out.		
	The standalone Flyer is available to be downloaded and printed on the CCQ website via the pathway: 'What we do – Primary Health' > 'Primary Health Programs' > 'Older Persons Health' > 'Residential Aged Care Support' > 'Telehealth' OR link: <u>https://c2coast.org.au/oph-residential-aged-care-support/</u>		
Purpose	<ul> <li>This template flyer is a promotional visual display comprising example descriptions about:</li> <li>How telehealth works</li> <li>Why it works</li> <li>Questions to ask staff</li> <li>Privacy information</li> </ul>		
Date Stamp	6 June 2023		



# TELEHEALTH



Talk to a doctor or health professional, from a different location, using a phone, tablet or computer.

### How will it work?

phn

- 1 The nurse will make an appointment.
- A computer, tablet or phone will be set up to call the doctor or health professional.
- 3 The nurse or facility staff member will make the phone call and stay to help.
- Like a normal appointment, you can see and talk to the doctor or health professional.
- With your healthcare professional, next steps can be discussed and planned together.

### What are the benefits?

- Get health care when and where you need it.
- No need to travel.
- Faster appointment.
- Easier for family and carers.
- Relaxed way to see specialists and involve the GP.
- Great for simple check-ups or family meetings with the GP.
- Telehealth may not be suited to all appointments, all the time.

### Questions to ask staff

- How long will it take?
- Where and when will it be?
- What is the appointment for?
- Is my support person available?
- Is telehealth the best for me?

### Your privacy

- Australian standards protect your rights and privacy.
- The rules for telehealth are the same as a normal doctor visit.

Please note telehealth will not suit all appointments. Unsure if telehealth is for you? Read the question-and-answer sheet or ask the staff for more details.



# **Telehealth Pamphlet**

Resource Number	3.0	
Resource Name	Telehealth Pamphlet	
Description	This template is to assist residents and their representatives to understand telehealth.	
	The Pamphlet is a 2-sided trifold brochure providing information about telehealth in a question-and-answer format.	
	The standalone pamphlet is available to be downloaded and printed on the CCQ website via the pathway: 'What we do – Primary Health' > 'Primary Health Programs' > 'Older Persons Health' > 'Residential Aged Care Support' > 'Telehealth' <u>OR</u> link: <u>https://c2coast.org.au/oph-residential-aged-care-support/</u>	
PurposeIt is a resource for staff to discuss with and give to residents and their fa•Help explain how telehealth may be beneficial to them and,•An opportunity for them to ask questions and raise concerns.		
Date Stamp	6 June 2023	









Healthy, connected communities

### **Telehealth Consultation Checklist**

Resource Number	4.0			
Resource Name	Telehealth Consultation Checklist			
Description	This template checklist is to assist facilities with technical setup, use and optimisation of equipment and the consultation space.			
Purpose	This template checklist provides an example of five tables for facilities to adapt for their own situation in relation to how a telehealth consultation will operate and flow.			
	The template includes a column called 'location of process or guideline', to enable staff to locate additional materials pertaining to the procedure. In this column, the facility may record the additional file name and where it is kept. Examples are provided.			
	The tables in the consultation checklist include:			
	1. Arranging a telehealth consultation and general set-up			
	2. Before each consultation – room preparation			
	3. Before each consultation – resident preparation			
	4. During the consultation			
	5. After the consultation.			
	A copy of the resource developed for the facility should remain with the telehealth equipment, for staff to access easily.			
Resource Guide	The following resources are source documents for this checklist template, and may support the development of a consultation checklist specific to your facility:			
	<ul> <li>i. Allied Health Professionals Association - <u>Telehealth Guide for allied health professionals.</u></li> <li>ii. Australian College of Rural and Remote Medicine (ACRRM) <u>framework for telehealth and guidelines for telehealth services</u>.</li> <li>iii. Business NBN - <u>best practice telehealth set up</u>.</li> <li>iv. Department of Health - <u>Medicare Benefits Schedule Online privacy checklist for telehealth services</u>.</li> </ul>			
Date Stamp	6 June 2023			



