From: Philip Morris
To: medboardconsultation

Cc: Subject:

Consultation: revised guidelines: Telehealth consultations with patients

Date: Saturday, 17 December 2022 4:40:31 PM

Attachments:

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Dear Medical Board Australia, I am writing to provide feedback related to the proposed revised guidelines: Telehealth guidelines with patients. In general I have no particular concerns about what is proposed. However, there is one section that concerns me. See the screenshot of the relevant section of the revised guideline below. The demand that the software/hardware used for a telehealth consultation allows for secure access to patient's clinical records; and transmission and storage of prescriptions, referrals, investigation requests and photographs/images will not be possible for many private (mainly specialist) medical practitioners and is inappropriate. Most of these practitioners use software programs like Zoom, Skype, and Microsoft Teams for the consultations. But these practitioners do not have electronic records, electronic prescription software, electronic referral forms and investigation requests, and electronic storage of photographs/images. Most of these practitioners continue to use paper records and standard hardcopy filing systems. This demand of the Medical Board will prevent these practitioners from continuing to provide services to patients, including those in regional, rural, remote, and indigenous communities. Point 2c as it currently stands will deny patients in these deserving settings access to telehealth. I suggest you revise point 2c. below to make sure this demand does not exclude the significant proportion of practitioners who do not have or do not use electronic medical records/prescriptions/referrals/investigation requests/photographs/images as routine. If you would like to discuss this matter further with me please email call me anytime on ph . Prof Philip Morris AM (president National Association of Practising Psychiatrists [NAPP]).

### What do I need to do?

## When I provide telehealth consultations with patients

#### Before a telehealth consultation

You should:

- Have a consultation space that is quiet and free from distractions and does not allow others to hear any audio or view the consultation on screen.
- 2. Have access to secure, reliable technology and connectivity that:
  - a. is fit for clinical purpose
  - b. is not a personal account
  - allows for secure access to patients' clinical records; and transmission and storage of prescriptions, referrals, investigation requests and photographs/ images
  - d. can include interpreters where required<sup>6</sup>.

From: Philip Morris
To: medboardconsultation

Subject: medboardconsultation@ahpra.gov.au - telehealth consultations

Date: Tuesday, 10 January 2023 11:14:00 PM

Attachments:

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Medical Board of Australia Submission on Telehealth

Medical Board of Australia

MBA Draft revised guidelines: Telehealth consultations with patients

Dear MBA, the one area that will be a problem if these MBA AHPRA guidelines are adopted is that the complexity of the software/hardware required will make use of Zoom or equivalent inexpensive software platforms impossible for private practitioners. Look at the software/hardware requirements for telehealth in the screenshots below. Many physician clinicians only have private versions of Zoom, Skype, or Microsoft Teams software. Having a personal account of this type of software will prevent these doctors providing essential telehealth consultations to patients. Having a business account will mean the doctor having to have a hospital-related account or needing to buy an expensive business account from the software vendor. This will introduce a price barrier for doctors to consult patients by telehealth. The basic versions of Zoom and similar software programs do not have direct access to patients' clinical records, transmission and storage of records, investigation requests, and storage of photographs/images. Many specialists (and some GPs) use paper-based medical records not directly accessible by the Zoom and similar software programs used by these specialists. The demand by the MBA for the telehealth software to have electronic secure access to patients' clinical records, transmission and storage of records, investigation requests, and storage of photographs/images will make it impossible for most specialists to practice telehealth. The specialists will have secure access in their offices to patients' clinical records, storage of records, investigation requests, and storage of photographs/images, but not direct electronic connectivity between these physical records and the telehealth software usually used. This demand by the MBA will practically eliminate telehealth from most specialist practices. The MBA Draft revised guidelines: Telehealth consultations with patients will limit telehealth to public and private hospitals and exclude office or home-based private practitioners. Amendments are urgently required to these Draft revised guidelines in order to avoid this catastrophe. I would be pleased to discuss this issue with the relevant MBA staff. My phone number is

Prof Philip Morris AM (President National Association of Practising Psychiatrists).



## Public consultation

14 December 2022

Draft revised guidelines: Telehealth consultations with patients

## What do I need to do?

# When I provide telehealth consultations with patients

## Before a telehealth consultation

#### You should:

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- 2. Have access to secure, reliable technology and connectivity that:
  - a. is fit for clinical purpose
  - b. is not a personal account
  - allows for secure access to patients' clinical records; and transmission and storage of prescriptions, referrals, investigation requests and photographs/ images
  - d. can include interpreters where required6.