

Status: DRAFT DISCUSSION DOCUMENT to be completed by the members of the working group and third parties invited to do so

Introduction to an EPSO – Blueprint Telehealth for a safe and qualitative delivery of better care by using telehealth

Remote consultations and prescribing provided online, over video-link or by phone can have great benefits for

- patients,
- save resources for healthcare,
- help meet public demand for more convenient access to healthcare,
- optimize the use of healthcare staff capacity in hospitals and care facilities.
- reduce pressure on health facilities by telemonitoring external facilities and homecare
- etc

However, there are potential patient safety risks, particularly where services are not linked to a patient's regular healthcare provider, and where there may be limited access to a patient's medical records.

Issues include increased attempts to gain access to medicines which can cause serious harm and the need to ensure safe ongoing monitoring of those with long term conditions. Providers of remote services and the healthcare professionals they work with must be aware of these risks for the public and be clear about their responsibilities for protecting patients.

Patients can expect to have effective safeguards in place to protect them when they receive advice and treatment remotely. Safeguards are necessary whether the consultation happens in the context of a continuing treating relationship or is a one-off interaction between a patient and a healthcare professional.

Definition of Telehealth

Telehealth is the distribution of health-related services and information via electronic information and telecommunication technologies. It allows long-distance patient and clinician contact, care, advice, reminders, education, intervention, monitoring, and remote admissions.

Telemedicine is sometimes used as a synonym or is used in a more limited sense to describe remote clinical services, such as diagnosis and monitoring.

Telehealth could include two clinicians discussing a case over video conference; physical therapy done via digital monitoring instruments, live feed, and application combinations; home monitoring through continuous sending of patient health data; client to practitioner online conference.

Situations where Telehealth can deliver similar or improved outcomes for patients.

When rural settings, lack of transport, a lack of mobility, conditions due to outbreaks, epidemics, or pandemics, decreased funding, or a lack of staff restrict access to care, telehealth may bridge the gap. Also, in more regular circumstances Telehealth can have great advantages¹

¹ Even in a well-equipped surrounding such as the city of Singapore with a high density of hospitals and doctors per square mile telehealth has shown advantages



Guidance for providing accessible, high quality, safe etc. telehealth services.

1.	Promoting excellent health safety and wellbeing for patients and the public.				
2.	Staff have the necessary knowledge, skills, and competence to deliver their services in a way that adds to better				
	healthcare.				
3.	The environment from which the service is delivered is appropriate and does not present a risk to staff or the				
	health safety and wellbeing of patients and the public. This means for instance:				
	a.				
	b.				
	c.				
	d.				
4.	The ser	vice is delivered in a way that is safe. This means for instance:			
	a.	It should be made clear that the decisions about treatment are for both the prescriber and the person to jointly consider during the consultation. However, the final decision will always be the prescriber's			
	b.				
	c.				

- 5. The equipment and facilities that are used are safe. This means for instance:
 - a. your website and the websites of companies you work with are arranged in such a way that a person cannot choose a POM (a medicine that is only available if a doctor prescribes it) and its quantity, before there has been an appropriate consultation with a prescriber.

b.	
c.	
d.	

d.



Remote prescribing high-level principles²

Principle 1

Make patient safety the priority and raise concerns if the service or system they are working in does not have adequate patient safeguards including appropriate identity and verification checks

principle 2

Understand how to identify vulnerable patients and take appropriate steps to protect them

Principle 3

Tell patients their name role and if online professional registration details, establish a dialogue and make sure the patient understands how the remote consultation is going to work

Principle 4

Explain that:

- a. they can only prescribe if it is safe to do so
- b. it is not safe if they do not have sufficient information about the patient's health or if remote care is unsuitable to meet their needs
- c. it may be unsafe if relevant information is not shared with other healthcare providers involved in their care
- d. If they cannot prescribe because it is unsafe, they will signpost to other appropriate services

Principle 5

Obtain informed consent and follow relevant mental capacity law and codes of practise

Principle 6

Undertake an adequate clinical assessment and access medical records or verify important information by examination or testing where necessary

Principle 7

Give patients information about all the options available to them, including declining treatment, in a way they can understand

Principle 8

Make appropriate arrangements for aftercare and unless the patient objects share all relevant information with colleagues and other health and social care providers involved in their care to support ongoing monitoring and treatment

Principle 9

Keep notes that fully explain and justify the decisions they make

Principle 10

Stay up to date with relevant training, support, and guidance for providing healthcare in a remote context

² these principles have been co authored and agreed by thirteen healthcare regulators and bodies including NHS Scotland



International contacts

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