### **Telehealth Consultation Checklist**

	Arranging a Telehealth Consultation	Location of Process/Guideline
	Review the facility's <b>protocols</b>	Example:
	(e.g., clinical needs, appointments, equipment)	Policy and Procedures (P&P)
	Check the facility's <b>resources</b>	
	(e.g., contact list, resident information)	
	Confirm <b>appropriateness</b> of telehealth consultation for resident on this occasion	Example: P&P Manual Procedure Number <b>TH02</b>
	<b>Schedule</b> an appointment with provider, advise resident & support people	
	Establish the <b>best location</b> for the consultation <i>(e.g., quiet &amp; private room)</i>	
	Arrange technology and IT support	
	(e.g., people and equipment, before & during)	
	Arrange dedicated <b>Nursing cover</b>	
	(For before and during the appointment)	
	Resident has <b>information</b> about telehealth	Example: Telehealth Pamphlet,
	(e.g., time, consent, support people)	Resource Number 3.0
	The <b>special needs</b> of the resident have been considered	
	(e.g., supports for people who are deaf, where English is a second	
	language, or they identify as Aboriginal and/or Torres Strait Islander)	
	<b>Document</b> arrangements and general setup undertaken, as per facility process	
~	Before each consultation – <i>Room Preparation</i>	Location of Process/Guideline
	Confirm <b>appointment</b> with doctor and relevant others	
1 1		
	Collect <b>telehealth equipment</b>	
	Collect <b>telehealth equipment</b>	
	Collect <b>telehealth equipment</b> (e.g., have tested & tagged equipment, in the room, and turned on)	
	Collect <b>telehealth equipment</b> (e.g., have tested & tagged equipment, in the room, and turned on) <b>Pre-test Equipment</b>	
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	Collect <b>telehealth equipment</b> ( <i>e.g., have tested &amp; tagged equipment, in the room, and turned on</i> ) <b>Pre-test Equipment</b> ( <i>e.g., check all connections &amp; parts work</i> ) Check <b>Field of view</b> ( <i>e.g., position the screen for comfort &amp; eye contact</i> ) Check <b>Lighting</b> in room ( <i>e.g., room is bright with minimal shadows</i> ) Check <b>Sound and Speech</b> ( <i>e.g., adjust speaker volume, explain microphone</i> ) Collect & prepare <b>clinical records</b> ( <i>e.g., observations, test results</i> ) Collect required <b>clinical equipment</b>	
	Collect telehealth equipment(e.g., have tested & tagged equipment, in the room, and turned on)Pre-test Equipment(e.g., check all connections & parts work)Check Field of view(e.g., position the screen for comfort & eye contact)Check Lighting in room(e.g., room is bright with minimal shadows)Check Sound and Speech(e.g., adjust speaker volume, explain microphone)Collect & prepare clinical records(e.g., observations, test results)Collect required clinical equipment(e.g., dressing packs)Prepare for technology failure(e.g., mobile phone back-up, IT ready, tip sheet, contingency plan)	
	Collect <b>telehealth equipment</b> ( <i>e.g., have tested &amp; tagged equipment, in the room, and turned on</i> ) <b>Pre-test Equipment</b> ( <i>e.g., check all connections &amp; parts work</i> ) Check <b>Field of view</b> ( <i>e.g., position the screen for comfort &amp; eye contact</i> ) Check <b>Lighting</b> in room ( <i>e.g., room is bright with minimal shadows</i> ) Check <b>Sound and Speech</b> ( <i>e.g., adjust speaker volume, explain microphone</i> ) Collect & prepare <b>clinical records</b> ( <i>e.g., observations, test results</i> ) Collect required <b>clinical equipment</b> ( <i>e.g., dressing packs</i> ) Prepare for <b>technology failure</b>	

Continued...



✓	Before each consultation – <i>Resident Preparation</i>	Location of Process/Guideline
	Ensure resident's <b>privacy &amp; dignity</b> is maintained during the consult ( <i>e.g., 2-piece outfit, screen, gown, or cover sheet for examination</i> )	
	Consider resident <b>comfort</b>	
	(e.g., position monitor, chair, speaker, microphone, support people	
	Minimise <b>distractions &amp; background noise</b> ( <i>e.g., turn phones off, close blinds)</i>	
1	During the consultation	Location of Process/Guideline
	Introduce everyone at the beginning of the consultation	
	Confirm <b>Reason for consult</b> , right doctor, right resident, right health record	
	Confirm <b>identity</b> by asking resident to state their name, address, and Date of Birth	
	Confirm resident's <b>consent</b> to participate including others in attendance	
	Session recording should be disabled. Where this is a requirement, permission to record a video conference from everyone on the call is needed.	
	Confirm steps have been taken to maintain resident's <b>privacy</b>	
	Confirm resident's <b>comfort</b> , including that they can see and hear	
	Ask everyone to <b>speak clearly</b> into the microphone using normal tone and one person to speak at a time	
	Support <b>clinical needs</b> - ISBAR handover, discussion, assist assessment, examination & care planning	
✓	After the consultation	Location of Process/Guideline
	Manage <b>follow-up</b> by documenting and finalising notes, clinical handover, and delegating actions i.e., scripts, pathology, next appointment, and written orders pending	
	<b>Debrief</b> with resident by asking how they found the consult or if they have any questions	
	Ask resident and family for <b>feedback</b> about their experience	
	Return equipment to secure designated area	
	Complete consultation details in <b>telehealth consultation register</b>	
	Maintain Equipment by ensuring re-charged, cleaned and ready for use	



