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| Reporting Telehealth Video Consultations in Victorian Emergency Departments |
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# Data Collection Guidelines

## Background

To encourage and facilitate the use of telehealth for emergency care, Victorian emergency departments can count telehealth video consultations provided to patients in a Victorian public Urgent Care Centre (UCC) or in another Victorian emergency department (ED) or a Victorian government or non-government residential aged care service (RACS) or a Victorian correctional facility.

## Purpose of the data collection

Collection of the data relating to emergency telehealth video consultations will enable the activity to be reflected within the annual rebasing of the NAESG.

### Who collects the data?

The ED that provides a telehealth video consultation should report the activityto the Victorian Emergency Minimum Dataset (VEMD). Refer to the [VEMD user manual](https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/data-collections/vemd) < https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/data-collections/vemd > for guidance on the required data items for telehealth activity.

## Scope

Any Victorian public ED may provide telehealth video consultations to a consenting patient located within another Victorian public ED or Victorian public UCC or Victorian government or non-government RACS or Victorian correctional facility.

## Activity that can be counted

A nurse or doctor from an ED or UCC or a nurse from a Victorian government or non-government RACS or a nurse or doctor from a correctional facility can tele-present via video a patient to a remote doctor or nurse in another ED for assessment, evaluation and treatment using videoconferencing systems.

To be counted as an ED telehealth video consultation, the activity must meet the following criteria:

* The telehealth activity must be an interactive, real-time clinical consultation provided to a consenting patient.
* The patient’s physical location must be within a Victorian UCC or ED or in a Victorian government or non-government RACS or a Victorian correctional facility.
* The patient’s presentation must be of an unplanned nature. It must not be a substitute for primary care.
* The patient must be triaged at the physical presentation site before initiating a telehealth video consultation.
* The consultation must involve an interaction between at least one clinician in the ED providing the telehealth video consultation and the patient.
* The patient’s presenting condition/injury must be visible to the remote ED clinician.
* The telehealth video consultation must be of virtual equivalence to a face to face consultation. This means both the remote ED clinician and the patient must interact in a mutually responsive manner, utilising an audio-visual link.
* A *medical record* must be kept both at the site where the patient is physically located and at the ED that has provided the remote telehealth video consultation.
* In situations where the patient is located at a Victorian government or non-government RACS, the telehealth video consultation must take place, in circumstances, where:
  + - no general practitioner or Health Independence Program service is available or appropriate for the circumstances
    - staff at the RACS are considering transferring the patient to an ED
    - a registered nurse is located with and supporting the patient during the telehealth video consultation in the Victorian government or non-government RACS
    - a telephone consultation is insufficient.
* In situations where a telehealth video consultation has ended and the patient is discharged, any subsequent presentations are counted as a new presentation.
* If a patient is transferred from the presenting site to the telehealth video consultation site, this should be recorded in the patient’s medical record at the physical location*.*
* Note on arrival to the ED, the patient should be recorded as a new presentation.

### Activity that is excluded

* Outpatients of a health service that receive an ED consultation as part of their outpatient care are not eligible to be counted as an ED telehealth consultation.
* Consultations where a patient is **not** located at a Victorian public health service or a Victorian government or non-government RACS or a Victorian correctional facility are not eligible to be counted as an ED telehealth video consultation.
* Consultations conducted with Adult Retrieval Victoria or the Paediatric Infant Perinatal Emergency Retrieval service for major trauma patients are not eligible to be counted as an ED telehealth video consultation.
* Administrative phone calls and second opinions where the consultation does not include an audio-visual interaction with the patient are not eligible to be counted as an ED telehealth consultation.

## Other resources

* [VEMD manual](https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/data-collections/vemd)  Section 1 to 6 < https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/data-collections/vemd>
* [Medico-legal aspects of telehealth services for Victorian Public Health Services](https://www2.health.vic.gov.au/hospitals-and-health-services/rural-health/telehealth/medico-legal-aspects) <<https://www2.health.vic.gov.au/hospitals-and-health-services/rural-health/telehealth/medico-legal-aspects>>
* [Critical Success Factors: how to establish a successful telehealth service](https://www2.health.vic.gov.au/hospitals-and-health-services/rural-health/telehealth/about-telehealth)

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## For more information

If you have any questions regarding telehealth, please email telehealth@health.vic.gov.au.

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