

# PIPSIG Guidelines for the use of telepsychiatry.

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## Background:

The guidance was developed from a workshop on 27 April 2015. It is produced with regard to the use of internet video platforms as a tool to undertake psychiatric interviews or provide follow-up interviews, but could also be applied to audio consultations over the internet, or telephone consultations.

The GMC guidance, from Good Medical Practice (2013), is that a doctor MUST satisfy her/himself that they can undertake an adequate assessment, establish dialogue with the patient and obtain the patient's consent, including consent to the remote consultation process.

The defence unions advise caution if the patient is not in the UK at the time of the consultation. Consideration must be given as to whether you are a registered medical practitioner in that country and whether you are aware of the licensing indications for medication in that country.

## Operational issues:

### Consider the security of the system

- Is the application suitable for the purpose of a confidential psychiatric interview?
- Consider using a secure system : a number are available and some will link with electronic records
- Have a dedicated clinical account, if you use the platform socially as well as professionally.

### Practicalities

- Make sure both parties have the necessary technology
- Make sure both parties have the skill to use the system
- Ask if an advocate or carer is present
- Take contact details early in the proceedings, so that you can re-establish contact if the connections or technology fail
- Agree who will contact whom in the event of a lost connection

### Professionalism

- Consider the environment beyond your video camera.
  - Do you look professional? Beware using the system outside an office, e.g. in your living room or bedroom.
  - Are there photographs/books/posters visible that you would not have in a consulting room?
  - Is there anyone else in the room who cannot be seen on camera (such as a student)?
    - If so, introduce them and explain.
  - Does the patient have anyone else present in the room (such as a relative/carer/advocate)?
    - If so, allow them to introduce themselves and clarify the purpose of the interview with them.

- Ask them to move in front of the camera if they are taking part in the interview (otherwise they may not be audible)
- Consider the volume of loudspeakers and suggest that the patient does the same, emphasising confidentiality
  - Consider the use of headphones: they can look professional and emphasise that you are taking confidentiality seriously.

### **Consent:**

- Although it could be assumed that provision of contact details etc. by the patient provided implicit consent to a video interview, the consensus in the workshop was that explicit consent should be sought.
  - Include the right to withdraw from the process at any time
- If the consultation is to be recorded, consent is essential and a GMC requirement.

### **Legal issues:**

- Limitations of telepsychiatry include the inability to undertake a physical examination, which may include missing jaundice, oedema, profound weight loss etc.
- The GMC does not permit disclaimers regarding the quality of a consultation: you must be satisfied that you have been able to undertake an adequate assessment and have adequate knowledge of the patient's health at the conclusion of the assessment.
- You may not be indemnified. If you are consulting with or prescribing for patients who are not in the UK, you need specific agreement from your indemnifying organisation's membership team.
  - Be aware that you require a licence to practise medicine in the country in which the patient is situated when the consultation takes place: this may cause problems if the patient is not in the UK at the time of the consultation.
  - Similar principles apply to prescriptions: you need to be aware of licensing indications for medication in the country in which the patient is situated.

### **Terms & Conditions:**

It is advisable that you have terms & conditions related to your telepsychiatry practice. These should include (the list is not exhaustive)

- An acknowledgement that remote video consultation is legitimate, but is not suitable for everyone.
- The circumstances in which telepsychiatry would be used, including
  - Whether the first consultation would be face-to-face.
  - What assessment would be made of the suitability of the client for telepsychiatric consultation.
  - What assessment would be made of the suitability of the equipment used for telepsychiatric consultation in terms of video and sound quality.
  - How often suitability would be re-assessed for repeated consultations.

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- Consider patient safety as you are providing services in a setting without immediately available professional staff. Agreement will be required on whether you request the contact information of a family or community member who could be called upon for support in the case of an emergency
- Whether you are indemnified
- The extra element that the technology introduces to the limits of confidentiality
- The right to withdraw from teleconsultations at any time
- The taking and storage of normal clinical notes and correspondence.

### **Useful resources:**

American Telemedicine Association. PRACTICE GUIDELINES FOR VIDEO-BASED ONLINE MENTAL HEALTH SERVICES. (2013).

<http://www.americantelemed.org/docs/default-source/standards/practice-guidelines-for-video-based-online-mental-health-services.pdf?sfvrsn=6>

*Dr Lesley Haines: March 2016*