



<p>Team Name: Regional Telehealth Committee</p> <p>Team Lead: Executive Director - Mid</p> <p>Approved by: Executive Director - Mid</p>	<p>Reference Number: ORG.2010.PL.002</p> <p>Program Area: Telehealth</p> <p>Policy Section: General</p>
<p>Issue Date: September 3, 2014</p> <p>Review Date:</p> <p>Revision Date: June 11, 2018</p>	<p>Subject: Consent for Clinical Telehealth Sessions</p>

POLICY SUBJECT:

Consent for Telehealth Sessions

PURPOSE:

The purpose of this policy is to outline the process and minimal requirements in attaining client informed consent for the use of telehealth for a clinical session.

BOARD POLICY REFERENCE:

- Executive Limitation (EL-01) Global Executive Restraint & Risk Management
- Executive Limitation (EL-02) Treatment of Clients
- Executive Limitation (EL-03) Treatment of Staff

POLICY:

- Prior to extending telehealth services to a client, the provider assesses the appropriateness for the use of telehealth, considering client condition and the level of care to be provided.
- Informed verbal consent, or implied consent with the client presenting for follow up telehealth sessions, is required prior to the client taking part in a telehealth session.
- Informed verbal or implied consent by the client to receive services by telehealth does not replace obtaining additional verbal, written or implied consents required for treatment or procedures that may arise during or from a telehealth session.
- If the client’s telehealth session is part of continuing care, through referral and consultation consent to release personal health information in these circumstances is not required by PHIA section 22(2):

“Disclosure without individual's consent

22(2) A trustee may disclose personal health information without the consent of the individual the information is about if the disclosure is
 (a) to a person who is or will be providing or has provided health care to the individual, to the extent necessary to provide health care to the individual, unless the individual has instructed the trustee not to make the disclosure; (Personal Health Information Act, 1997)

PROCEDURE:

1. The provider assesses the appropriateness of telehealth services, considering client condition and the level of care to be provided.
2. The provider and the telehealth client site provides information to clients verbally or in written format to support informed consent. Information will include:
 - An explanation of telehealth; the use of two-way technology using a secure provincial network, that links the provider over geographical distances
 - The risks and benefits of the technology, that includes facilitating access to services that may not be available within the community
 - How the information will be recorded and by whom, and that it will be recorded, stored, and used in compliance with the Personal Health Information Act (PHIA) of Manitoba.
 - The right to withdraw from the telehealth session at anytime and request a face-to-face appointment
 - An invitation to provide feedback with respect to their telehealth experience verbally or in writing.
 - Providing the MBTelehealth website: www.mbtelehealth.ca as appropriate
 - Providing the client with printed information that explains telehealth services; available at each telehealth site within the MBTelehealth Standards, Procedures and Forms. See “Consent to Participate in Telehealth Services”, August, 2016.
3. The provider obtains verbal consent, and validates implied consent for clients presenting for follow up telehealth sessions.
4. The provider obtains written consent from the client for any treatments or procedures requiring written consent. See Southern Health-Santé Sud Policy & Procedure: “Consent for Procedures, Treatment and Investigations (CLI.4110.PL.001).
5. If the client’s telehealth session is part of continuing care, through referral and consultation consent to release personal health information in these circumstances is not required by PHIA section 22(2)

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REFERENCES:

MBTelehealth Standards, Procedures and Forms “Consent to Participate in Telehealth Services”, August 2016

The Personal Health Information Act C.C.S.M. c.P33.5. PHIA 1997

[CLI.4110.PL.001](#) Consent for Procedures, Treatment and Investigation