



## Telehealth

### Key points about telehealth

Telehealth is the use of information or communication technology to deliver medical care when patients and doctors are not in the same physical location.

Telehealth provides access to medical care at times when it may otherwise be difficult.

There are a number of matters that doctors should pay attention to when providing care using telehealth.

### About our statement on telehealth

#### Who is this statement for?

This statement sets standards for doctors registered in New Zealand and practising telehealth in New Zealand and/or overseas. It is also for doctors who are overseas, who provide telehealth services to patients in New Zealand.

This statement may be helpful for patients who receive aspects of their care through telehealth or who are thinking of consulting a doctor through telehealth.

This statement may be used by the Medical Council, the Health Practitioners Disciplinary Tribunal, and the Health and Disability Commissioner as a standard by which to consider your conduct as a doctor when providing medical care through telehealth.

#### Terms we use in this statement

**In-person:** Where you and your patient are physically present in the same location.<sup>1</sup>

**Telehealth:** Telehealth is the use of information or communication technology to deliver medical care when patients and doctors are not in the same physical location. This may include the use of digital technologies like videoconferencing and telephone conferencing.

**Telehealth consultation:** Includes text/messaging, telephone and video consultations. It is where the doctor and patient communicate with each other and exchange information without being physically present in the same location. Telehealth consultations can be conducted between a doctor and patient in the presence of a local health practitioner, or they can be conducted with no medical support at the patient's end.

**Type of consultation:** Refers to the means of clinical consultation, which can be in-person or through telehealth.

<sup>1</sup> While the consultation room is common in many clinical settings, in some specialties such as radiology, the patient and doctor may not be in the same room, and the doctor may delegate the responsibility for examining or attending to the patient to another health practitioner. In that situation, the doctor who delegates should be available to provide input and answer questions in line with best practice for that particular discipline or specialty.

## Introduction

- 1 Digital technology has become an essential part of health care. Telehealth can be beneficial for providing access to care when it otherwise may be challenging. Telehealth can increase convenience for patients, enable more comprehensive delivery of services after-hours and provide faster access during times of limitation, and facilitate more effective use of limited health resources.
- 2 When providing health care services through telehealth there are a number of things you should pay attention to:
  - a ensuring you have the patient's informed consent to provide the consultation via telehealth
  - b the challenges of conducting a physical examination
  - c providing treatment<sup>2</sup> if you are unfamiliar with the patient
  - d whether you are able to confirm a patient's identity and medical history with their regular doctor
  - e security and technical issues with the equipment used by you and/or the patient.

## What to consider when you provide telehealth services

### The device that you use must be secure and fit for purpose

- 3 Any device, software or service you use when you provide telehealth services must be secure, fit for purpose, and must preserve the quality of the information or image being transmitted. You should consider the patient's safety, security and privacy when they engage with you in a telehealth consultation. You should also check that the patient knows how to operate the device they are using for the telehealth consultation.

### The standards that apply to a New Zealand-registered doctor will also apply to you

- 4 If you provide telehealth services to New Zealand-based patients, you are practising medicine in New Zealand, and you should be registered with us and hold a current practising certificate<sup>3</sup>.
- 5 If you treat a patient, you are responsible for gathering and assessing the information used to form your diagnosis, regardless of its source. If you receive a referral that does not contain the information you need for assessing the patient, you should ask for the relevant information, or return the referral to the referrer with a request for more specific information.
- 6 The treatment you provide to a patient in another location should be equivalent to the care provided in an in-person consultation, within the limitations imposed by the telehealth platform. This includes verifying the patient's identity, assessing whether a telehealth consultation is suitable for that patient, forming a diagnosis, obtaining the patient's consent, maintaining the patient's privacy and confidentiality, providing follow-up care, updating the patient's medical records,<sup>4</sup> and communicating with the patient's relevant primary care provider in a timely manner. You must also meet our cultural safety standards for doctors, focusing on the patient experience to define the quality of care.<sup>5</sup> If the limitations of technology means you are unable to provide a service that is equivalent to an in-person consultation, you must explain this to the patient so that they can decide what to do.
- 7 If you work with or receive reports from telehealth providers, our standards will apply to the care you provide. You must inform that telehealth provider, their management and/or other appropriate reporting channels if you have concerns about their quality of care.

<sup>2</sup> In this statement, the terms "treating" and "treatment" cover all aspects of the practice of medicine. The practice of medicine includes assessing; diagnosing; reporting; giving advice; signing medical certificates; and prescribing medicines.

<sup>3</sup> An exception to this is when a doctor based overseas is providing an opinion regarding a patient under the care of a New Zealand registered doctor. Where input from the overseas-based doctor is likely to be ongoing, there should be a robust contractual relationship with the New Zealand registered doctor or organisation that engaged the overseas-based doctor.

<sup>4</sup> See also our statement on *Managing patient records*.

<sup>5</sup> Culturally safe care for the patient covers multiple cultural dimensions including indigenous status, age or generation, gender, sexual orientation, socioeconomic status, ethnicity, religious or spiritual belief and disability.

