

# VIRTUAL VISIT GUIDE FOR MIDWIVES

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### 1. CONSIDERATIONS FOR VIRTUAL VISITS

#### **Understand your professional and legal obligations**

Generally, regulatory colleges recommend that members use their professional judgment to determine whether virtual care is appropriate and whether it will enable the provider to meet the standard of care. While the CMO does not have such a policy, the same standard would likely apply. Under usual circumstances, colleges will use the same standards to judge care, whether it is in-person or virtual. In a pandemic, midwives will be held to the standard of what other midwives would view as reasonable under the circumstances. Please see [CPSO's Telemedicine Guidelines and CNO's Telepractice Guidelines](#) for more information.

#### **Identify a virtual visit solution**

The AOM has provided a list of [common virtual care options](#) and their characteristics (cost, ease of use, video capabilities, privacy and security, etc.).

As more and more people are using the zoom platform for virtual meetings, a number of vulnerabilities have surfaced. However, these are *restricted to the free version*, the healthcare version (cost associated) appears to be more secure. If using the free version for meetings, consider the following precautions:

- Always make sure you are using the most updated version of Zoom
- Set up a meeting using a randomly generated meeting ID and set a password for all meetings.
- Set up meetings so that participants cannot join until you open the meeting.
- Consider adding meeting controls such as: blocking file sharing and private chat, disabling screen sharing.

For more information, please visit: <https://nakedsecurity.sophos.com/2020/04/03/5-things-you-can-do-today-to-make-zooming-safer/>

### **Comply with privacy and security requirements**

Virtual visits involve the collection, use and disclosure of personal health information and personal information. While safety trumps privacy where needed, midwives should take steps that are reasonable at the time to protect privacy. Possible privacy and security risks and strategies to protect personal health information can be found [here](#)

### **Onboard clients**

Midwives will need to ensure that clients agree to receive care virtually and that they can use the technology effectively. Beforehand, consider the potential benefits and risks of virtual care for a given client. If you can, start small and go slow, manage client expectations proactively (e.g. how to access care for urgent concerns), develop a standardized registration process (e.g. email the client with a letter describing the program), and identify required technical support.

### **Assessment needs**

A virtual visit solution may enable both video visits and secure messaging. When considering what modality to use for a virtual visit, consider the unique circumstances of each client, their clinical needs, and whether a virtual visit is appropriate for the clinical encounter.

### **Ensure the setting for video visits is private and secure**

When conducting video visits, consider the privacy offered by the physical locations. Ideally, both individuals should be located in a private setting where the client can comfortably share confidential information and where the midwife can assess the client and provide advice.

### **Ensure appropriate resources are available**

Midwives should ensure the right resources (e.g., technology, equipment, etc.) are available and can be used effectively when practicing virtual care. The midwife should also have mechanisms in place to order prescriptions, laboratory tests, and diagnostic imaging, when required.

Other factors that could influence the effectiveness of virtual visits include connectivity between sites, bandwidth, and resolution. Diagnostic assessment requires good bandwidth and resolution to identify non-verbal behaviours (e.g., tics, dysmorphia, etc.).

It is equally critical to consider the level of client support immediately available, particularly for clients with higher acuity.

## 2. STEPS TO CONDUCT A VIRTUAL VISIT

### **Confirm identity**

Midwives should ensure the client is accurately identified at a virtual visit. For midwives, confirming a client's identity could be as simple as visually confirming the patient in a video visit.

### **Obtain consent for virtual visits**

Informed consent is considered a requirement for virtual visits and is regarded as separate from consent for treatment. Consent can be implied, based on what a client does (e.g. accepting or initiating a virtual visit). If the mode of communication is encrypted, then implied consent is sufficient.

Expressed consent (provided either orally or in writing) is required in some circumstances; for example, when a health care provider collects, uses, or discloses personal health information for the purpose of marketing or market research.

