

SHIFT TO VIRTUAL CARE

Primary care response to COVID-19 Pandemic



HOW ARE TEAMS PROVIDING CARE VIRTUALLY?

90% of care by AFHTO teams is being provided virtually.

Appointments by Phone:

- Most teams have called patients to re-book appointments over the phone
 How are providers conducting phone call appointments?
 - VoIP Options Available:
 - Providers have taken their office phones home
 - Teams can contact their telephone companies to re-direct calls, if this feature isn't available; teams are using are:
 - <u>CounterPath</u>
 - <u>Versature</u>
 - o <u>Mitel</u>

- Landline Options Available:
 - Calls can re-directed to staff phones and admin staff can notify patients that they will be receiving a call from a blocked ID
 - Teams have switched to online phone systems such as:
 - <u>Dialpad</u>
 - Grasshopper

Note: Any products suggested above should be investigated further for your team

- Other:
 - ZOOM meetings can be limited to just audio in order to conduct an appointment over the phone. Advise patients with the number to call along with the Meeting ID. In order to increase privacy measures it is encouraged to create a Meeting password.
 - Nurses have been conducting phone triage as call volumes increase

Video Appointments:

- Most teams are providing virtual visits via OTN
 - Admin staff that have ONEID credentials are booking appointments for patients that providers indicate
 - ONEID accounts have been extended to all IHPs
- Teams have also opted for EMR integrated virtual care options such as Medeo
- A list of virtual care options can be found on the <u>OMD website</u>
- Group programs are being re-booked to be conducted virtually via zoom.
 - Teams have also recorded group programs for patients to watch

Sign Up for OntarioMD Virtual Care Webinars & Listen to Recordings <u>Here</u>

Challenges:

- "Rural and remote areas don't have access to highspeed internet"
- "Not all digital platforms are compatible with the devices providers have"
- "ONEID set up is quite lengthy due to high volume of requests"
- "Teams don't have access to nor a budget to purchase devices such as ipads, webcams, headsets etc"
- "Not all patients have access to computers, smartphones or telephones..... these patients should not be forgotten in this transition to virtual care"
- "Difficulty in receiving onsite support for installation and training, due to geographical barriers"
- "Lack of internal resources to implement, train, and troubleshoot another new system at this time"

Virtual Care Consent

- Electronic Communication Patient Consent Templates on the <u>OMD website</u>
 - Summary document found <u>here</u>
- Virtual vists policy and script for consent created by Kate Dewhirst Health Law can be found <u>here</u>
- Consider creating a virtual care policy for your team examples can be found here and here

Appointments by Phone vs Video:

- Majority of providers have switched to phone call visits
- Providers are indicating the most appropriate appointment type
 - Some types of appointments happening virtually are: medication renewal, stable chronic disease follow-up, acute conditions, stable mental health follow-up and dietary counselling and follow-up
- Some teams are asking their patients which method they prefer
- BMJ has put together a quick <u>guide</u> on COVID-19 remote consultations
- Click <u>here</u> for Telemedicine Essentials Fact Sheet

In Person vs Virtual Appointments:

- Not all care can be provided virtually, below are a few resources to help determine essential in person appointments:
 - Click <u>here</u> for some considerations for family physicians for in person appointments created by OCFP
 - Interim Schedule for Children and Pregnant Women during COVID-19 Pandemic
 - CFPC has started a series of clinical COVID-19 Webinars. Click <u>here</u> to see upcoming webinars and click <u>here</u> to watch previously recorded webinars.

The best virtual solution is the right technology for the patient at the right time. This means that you may have to use multiple solutions.



PATIENT MESSAGING

Messaging to Patients:

- Template messages for websites can be found on the <u>OMD</u> <u>website</u>
- Messaging was provided through by HealthMyself & Telus PS
- Some teams are providing messaging to patients via radio broadcasting
- Teams are posting on social media with <u>health promotion</u> <u>material</u> and mental health resources (ex: <u>Social Worker</u> speak about dealing with stress and anxiety during COVID-19)
- Teams have emailed patients Facts Sheets on self-isolation
- Teams are hosting live Q&As on <u>facebook</u> and <u>instagram</u>
- Recording Group Education Presentations

Patient Feedback:

"Given the circumstances, many patients were pleased with the added options for virtual care"

"I believe many patients have cancelled some nonessential appointments." Phone and email example:

NOTICE TO ALL PATIENTS: With a confirmed case of COVID-19 in our community, we will be rescheduling all nonurgent visits until further notice. We will be offering phone visits only for matters that can be reviewed by phone. If you require an urgent appointment, please call to speak with a staff member. At that time, you will be screened for COVID-19 exposure. We will give you directions on what to do next if you screen positive. Thank you for your cooperation.

> the ability to still connect with their Primary Care Provider"

"Patients are welcoming

"Most support the idea – they'd prefer to not come into the clinic waiting room." "For the most part patients don't actually want to attend the clinic. We are physically seeing patients who must receive a hands on assessment. ALL patients attending the clinic are screened prior to booking the appointment and then upon arriving."

"For those patients that have successful eVisits with their physician we are getting resoundingly good feedback about the options to have virtual care and the access to their primary care provider being uninterrupted during this crisis.." "We are in a rural setting in which some of our patients live 45-60 minutes away so they are not too disappointed that they do not have to make the drive for an appointment."