### **Telehealth Consult Flowchart**

Resource Number	5.0	
Resource Name	Telehealth Consultation Flowchart	
Description	This template flowchart is to assist facilities with technical setup, use and optimisation of equipment and consultation space.	
Purpose	This template flowchart provides an example of the steps to conducting a telehealth consultation. It is for facilities to adapt for their own situation in relation to how a telehealth consultation will flow.	
	The flowchart is a visual depiction of similar information described in the Telehealth Consultation Checklist, Resource Number 4.0.	
It includes:		
	<ul> <li>How to arrange and prepare for the consult</li> <li>What to do on the day, during and after the consultation.</li> </ul>	
Date Stamp	6 June 2023	



#### **RESIDENT REQUIRES A CLINICAL REVIEW**

□ Review the facility's telehealth **protocols** □ Check the facility's telehealth **resources** 

#### CONFIRM APPROPRIATENESS OF TELEHEALTH APPOINTMENT

□ The resident's **clinical need** is appropriate for a telehealth consult per protocol □ The **tools and equipment** are available

- □ Staff are available
- □ Appropriate **consent** obtained

#### DISCUSS MODE OF APPOINTMENT WITH RESIDENT AND FAMILY

□ Resident and family are given telehealth information (verbal and written)

- $\Box$  Resident and family **understands** what telehealth is and have had time to ask  $\Box$  questions
- $\Box$  Determine if  ${\bf translators}~{\bf or}~{\bf cultural}~{\bf supports}$  are needed to facilitate the appointment
- □ Resident verbally **consents** to telehealth consultation □ Advise resident **where** the consultation will take place

#### SCHEDULE TELEHEALTH APPOINTMENT

□ Record **appointment time** with external clinician as per facility's appointment process □ **Advise resident** and their family of the appointment time

 $\Box$  Advise resident and their family there will be an **opportunity to discuss** the mode of appointment prior

#### MAKE ARRANGEMENTS AND DOCUMENT ACCORDINGLY

**Confirm** appointment time, platform being used, clinician name

- □ Arrange dedicated **nursing and technical support** cover
- □ **Arrange** translators or cultural supports as required
- Document arrangements as per facility's process



#### APPOINTMENT AND ROOM PREPARATION

- $\hfill\square$  Confirm appointment with external clinician
- □ **Collect** telehealth equipment and take to room
- $\square$  **Position** for best field of view lighting, and sound
- Pre-test equipment and prepare back-up for possible technology failure



#### **CLINICAL PREPARATION**

- $\square$  Collect and prepare clinical records
- Ensure required **clinical equipment** is ready
- $\Box$  Place 'Do not disturb, consultation in progress'  $\mathbf{sign}$  on door



#### **RESIDENT PREPARATION**

- Ensure resident's **privacy and dignity** will be maintained throughout
- $\Box$  Consider resident's **comfort** needs
- □ Minimise potential **distractions**
- Ask everyone to **speak clearly** into the microphone, look directly at the screen

#### DURING THE CONSULTATION

□ Introduce everybody

- $\Box$  Confirm right doctor, right resident, right health records, reason for consult
- $\Box$  Confirm resident's identity name, D.O.B. and address
- $\Box$  Confirm resident's consent to participate
- □ Session **recording** should be disabled. Where this is required, ask permission to record a video conference from everyone on the call
- $\hfill\square$  Support clinical needs, coordinate discussion, and assist with exam and care plan

#### **BEFORE ENDING THE CONSULTATION**

- □ Check **follow-up** requirements
- Clarify pathology/other tests to be ordered and who will be responsible
- Ensure resident does not have any further **questions**
- Check if another **appointment** is required including the mode