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- 8 Some medical colleges have set clinical guidelines for specialists who provide telehealth services. Those guidelines may place additional requirements on your practice.<sup>6</sup>

### When a physical examination is necessary

- 9 A physical examination could provide information that affects the patient's diagnosis or management, including treatment or whether to refer the patient for further investigations. If history alone suggests a life-threatening condition, an ambulance must be called immediately.
- 10 If a physical examination is likely to influence your clinical decision, this needs to be arranged within an appropriate timeframe. In some circumstances, it may be reasonable to ask another practitioner in the patient's locality to conduct a physical examination on your behalf. In those instances, you must obtain the patient's consent, communicate your request clearly to the other practitioner, and answer any questions that the other practitioner might have. You remain responsible for the clinical decisions you make based on the information you received.
- 11 You must document relevant clinical findings from the physical examination in your patient's medical records.

### When you prescribe medication via telehealth

- 12 The New Zealand ePrescription Service (NZePS) enables authorised prescribers to prescribe medication electronically to their patients. There is a Director General of Health waiver to regulation 41 of the Medicines Regulations that allows prescribers to issue prescriptions electronically without needing to personally sign the prescription if:
- The prescription has an NZePS barcode; and
  - The barcode (or identifier) is used at the pharmacy at the point of dispensing; and
  - The prescription is for a non-controlled drug.
- 13 Prescriptions that are not generated using NZePS must comply with regulations 40-41 of the Medicines Regulations. This includes the prescription being clearly printed and personally signed with the prescriber's usual signature. The signature cannot be a stamp, facsimile or a digital image.
- 14 If you prescribe medication electronically as part of your telehealth service, the prescription you issue must comply with the legal standards and requirements that apply in the location where the prescription will be filled.<sup>7</sup>
- 15 Along with legal requirements, our standards on good prescribing practice<sup>8</sup> apply when you issue a prescription (or a repeat prescription) via telehealth. You should:
- have adequate knowledge of your patient, and that you have reviewed their relevant medical history including their clinical notes<sup>9</sup>
  - be satisfied that what you intend to prescribe is in the patient's best interests
  - update the patient's medical records. If you are not the patient's regular doctor, you must ensure that information about any care you provide and prescriptions you issue are given to that doctor.
- 16 Before prescribing any medicine for the first time to a patient, an in-person consultation is recommended practice. If, in the circumstances you are unable to see the patient in person, consider a telehealth consultation with the patient<sup>10</sup> or discuss the patient's treatment with another New Zealand registered health practitioner who can verify the patient's medical history

<sup>6</sup> For example, those involved in teleradiology should refer to the Royal Australian and New Zealand College of Radiologists' *Standards of Practice for Clinical Radiology* which has a section on teleradiology.

<sup>7</sup> See also regulations 41(a) and (b) of the Medicines Regulations 1984, and *Good prescribing practice* which states that a prescription written in New Zealand has no validity overseas.

<sup>8</sup> See also our statement on *Good prescribing practice*.

<sup>9</sup> In an emergency, responding to the patient's acuity will be a priority, and may result in prescribing without adequate information about the patient's medical history. As part of good medical practice, you are expected to document all medicines prescribed in an emergency in the patient's medical records.

<sup>10</sup> If you conduct a telehealth consultation, consider whether a physical examination of the patient is necessary. See also the section 'When a physical examination is necessary'.

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and identity. It may also be reasonable to:

- a provide a prescription for a patient if you are covering for a colleague or are discharging a patient from hospital, and have reviewed the patient's notes beforehand
  - b renew a patient's prescription after assessing that the prescription is appropriate for the patient. When the prescription has potentially serious adverse effects, you should assess the patient regularly.
  - c provide a prescription if the situation is urgent, provided that you obtain the relevant medical history and inform the patient's regular doctor as soon as possible<sup>11</sup>
  - d prescribe medication for a shorter duration than usual, and encourage the patient to see their regular doctor for follow-up.
- 17 Some medicines have a higher risk of harm. When prescribing medication by telehealth, you must ensure that the patient has an established professional relationship with a doctor, and that there are robust systems in place to manage the patient's care. You must give particular consideration before prescribing any class A or class B controlled drug to a patient. It is never appropriate to prescribe a class A or class B controlled drug, for the first time to a patient who has not been appropriately assessed or where the patient does not have a regular doctor.

### **If you provide care to a patient outside of New Zealand**

- 18 If you are in New Zealand and only provide telehealth services to patients outside of New Zealand, we do not require you to be registered with us. However, you may be subject to the laws where your patient is located, and it would be sensible to familiarise yourself with the requirements of that locality/country.
- 19 In situations where you are registered with the Medical Council of New Zealand, our standards will apply even if you only provide telehealth services to patients overseas.

### **If you need more advice**

If you are unsure about any aspect of this statement, please contact us at the Medical Council. You may find it helpful to seek advice from a colleague, your medical indemnity insurer, or your professional college or association.

### **October 2020**

This statement was updated in October 2020. It is scheduled for review in October 2025. Any changes to the law before that review may make parts of this statement obsolete.

<sup>11</sup> For example, when a public health physician prescribes prophylactic (preventative) medicines for family members of a patient, after that patient has been diagnosed with a serious communicable disease.

<sup>12</sup> Refer to Schedules 1 and 2 of the Misuse of Drugs Act 1975 for a list of substances that are classified as Class A drugs (drugs that pose a very high risk of harm), and Class B drugs (drugs that pose a high risk of harm).

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