INNOVATIVE INITIATIVES BY TEAMS:

"Our RN is really focusing on system navigation and reaching out to isolated patients with resources during this situation." – CrossTown FHT

"We have taken on a project to call all of our elderly patients to encourage self-isolation, checking to ensure that they have enough medication and groceries and assisting with making arrangements. We have set up a community website for individuals to offer or ask for help." – Bancroft Community FHT

"We have contacted our local pharmacist to arrange for extension of prescriptions for chronic medication, plus a letter to employers (there are only a couple of major employers) and Chamber of Commerce indicating that we will not be providing off work notes for workers." – Marathon FHT

"We are providing nursing support via telephone call to patients who attend the local COVID-19 assessment clinics. Patients who are screened/assessed can consent to a follow up call from a nurse. The nurses can refer to mental health counselling or counselling from a registered dietitian to increase access to information they may need while at home." – North Simcoe FHT

"We utilized "Wait While" to provide patients with a virtual wait list for care at the after-hours clinic. This ensures that patients can socially distance themselves while waiting for their appointment. Patients are notified when it is their appointment, and they can then enter the clinic after the prior patient has left. If a patient does not have access to the internet on their phone and would like to add themselves to the wait list, they can either text in their information to be added or speak with a greeter." - Georgian Bay FHT

"All our primary care providers organized together and realized that they could provide these assessments virtually, which cuts down people's need to travel, keeps them at home ... doesn't use that personal protective equipment, (and) it doesn't bring people together risking further infection." – Dr. Miriam Klassen, Huron Perth Public Health's Medical Officer of Health "We have also developed a COVID-19 mobile assessment service. We screen people over the phone and if a person qualifies, we send a nurse to the home to do a swab." - Elliot Lake FHT

"In Peterborough there are many patients unattached to primary care, hence through the Virtual Clinic physicians are offering supports to unattached patients to ensure they have access to virtual care and information needed." – Peterborough FHT

"We are proactively contacting patients over the age of 70 years old, high risk patients, patients with a history of mental health and addictions and newborn moms." – Hamilton FHT

In person appointments are being provided for essential care. In order to reduce exposure to staff and patients teams have:

- Grouped symptomatic patients and patients presenting respiratory symptoms together for in person visits in the afternoon and book asymptomatic patient appointments in the morning.
- Multi site clinics in close proximity have desginated one clinic for all in person visits
- Teams have been broken into Team A and Team B and are providing in person care on a weekly alternating schedule

Keeping your team connected:

- Hold virtual team huddles
- Create a group email for regular updates and messages
- Hold weekly check-in calls with each staff member
- Create a google drive or dropbox for projects that teams can work on together and where team members can find resources

Reach out to unaffiliated physicians in your community to streamline primary care services in the community and to ensure virtual care access is available to all.

RESOURCES

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Resource	Description
Adopting and Integrating Virtual Visits into Care: Draft Clinical Guidance	This document provides guidance for health care providers, including Ontario Health Teams, who are interested in integrating virtual care into their practices—particularly virtual visits. It provides a set of key considerations, informed by professional standards and best practices, for each step in the process.
	 Key Supports: Examples of Virtual Visit Pilots and Case Studies Understand your legal and professional obligations Virtual Visit Modalities (ex: messaging and video) and associated privacy and security risks Examples of administrative, technical, and physical safeguards to protect digital personal health information Strategies to onboard patients Virtual Visit Best Practices Obtaining consent
<u>Video Visit</u> <u>Platforms</u>	 Key Supports: Video Visit Platforms Free options Yes, Zoom is PHIPA compliant Message for patients to be posted on websites Patient Consent
OTN	 Summary document found <u>here</u> Key Supports: Organizing OTN membership and billing guidelines OTN sign up – creating an ONEID and express entry options Setting up Virtual Visits (created by Georgina and Sudbury NPLCs) OTN – How to schedule and join a video visit OTN Personal Video Conferencing in a Nutshell Patient Handout with e-Visit Information (OTN) Virtual Visit Patient Information (Southlake Academic FHT)
Screening Forms and Tools for EMRs P&P Screening Form	 *Note: OTN is available for physicians and health care providers Key Supports: OTN eVisits VirtualCare – ThinkResearch CognisantMD Tablet Screening Form Screening forms for Telus PS, Accuro and OSCAR Key Supports: P&P screening tool for COVID-19 created by Hamilton FHT and
	• Pap screening tool for COVID-19 created by Hamilton Ph1 and importing instructions

COVID-19 Toolbar	<u>Toolbar created by Dr. Adam Stewart</u>
(Telus PS)	<u>Toolbar created by eCE</u>
OHIP Billing	Key Supports:
<u>Codes</u>	Billing Codes
Clinical Practice	Two Virtual Policy Templates Available by:
Guidelines DRAFT	<u>Georgina NPLC</u>
 Policies for 	<u>Sudbury District NPLCs</u>
Virtual eVisits	<u>Welland McMaster FHT</u>
	Key Supports:
	 Professional Liability Insurance requirements for IHPs
	 Policies for video visits, secure messaging and phone calls
	 Procedures for video conferences (pre-setup, patient info,
	troubleshooting, FAQs etc)
	Privacy and security
	Information Security Incident
Pandemic Work	Policies created by:
From Home	CrossTown FHT
Policy: COVID-19	Welland McMaster FHT
specific	
Special Virtual	• ThinkResearch is offering a discounted rate of \$10 per month for
Care Offers	groups of 10+ providers. Please contact Shilpa Magesh:
	shilpa.magesh@thinkresearch.com
	 <u>AdraCare</u> is offering a 3 month free service with no contracts
Electronic	To be used as a template
Communication	
Patient Consent	
Form Template	
OMA & OMD	Quick Fact Sheet with information about virtual platforms and billing
Virtual Care Fact	codes for physicians
Sheet	
ePrescribing	<u>PrescribeIT</u>

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Have a resource or story to share? Email us at *improve@afhto.ca*

We are continuously updating our website with COVID-19 information click <u>here</u> to read more.