#### AFTER THE CONSULTATION

- $\Box$  Record **clinical notes**
- □ Undertake clinical **handover and delegate** follow-up i.e., scripts, pathology, next appointment
- □ **Debrief** with resident by asking how they found it or if they have any questions □ Ask resident and family for **feedback** about their experience
- □ Clean and **return equipment** to secure designated area



Healthy, connected communities

### **Consultation in Progress Sign**

Resource Number	6.0		
Resource Name	Consultation in Progress: Do Not Disturb Sign		
Description	This template Sign is to assist facilities with technical setup, use and optimisation of equipment and consultation space.		
Purpose	The function of the sign is to maintain privacy for the resident when a consultation is in progress. The sign developed for the facility, should remain with the telehealth equipment, for staff to access easily.		
Date Stamp	6 June 2023		



# DONOT DISTURB CONSULTATION IN PROGRESS

Your co-operation is appreciated.







MANAGEMENT TEAM



### Telehealth Technology Support Template

Resource Number	7.0			
Resource Name	Telehealth Technology Support Template			
Description	This template is to increase staff understanding in how to manage technical risks and issues relating to IT functionality and performance.			
Purpose	This template provides an example of four tables for facilities to adapt for their own situation in relation to the information technology in use for telehealth consultations.			
	The tables include:			
	1. Internet provider & videoconferencing software access			
	2. Equipment checklist & maintenance schedule			
	3. Technical assistance & support contacts			
	4. Service contractor register.			
	A copy of the resource developed for the facility, should remain with the telehealth equipment, for staff to access easily.			
Date Stamp	6 June 2023			



# **Telehealth Technology Support Template**

Table 1:         Internet Provider & Videoconferencing Software Access				
Internet/Software	Description	Username	Password	
Internet connection type:	e.g., NBN, ADSL, Wi- Fi			
<b>Generic email address</b> access (office365 email accessible by all is recommended)	<i>Generic email address for telehealth appointment links</i>			
Videoconferencing Software	<i>e.g., Skype, Teams, Zoom,</i> Health Direct	<i>Generic email address for appointments advised</i>		
Wi-Fi Access - secure	Visiting GPs & other providers			
Other				

Table 2:         Equipment Checklist & Maintenance Schedule			
Equipment / Device Register	Unique Identifier & Location	Username and Password	Maintenance Schedule include testing & tagging, cleaning, detecting, diagnosing, fixing problems
Computer			
Laptop			
Tablet / Smart Device			
Webcam			
Monitor			
Speakers			
Mobile Phone			
Microphone			
Secure store/charge Area			
Power Cords/ Cable			

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Table 3:         Technical Assistance & Support Contacts			
Type of Support	Company Name	Hours of Operation	Contact Details

Table 4:   Service Contractor Register		
Type of Service <sup>1</sup>	Service Provider	Contact Details

<sup>1</sup> Anı	<sup>1</sup> Annotation – More than one service contractor may deliver all or a portion of functions, such as:		
1.	General non-urgent support	Call-in technician to conduct routine equipment upkeep and fix hardware problems (to enable planning for outages and maintenance)	
2.	Remote IT services	Contract for Software updating network administration and security protocols	
3.	End-user support	IT support person who is available to staff, either on-site or remote (e.g., for nurses requiring immediate support during consultation)	
4.	Emergency IT services	Contract for emergency IT services with a local provider, to provide a service within a narrow and defined time-period.	



### **Troubleshooting Guide**

Resource Number	8.0
Resource Name	Troubleshooting Guide
Description	This resource is to increase staff understanding in how to manage technical risks and issues relating to IT (Information Technology) functionality and performance.
Purpose	The troubleshooting guide lists common situations that arise during telehealth, and problem-solving steps to overcome these issues.
	Note, this is a generic troubleshooting guide.
	Guides for software specific troubleshooting are accessible on the relevant software vendors website. In addition, see Resource Number 9.0 Platforms and Software User Guides, contained within this toolkit.
	A copy of this resource should remain with the telehealth equipment of the facility for staff to access easily.
Date Stamp	6 June 2023



