Checklist

PRIMARY HEALTH NETWORK

phn HUNTER NEW ENGLAND AND CENTRAL COAST
An Australian Government Initiative

SWITCHING TO TELEHEALTH CARE CONTINGENCY ARRANGEMENT AT SHORT NOTICE

PURPOSE: Urgently commence offsite telehealth as an alternative work process to maintain business continuity of health care provision.

SETTING: General Practice, Aboriginal Medical Service (AMS), Allied Health, Commissioned Health Care Provider, etc.

CONTEXT: **Assumes preparation completed** - Emergency Response Planning Tool (Royal Australian College of General Practitioners) or Scenario Planning Tool (The PHN) was completed, and test-run of "checklist" occurred. Remote Telehealth Planning (RACGP) was completed and tested.

Assumes practice continuity compromised - Result of various scenarios (pandemic, flood, bushfire, premises fire, theft, IT failure, power failure).

Assumes telehealth is required - Practice must switch urgently to unplanned, temporary telehealth.

Emergency Command Lead Name and Contact details:

Deputized Staff Member completing checklist (can delegate tasks) Name and Contact details:

1. Enact Communication Plan	
Seek advice from NSW Health Public Health Unit (PHU) (1300 066 055) (if due to communicable disease).	☐
Alert Facilities e.g., Residential Aged Care Facilities (RACF), Correctional, VMO-covered, Procedural GP, Emergency Department, planned workplace or school attendances.	☐
Communicate temporary premises closure and flex to telehealth, including practice hours on website, social medial platforms, on-hold and out-of-office phone greeting and door signage. Consider radio and print media.	☐
Display telehealth fact sheet on website, social media platform, booking app and door Phone-and-video-consultations-with-your-regular-GP-Information-for-patients-FINAL.pdf (racgp.org.au).	☐
Lodge Capacity Tracker Business Continuity alert – Hunter New England Central Coast Primary Health Network HNECCPHN Emergency Operations Centre.	☐
Alert your (HNECCPHN) Primary Care Improvement Officer directly in addition if desired.	☐
Alert Australia Post to hold mail at Post Office or organize PO Box. Plan regular pickups.	☐
Amend planned deliveries or pickups, maintaining cold chain for vaccines – cancel, postpone or arrange alternate delivery address.	☐
Divert phones of practice and Drs practice rooms to alternative phone number.	☐
Alert providers (e.g., pathology, pharmacy, allied), centre management.	☐
Consider alerting other practices.	☐
Alert Practice IT provider.	☐
Communicate to all staff, including those due to return from leave.	☐
Provide staff with Contact Details of Staff, Providers, IT Provider, THE PHN, Clinical System Support (including Site ID).	☐

2. Enact Triage of Existing Appointments Policy

Triage appointments booked for following day(s) based on clinician input ☐

- Prioritize vulnerable patients e.g., age >=65; Aboriginal and Torres Strait Islander persons; patients with Chronic Disease or Disability, pregnant, children, isolated ☐

- Prioritize patients recalled with significant results ☐

- Rely on existing Ambulance Care Plans for home-based care ☐

- Increase to long appointment e.g., if patient new to telehealth or anxious. ☐

- Postpone non-essential attendances ☐

Record consent for telehealth appointment in patient record. ☐

Record/confirm patient contact details, including phones and email address for telehealth. ☐

Record consent for applicable billing in patient record, e.g., Rebate to practice or private billing. (Dept of Health signature exemption only for new temporary MBS telehealth items, documented patient/carer agreement to assign their benefit is sufficient & regarded as full payment). ☐

Change Appointment Book attendance Type to Telephone/Video with suggested MBS item number. ☐

- Send patient SMS reminder of new telehealth appointment type ☐

- Give patient a time range for appointment e.g., "Appointment at 1pm, be available between 12:45 & 1:15". ☐

Ensure GP access to Telephone Interpreter Service account ☐

Ensure GP access to current telehealth MBS Item numbers. ☐

Take printer paper stock, including plain paper, prescription paper, pathology paper to alternative location ☐

Commence Remote Computer Access Plan ☐

3. Perform Communicable Disease Exposure Activities (prior to closure)

Secure lists of premises attendances in manual check-in sheets and appointment book. ☐

Access staff vaccination records. ☐

Record Personal Protective Equipment (PPE) types used during exposure. ☐

Organzise cleaning requirements. ☐

4. Enact Practice Management Functions Maintenance Plan

Maintain the recall and reminder system. ☐

Link off-duty GPs holding file/inbox to a working GPs inbox. ☐

Secure premises, practice vehicles, patient correspondence, Doctors Bag, sample drugs, business records, water, gas, and electrical including computers, HVAC and fridges. ☐

Maintain regular tasks at required frequency:	☐
- Scanning of Correspondence-in/Results to doctors holding file/inbox	☐
- Rosters, Time sheets and Payroll	☐
- Batching of Billing and Australian Immunisation Register (AIR) – Maintain process to review billing prior to batching	☐
- Perform daily off-site Data Backups	☐
- Produce planned Management Reports	☐
- Lodge PIP/WIP Confirmation Statements in HPOS	☐
- Maintain vaccine Cold Chain integrity and recording, consider transferring vaccines	☐
- Attend to Human Resource activities	☐
- Maintain accounts payable/receivable	☐

5. Enact Practice Staff Wellbeing Plan

Hold initial emergency briefing.	☐
Encourage staff to working from home to keep records diary/receipts.	☐
Maintain planned staff practice meetings via teleconference.	☐
Ensure staff know how to contact Practice's Employee Assistance Program (EAP), or The PHN Members Assistance Program (Phone 1800 931 711).	☐

6. Resume Practice-based care

Address each item in reverse to return to normal operations.	☐
Provide debriefing sessions for staff upon return.	☐
Maintain a Lessons Learned Register for evaluation of contingency plans.	☐
Amend Scenario Planning Tool or Emergency Response Planning Tool with new knowledge.	☐

REFERENCES:

- **Scenario Planning Tool:** Is your general practice prepared for an emergency? HNECCPHN, no version, no date

- Remote Access: **Setting Up your Practice to Work Remotely Guide**, HNECCPHN, no version, no date

- **Immediate Response After a Positive COVID-19 Exposure** in Your Facility Factsheet, HNECCPHN, no date, no version

- Managing emergencies in general practice, RACGP, June 2017

- Managing **pandemic** influenza in general practice, RACGP, 2017

- **Pandemic** Flu Kit Part 2, Implementation guide, RACGP, 2014

- **Pandemic** Flu Kit Part 3, Operational documents, RACGP, 2014

- Guide to Providing **Telephone and Video Consultations** in General Practice, RACGP, 2021

- **Telephone and Video Consultations** in General Practice: **Flowcharts**, RACGP, 2021

- **Telehealth Video Consultations Guide** Supporting-patients-during-telehealth-consultations-with-another-specialist.aspx (racgp.org.au)

- **Patient Fact Sheet:** Having a phone or video consultation with your regular GP, RACGP Phone-and-video-consultations-with-your-regular-GP-Information-for-patients-FINAL.pdf (racgp.org.au)

- Avant - Storing retaining and disposing of medical records

- Avant - Six factors to consider before setting up a home practice