### **Document the clinical encounter**

Virtual visit records must be kept to the same standard as in-person care. Midwives should also document specific details about the electronic aspects of the encounter, including a notation as to how the visit was conducted (telephone, OTN, Skype, etc.). If multiple midwives are involved, identify the most responsible midwife. Client data, messages, files, or images exchanged during a virtual visit should be transferred to a medical record. To this end, virtual visit solutions should facilitate documentation in medical record systems by recording data with personal health information exchanged during the encounter.

### **Prescribing**

Prescriptions should be sent through an EMR, phoned in, or faxed to licensed pharmacies, not to patients or other healthcare providers.

### **Document virtual visits in BORN**

BORN Ontario is encouraging midwives to enter virtual visits and add them to the tally under Visits:

- If the virtual visit replaces a clinic visit, add it to Clinic Visits
- If the virtual visit replaces a home visit, add it to Home Visits

### 3. SIGNING UP FOR ONTARIO TELEMEDICINE NETWORK (OTN): STEP BY STEP INSTRUCTIONS

**\*\* During normal times, there is a 3-5 day wait to gain access, including obtaining a ONE ID; this wait may be longer given the demand during the COVID-19 pandemic.**

#### **What is the Ontario Telemedicine Network (OTN) and how do I access?**

OTNhub is a private and secure online platform for practicing virtual care. OTNhub has several services including eVisit, eConsult, and Directory. The OTNhub is available free of charge to midwives. OTN video services are encrypted and secure.

To use OTN, midwives must obtain a ONE ID. Midwives can obtain a ONE ID from:

- Their hospital
- OTN
- Other LRA's (Local Registration Agent) in your community

At present, the AOM does not hold privileges to credential midwives with ONE ID (though we are seeking that).

OTN may ask midwives to produce proof of MOHLTC funding to ensure compliance with OTN's own funding agreement with the MOHLTC. For more information, visit [here](#).

#### **Who can use OTN and what equipment is needed?**

To use OTN, midwives must provide their own hardware including a computer, laptop or smartphone, webcam, microphone, and speakers. You will also need a stable internet connection. Best practices for videoconferencing are outlined [here](#).

Non-clinical users (admins) are not allowed to sign up individually; they must have delegated authority by the organization/practice.

#### **How do I sign up?**

Midwives can choose to either sign up as an individual midwife or as part of their MPG (organization). Instructions for both options are provided below. Initial sign up with OTN should take about 10 minutes.

1. Go to [otnhub.ca](https://otnhub.ca)
2. Click "sign-up"
3. To sign up as an *individual midwife*:
  - 3.1. Scroll down and click "private practice sign up"
  - 3.1.1. Select "I receive 50% or more funding from the MOHLTC".
  - 3.1.2. Complete your individual profile to sign up.
  - 3.1.3. Wait for a confirmation email from OTN before proceeding. The welcome email will provide more information on accessing the portal through ONE ID credentialing.

4. To sign up as an **organization** and have the option to add admin staff
  - 4.1. Delegate one midwife to sign up by clicking “healthcare organization sign up”
  - 4.2. Identify and delegate authority to administrators in your MPG. Admin staff must have delegated authority to use OTN to book appointments.
    - 4.2.1. Select "I receive 50% or more funding from the MOHLTC".
  - 4.3. The initial midwife will receive a welcome email with instructions on obtaining a ONE ID and a request for a video call with OTN. Once completed, the MPG becomes an OTN member organization.
  - 4.4. Other midwives from that practice will then be able to sign up by finding their registered MPG under "healthcare organization sign up" drop menu.
  - 4.5. Each midwife will receive a welcome email with instructions from OTN to complete the ONE ID credentialing process, including a videoconference with OTN to verify identity.

*Useful Tips for Sign-up:*

1. "healthcare organization" is the name of the MPG
2. "primary contact" must be clarified for each organization. This will be the midwife signing up first under "healthcare organization sign up". All subsequent midwives signing up in the same MPG will need to select their MPG from the organization drop-down menu. Subsequent midwives can only find their MPG after the primary contact (1st midwife) authenticates their ID with OTN through videoconferencing.
3. under "add accounts" page, select "allied health professional" then select "CMO" under "registered with" dropdown menu, and finally select "only applying for eVisits"
4. identity authentication is required for sign-up which requires that you select a 15-minute time slot in the next 2-5 business days (may be longer due to COVID-19) or a preferred appointment time. The authentication will be through videoconferencing with OTN.