### Troubleshooting Guide

Cituation	Contingonal Dian
Situation	Contingency Plan
Be prepared for technical issues	Have contact details for other parties available
during consultation	Have mobile phone ready to contact provider to discuss and plan how to
	<ul><li>continue</li><li>Be familiar with how to dial in others if it is decided to continue by phone</li></ul>
	<ul> <li>Have weblinks and web resources available for easy access (staff are</li> </ul>
	familiar with these sites)
	Regularly review back-up contingencies for efficiency / effectiveness
Unable to be seen or cannot see	<ul><li>You or they check camera icon</li><li>Click on the camera icon</li></ul>
the other person	
	Camera
	Camera
	<ul> <li>If the camera is on and still unable to be seen, try disconnecting and reconnecting into the call. Let the others know what you are doing first.</li> </ul>
The other person cannot hear you	<ul> <li>You or they check the microphone (mic) icon</li> </ul>
,	Click on the mic icon
	Mic Mic
	• If the mic is on and still unable to be heard, try disconnecting and
	reconnecting into the call. Let the others know by sending a chat or text
Unable to bear the other person	<ul><li>message first.</li><li>Check the volume on the telehealth device or speaker being used is on</li></ul>
Unable to hear the other person	and high enough
	コン ロックション ローン ローン ローン ローン ローン ローン ローン ローン ローン ロー
	<ul> <li>Ask the person on the other end to check their mic (as above)</li> </ul>
	<ul> <li>If the above does not resolve this, try disconnecting and reconnecting into</li> </ul>
	the call and advising the other person to do the same. Let the others know
	by sending a chat or text message first.
Background noise interfering with	<ul> <li>If it is on your end, let the others know you will mute your mic and turn back on or wave your hand when you wish to speak</li> </ul>
hearing	<ul> <li>If the background noise is on the other end, ask them to mute the mic and</li> </ul>
	turn back on or wave their hand when they wish to speak
Audio is poor / difficult to hear	Mute the audio and proceed with video, and use a phone for audio
each other	communication
Problems with the quality of a	Turn the video off and proceed with audio only
video consultation	<ul> <li>If possible, turn video on for short periods only as needed i.e., to check a wound</li> </ul>
	<ul> <li>Ensure adequate lighting and avoid direct sunlight from windows</li> </ul>
Technical issue or technical failure	Complete the interrupted consultation by phone, or
during consult – unable to fix or	Reschedule the consultation if non-urgent
other options have not worked	





### **Platforms and Software User Guides**

Resource Number	9.0	
Resource Name	Platforms and Software User Guides	
Description	This resource is to support staff in understanding how to effectively use telehealth platforms and software.	
Purpose	This template provides a list of platforms commonly used by facilities in the Country to Coast, Queensland region including online links to their software guides. The top five platforms used for telehealth consults reported in the CCQ	
	<ul> <li>telehealth survey 2022 were:</li> <li>Zoom,</li> <li>Skype,</li> <li>Queensland Health telehealth portal,</li> <li>Facetime and,</li> <li>Microsoft Teams.</li> </ul>	
	Two other established platforms have been included in this template due to reported use by wider clinicians in the region. They are:	
	<ul><li>Health Direct Video Call and,</li><li>Skype for Business.</li></ul>	
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### **Telehealth Platforms and Software User**

No.	Platforms	<b>Software User Guides</b> Use preferred Search Engine to access user guides & manuals. Click on the URL links below
1	Health Direct Video Call	RACF Technology and Trouble Shooting – Health direct Australia
2	Queensland Health Telehealth Portal	Queensland Health Telehealth for Professionals Telehealth portal patient quick reference guide
3	Zoom	Zoom for Healthcare
4	Skype	https://support.skype.com/en/skype/t2d/start/
5	Skype for Business	https://support.microsoft.com/en-us/skype-for-business
7	Facetime	https://support.apple.com/en-us/HT204380
8	Microsoft Teams	How to use MS Teams for telehealth
9		



# **Consent Guide & Template**

Resource Number	10.0
Resource Name	Consent Guide & Template
Description	This guide template is to support clinical care before, during and after telehealth consultations.
	Note: This template is an example only and may not suit all contexts of care.
Purpose	This resource provides the facility with an example one-page document to discuss telehealth information with the resident and their family, and to obtain consent.
	It is to support the development of a consent form appropriate for your facility.
	The information provided is to be used as a starting point for facilities to adapt to their own situation and to determine essential points for inclusion.
	If a person chooses to take part in the telehealth consultation, they, or their representative should sign a consent form to give official documented consent, which is to be retained by the facility.
	This guide template comprises three sections for facilities to consider when creating a specific telehealth consultation consent form.
	The sections are:
	<ol> <li>Introductory paragraphs describing telehealth value, risks, and choices</li> <li>Signature area</li> </ol>
	3. Extra consenting option if recording video or capturing images
Resource Guide	The following resources are source documents for this template, and may support the development of a consent form specific to your facility:
	<ul> <li>The template is based on the Allied Health Professionals Australia, <u>Telehealth Guide for Allied Health Professionals</u>, May 2020, page 20</li> <li>Australian Commission on safety and quality in healthcare, <u>Informed</u> <u>Consent</u></li> <li>Queensland Health, <u>Informed Consent</u></li> </ul>
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## **Consent Guide & Template**

