

## Guidance on Telecare (excerpt from April 17, 2020 President's Message)

As of April 17, 2020, CCO members may provide telecare services to new patients - meaning an individual who does not have a pre-existing, in-person doctor/patient relationship with the member - as this is deemed to be essential. Without obtaining initial information from the patient, members cannot be in a position to advise if the patient requires urgent/emergency in-person treatment.

To be very clear, these protocols governing telecare are temporary (during the period of the Ontario emergency order). CCO will review and provide further guidance following the lifting of this order.

CCO members may use an initial telecare screening consultation to determine:

- If the new patient is in need of urgent/emergency care that requires in-person chiropractic treatment.
- If it is determined that in-person treatment is required, members must comply with the [screening, practice, hygiene and protective equipment protocols](#) for in-person urgent/emergency care.
- If the new patient requires urgent/emergency care that is outside the chiropractic scope of practice, the member must make a referral to the appropriate health professional.

If, however, it is determined that the new patient does not require urgent/emergency in-person care but is in need of essential chiropractic services that could be offered remotely through telecare (i.e. time sensitive situation or to avoid adverse patient outcomes as per the Chief Medical Officer Directive), CCO members may now provide telecare services to that patient with the following protocols:

- The member must be registered in the General class of registration and ensure they have appropriate malpractice insurance or protection for telecare services.
- Both the member and patient must reside in the province of Ontario.
- The member must ensure they have achieved, maintain and can demonstrate clinical competency in providing telecare (as required of CCO members for every diagnostic and therapeutic procedure).
- The member must ensure a safe, secure and confidential platform is being used for telecare, and is used with the patient's authorization.
- The member is required to maintain the privacy of personal health information in accordance with the *Personal Health Information Protection Act, 2004* and CCO standards of practice, policies and guidelines, including the use of technological safeguards, such as secure transmission systems and storage mechanisms, password protection for any devices used for telecare services, and physical safeguards to prevent unauthorized use.
- The member must communicate to the patient, in advance, if any fee is to be charged for telecare services.
- The member must maintain records and billing practices consistent with CCO standards of practice, policies and guidelines that explicitly indicate that the services provided are telecare in nature.

In addition, members must use their professional judgement to determine whether:

- Telecare is appropriate for that patient without an in-person examination;
- The patient has the physical, cognitive, language and technological capabilities to be able to participate in telecare services; and
- There are risks, contra-indications or limitations to performing telecare services that outweigh the benefits for that patient.

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To summarize - CCO members may now offer consultation, obtain informed consent, conduct modified assessment/examination, and provide diagnosis/clinical impression, plan of care recommendations, and other telecare services within the chiropractic scope of practice to new patients via telecare. These services include recommending and monitoring of appropriate exercises, recommending appropriate devices or supports, advice on ergonomics, nutrition, hot/cold therapies, lifestyle and home care.

In providing telecare services members must understand and acknowledge the limitations of telecare, specifically with respect to: care and communication with patients, including limitations to the performance of certain orthopedic, neurological and chiropractic assessments; limitations to providing a definitive diagnosis (in which case a clinical impression may be more appropriate), and recognition that no hands-on assessment or care will be provided through telecare.

Consistent with CCO requirements for periodic assessment and treatment review, members providing telecare must evaluate the new patient's progress no later than two-weeks after the onset of treatment (and thereafter according to CCO guidelines on assessment/reassessment).

If, after the initial two-week period the patient's condition worsens or does not improve, the member must take the appropriate next steps either to refer the patient to another qualified healthcare professional, to terminate care, or if it is established that the patient is now in need of urgent/emergency care, to follow CCO protocols for the provision of urgent/emergency in-person care under the Ontario legislature's emergency order.

In these extraordinary times, and for the duration of the Ontario emergency order, CCO has provided these enhanced protocols for telecare in the public interest; to allow individual Ontarians to receive ethical and competent chiropractic care that could forestall an escalation of their condition to that requiring urgent/emergency care, and through these measures to divert additional strain on front line health resources in our province in support of the Ministry's effort to ensure we have the necessary capacity to successfully manage the impacts of COVID-19.

Please note that the situation remains very fluid and that further practice directives may be necessary as events require. I thank you for your patience and understanding.