**Once I've signed up, how do I complete the credentialing process and gain access?**

To officially obtain access to OTNhub and its eVisits service, you must go through an identity authentication process. After submitting your application, you will be contacted by a ONE ID Local Registration Agent by email/telephone to confirm or schedule your appointment.

The ONE ID identify authentication process requires you to show two Government-issued photo IDs and to set up Security and Challenge questions for your profile. OTN will process your request, provide a ONE ID username and password and send email instructions on how to securely login to activate and access the eVisits service.

### **If I already have ONE ID credentials, can I use them to log into OTNhub?**

In addition to having ONE ID credentials, you must also apply for access to the OTNhub and its services (e.g., eVisit, eConsult, Directory). If you have a ONE ID AL-2 level account (which means you have been validated in person), you do not need to meet with ONE ID and after you have received your “welcome” email from OTN, you can access the OTNhub.

If you have a ONE ID AL-1 level account (which means you have credentials but never went through a face to face identity validation), ONE ID will need to meet with you in person to validate your identity. After ONE ID completes your identity validation you will receive a “welcome” email from OTN and then you can access the OTNhub.

### **Is there online training on how to use the eVisits platform?**

OTN provides a training toolkit on how to optimize the use of eVisits. The training is not mandatory but is recommended by OTN to understand how to navigate the eVisit portal and set-up electronic information. Access the eVisit training/toolkit:

<https://training.otn.ca/course/view.php?id=10090>

### **Who can I contact for additional support?**

- For OTN technical support: call 1-855-654-0888 (option 3 is for eVisit support, option 4 is for onboarding support)
- For AOM support: call Sanna Malik at 416-425-9974 ext. 2231

# Platforms for Virtual Visits: A comparison chart

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Platform	Privacy and security	Cost	Sign-up process for providers	Timeframe from sign-up to initial use	Ease of use for clients	Video Capabilities
Doxy	Secure PHIPA compliant	Free for audio calls, \$35-50/mo for video features	Easy – short sign- up process	Immediately	Easy – doxy URL invitation for clients	Y
FaceTime	Not secure, end-to-end encryption but not PHIPA compliant	Free	Easy	Immediate	Easy – requires iPhone or Apple iOS	Y
Medeo	Secure (PHIPA compliant)	Vary Contact for quote (prices for OPA - \$17/mo for messaging only version, \$149/mo for messaging + video) <sup>1</sup>	Easy – 2-step process	After signing up, providers will be contacted by Medeo to implement services	Easy – download free app on their smartphone to use	Y
OTN	Secure – (PHIPA compliant)	Free	Possibly onerous (AOM working with OTN to see if this can be streamlined)	3-5 business days	Easy – email invitation for clients	Y
Skype	Somewhat secure – Skype-to-Skype calls are encrypted. Skype for Business is HIPAA compliant (not PHIPA compliant)	Free	Easy	Immediate	Easy	Y
Telephone	Somewhat secure – landlines generally more secure than cell phones (not PHIPA compliant for most uses)	Free	Easy	Immediate	Easy	N
Zoom	Secure – end-to-end encryption (PHIPA compliant version is minimum \$270/mo for 10 hosts) <sup>23</sup>	Free (PHIPA compliant is \$270/mo or \$225/mo if billed annually)	Moderately easy	Immediate	Easy – zoom URL sent to client	Y

<sup>1</sup> <https://www.psych.on.ca/OPA/media/Public/Membership%20Benefits/Medeo-OPA-Cost-Summary.pdf>

<sup>2</sup> <https://blog.zoom.us/wordpress/2018/11/12/zoom-serves-canadian-healthcare-pipeda-hipa-compliance/>

<sup>3</sup> <https://zoom.us/buy?plan=biz>