Con	sent Overview
1.	Explain the value of having a phone or video consult, such as:
	<ul> <li>Reduce the waiting time for the resident to see their healthcare professional.</li> <li>Avoid the need for the resident to travel to see their healthcare professional.</li> <li>Manage the health of the resident when they cannot visit their healthcare professional in person.</li> </ul>
2.	Explain the risks of having a phone or video consultation, such as:
	<ul> <li>The consultation will not be the same and may not be as complete as an in-person service.</li> <li>There could be some technical problems that affect the consultation.</li> <li>This Healthcare service uses safeguards to protect the privacy and security of the phone or video consultation. These safeguards meet Australian standards. The risk of outside people hacking or tapping into the call does exist, but it is small.</li> </ul>
3.	Describe the choices about healthcare received via phone or video consultation, such as:
	<ul> <li>The resident has a choice about what to do next if this consult does not work out well.</li> <li>The resident can change their mind and stop using phone or video consultations at any time. This includes in the middle of a consult. This will not affect their right to ask for and receive healthcare.</li> </ul>

#### Signature Area

l agree to have phone or video consultations with: \_\_\_\_\_\_

Date:

Name of Resident:

Signature of Resident/Authorised Representative:

#### Additional Consent for Recording Video or Images

I agree to have this video consultation recorded, or to have photos taken.

- □ Yes, signature required below
- 🗆 No

The [insert facility name] will manage and store this material securely, meeting Australian Standards. It is only for use to assist my health care. I have the right to see the video or images, and to receive a copy for a reasonable fee. I understand that the service cannot ensure total safety against hacking or tapping into the recording by outside people.

Signature of Resident/Authorised Representative: \_\_\_\_\_\_

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## **Complementary Services Template**

Resource Number	11.0
Resource Name	Complementary Services Template
Description	This template is to increase staff understanding in how to effectively support clinical care for residents and family before, during and after telehealth consultations.
Purpose	This template is to help facilities to create a list of complementary service contacts to assist staff in offering support for residents and streamlining telehealth services for the differing needs of individual residents.
	The template offers a structure for displaying support service contact detail in rows, depending on needs and local availability. Two support services that might facilitate an improved experience for residents and their family are given as examples.
	Examples of other complementary services may support:
	• Aboriginal and Torres Strait Islander residents and their families through the local Aboriginal Medical Service or the National Aboriginal Community Controlled Health Organisation
	• Residents with culturally and linguistically diverse backgrounds through refugee health agencies or partners in culturally appropriate care
	• The National Relay Service for residents who are deaf or find it hard to hear or speak, or others who would benefit from local Interpreters.
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## **Complementary Services Template**

No.	Support Services	Website	Telephone
1.	Translating and Interpreting Service (TIS) National	<u>Translating and Interpreting</u> <u>Service (TIS National)</u>	131 450
2.	Vision Australia	Vision Australia <u>Resources</u>	1300 84 74 66
3.			
4.			
5.			
6.			



Feedback Question Examples & Reporting Templates Residents & Staff

Resource Number	12.0
Resource Name	Feedback Question Examples & Reporting Templates – Residents & Staff
Description	These templates assist the development and implementation of organisational processes to support the effective use of telehealth.
Purpose	This template provides guides to developing feedback processes and two drafts of example questions to better understand the telehealth experience from the perspective of residents and staff. The example question sets are deliberately brief to make them easy to complete and to interpret. Facilities may decide to adapt their existing service feedback forms and processes. The facility should consider which key pieces of information they receive from residents and staff will help to improve the service.
	This resource consists of a:
	<ol> <li>Guide to developing a questionnaire</li> <li>Guide to scoring responses</li> <li>Resident Feedback example         <ul> <li>a) Sample questions</li> <li>b) Reporting template</li> </ul> </li> <li>Staff Feedback example         <ul> <li>a) Sample questions</li> <li>b) Reporting template</li> </ul> </li> <li>Staff Feedback example         <ul> <li>a) Sample questions</li> <li>b) Reporting template</li> </ul> </li> </ol>
	Annotations in the templates provide additional questions the facility may choose to include to identify quality improvement opportunities.
	Note: This template will support the required reporting for facilities who are recipients of CCQ's telehealth grant funding 2023.
Resource Guide	<ol> <li><u>South Australia Digital Telehealth Network</u></li> <li>Queensland Health <u>Patient reported experience measures</u></li> <li>Contact <u>Country to Coast PHN (Primary Health Network)</u> if you would like assistance in developing and managing feedback processes.</li> </ol>
Date Stamp	6 June 2023



## Feedback Questionnaires & Reporting

Guid	e to developing Questionnaires
1.	When developing a feedback questionnaire:
	<ul> <li>Keep questions and words simple and easy to read</li> <li>Give a range of answer options rather than free text responses</li> <li>Consider how easy it is for the residents to complete and how easy it will be to evaluate</li> <li>Allow space for comments</li> <li>Decide if using paper based, electronic or a mix of both when seeking feedback</li> </ul>
2.	When asking residents and their family to provide feedback, explain:
	<ul> <li>Why their feedback is important and valuable</li> <li>What the feedback is for, such as improving the telehealth service</li> <li>Whether results will be shared with others outside the facility (i.e., external providers)</li> <li>That confidential information is never shared</li> <li>The facility is grateful for their time and effort in providing feedback</li> <li>Where to place or how to send their completed feedback</li> </ul>
3.	Consider how the feedback will be managed, for example:
	<ul> <li>Being clear about the reason for every question, what will the answers reveal, and how emerging issues will be handled</li> <li>Safe collection and storage of feedback</li> <li>How the information will be analysed and reported, and who will be responsible</li> <li>How feedback will align with existing compliments and complaints processes</li> <li>What will be done with the results, such as quality improvements, PDSA cycles</li> <li>Scan qualitative (free text, verbal) feedback and consider what will be done with the results as per above point.</li> </ul>
Guid	e to Scoring & Reporting
1.	How to score each quantitative question:
	<ul> <li>Agree = visual ··· which numerically equals 5</li> <li>Not Sure = visual ··· which numerically equals 3</li> <li>Disagree = visual ··· which numerically equals 1</li> <li>The higher the score, the higher the level of satisfaction</li> </ul>
2.	Scoring Satisfaction Rating:
	<ul> <li>For each respondent's form, score the response to each question</li> <li>Transcribe scores to the report template, one row per respondent allocating a score 1,3,5 as described above.</li> <li>Average the satisfaction score for each respondent in last shaded <u>column</u> in template (Sum of scores divided by number of questions answered).</li> <li>Average the satisfaction score for each question in last shaded <u>row</u> in template (Sum of scores divided by the number of responses). The lower scoring questions should be seen as opportunities for improvements.</li> <li>To determine overall satisfaction with the telehealth service by the cohort of respondents in the report, average the final column.</li> <li>Consider setting a target Satisfaction Rating.</li> </ul>



## **Resident Feedback Question Examples**

	Thinking about your	C	Circle your an		
No.	telehealth consult, how much do you agree with the following?	Agree=5	Not Sure=3	Disagree=1	Comments
1.	Staff gave me enough information about how it would work before starting the consult	$(\cdot)$		(:)	
2.	l was able to tell my story	$(\cdot)$		$\odot$	
3.	The standard of care was the same as a face-to-face visit	$(\cdot)$		$\odot$	
4.	The equipment worked well	$(\cdot)$		$\odot$	
5.	l would like to use telehealth again	$\odot$		$\odot$	
6.	Do you have anything else to tell us about the telehealth service?				

Thank you for taking the time to complete this feedback

	Annotation – Other Telehealth Experience Questions to Consider				
1.	The consult was held in a private place				
2.	I felt at ease during the consult				
3.	My chosen support people were with me				
4.	It was about me as a whole person				
5.	I helped make the plan of action				
6.	I could hear well enough				
7.	I could see the other person well enough				
8.	Overall, I am happy that I had this consult				
9.	What was the best thing about the telehealth consult?				



### **Resident Scoring Template Example**

#### Example Summary Report – Refer to Scoring Guide Resident Satisfaction

Response Number	1. Understanding before starting	2. Able to tell own story	3. Same standard as F2F	4. Technology worked well	5. Will use telehealth again	Average Score per Resident Feedback	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Average Score per Question						Aggregate Score	





## **Staff Feedback Question Examples**

	Thinking about telehealth		Circle your ans	Comments	
No.	consultations, how much do you agree with the following?	Agree=5	Not Sure=3	Disagree=1	
1.	I know enough about how telehealth works to prepare residents for their consult	()		$\odot$	
2.	The systems and processes in place for telehealth are useful	$(\cdot)$		$\odot$	
3.	l feel confident helping residents during telehealth	$(\cdot)$		$\odot$	
4.	I feel confident using the telehealth equipment	(:)		$\odot$	
5.	Telehealth consults are the same or better than face-to-face visits	()		$\odot$	
6.	Do you have any other comments about telehealth?				

Thank you for taking the time to complete this feedback

	Annotation – Other feedback questions to consider asking staff					
1.	Telehealth processes are efficient					
2.	Telehealth equipment/technology is reliable					
3.	Staff are benefitting from having telehealth services for their residents					
4.	Telehealth is improving resident health outcomes					
5.	Telehealth is reducing hospital admissions / emergency department visits					
6.	Telehealth is increasing access to GP / health care					
7.	Overall residents are benefitting from telehealth services					



## **Staff Scoring Template Example**

Example Summary Report – Refer to Scoring Guide Staff Satisfaction / Confidence							
Response Number	1. Satisfied with Telehealth Knowledge	2. Satisfied with Systems & processes	3. Confident helping residents	4. Confident using equipment	5 Confident telehealth is same/better than F2F	Average Score per Staff Feedback	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Average Score per Question						Overall Score	



## **Register of Telehealth Consultations**

Resource Number	13.0
Resource Name	Register of Telehealth Consultations
Description	This template is to assist the development and implementation of organisational processes to support the effective use of telehealth.
Purpose	This template is to provide staff with an easy log to track and monitor telehealth consultations. An example report template is also provided.
	An annotation to this register template has additional reporting elements the facility may choose to include to identify quality improvement opportunities.
	The facility may incorporate this register into existing processes for managing resident appointments external to the facility. Alternatively simply adding a telehealth field to the facility's existing consult log may suffice.
	Note: This template will support the required reporting for facilities who are recipients of CCQ's telehealth grant funding 2023.
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## **Telehealth Consultation Log Example**

1. Number	2. Date	3. External Provider	4. Location of consult	5. Technology / Equipment	6. Equipment returned &	7. Comments	8. Name & Signature
			Response Optic	worked well	ready for use		
Sequential order	<i>Date of consult</i>	A. GP B. Specialist C. Allied Health Professional D. Mental Health professional E. Other (Describe)	A. Consult room B. Bedside C. Other (Describe)	A. Yes B. No (Describe)	A. Yes B. No (Describe)	<i>Descriptions and other information</i>	<i>Staff member responsible for consult</i>

	Annotation – Additional items to consider for consultation register			
No. Question Response Option		Response Option		
1.	Technology used	Computer, Laptop, Smart device, Mobile phone, Webcam, Monitor, Speaker, Microphone		
2.	Technical issues	Video quality, Audio quality, Connection quality, Equipment issues (either end)		
3.	Clinical Equipment used	Exam camera, Portable ECG/heart, Augmented reality, Digital stethoscope, IR thermometer, BP monitor, Pulse oximeter		
4.	Reason for consult	Pain Management, Falls Management, Wound Care, Care planning, Medications, Palliative care, Other		
5.	How did the consult seem for resident?	Positive experience, Satisfactory Experience, Negative experience, Unclear		
6.	What would have made the consult more efficient?	More time, More help, Resident support, Equipment, Knowledge, Other		

Telehealth Toolkit for Residential Aged Care Facility



# **Consultation Register Report Example**

Number	Requested Information	<b>Response Options</b>	Sum Responses
1.	Number of Consults		
2.	Date Range of report period		
3.	External Provider	A. General Practitioner	
		B. Specialist Medical Professional	
		C. Allied Health Professional	
		D. Mental Health Professional	
		E. Other	
4.	Location	A. Consult room	
		B. Bedside	
		C. Other	
E	Technology/ Equipment worked well	A. Yes	
		B. No	
6.	Equipment is returned	A. Yes	
	& ready for use	B. No	



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