

ATA Guidelines for Telehealth

1. Patient Criteria

- Informed, written consent for “video visits”
- Initial visit includes assessment to determine access to utilities
- Safety concerns appropriate for equipment
- Patient may “un-enroll” at any time -- no penalty
- Someone in home must be able to use/maintain equipment

- Patients requiring interpreters shall not be discriminated against
- Patients shall be properly trained
- Patients cannot be viewed through video without their knowledge and consent
 - HHA in-home viewing site must be approved by patient
 - Any third remote site must also be approved before utilized
- Patient satisfaction with video visits is part of CQI protocols
- First and last visit to home must be in person

2. Health Provider Criteria

- HHA may provide tele-homecare visits where “hands-on” care not required
- Must have physician order to integrate tele-homecare into POT. Changes require mod.
- Video visits may be made by health care professionals within scope of practice
- Such personnel shall be trained and demonstrate ability to do video visits on equipment being used by HHA
- Person making video visit must document visit in chart
- In event of equipment failure, in person visit shall be made as quickly as possible
- HHA staff should demonstrate ability to use equipment and troubleshoot common problems
- Each state decides if it will allow “across state line video visits”
- HHA shall provide patient with clearly written info regarding use of equipment.
- Patients shall have clear directions whom to call if problems arise.
- HHAs need plan of action to provide unscheduled video visits
- Video visits can be incorporated into critical pathways
- If 24-hour tele-homecare service is available, HHA must give written instructions for contacting HHA.
 - Can be done through remote, central location with patient approval

3. Technology Criteria

- Technology should match patient’s clinical and functional needs. May include:
 - 2 way, interactive video
 - Telephonic stethoscope, blood pressure , pulse
 - Oximetry, EKG, glucose monitor, other devices etc
- Central station equipment, to protect patient privacy, should include:
 - Log-in code and password protection
- When installed, tele-homecare equipment checked for accuracy against standard devices
- Procedures must be written and in place that insure clean and well-maintained equipment (per safety codes and infection control standards)
 - At installation
 - While in the home
 - On return to HHA
- Installation kits should include:
 - Written instructions for staff
 - All supplies necessary to assure best picture quality e.g. extension cords, fused outlet bar etc.
 - Adjusted for site and technology chosen
- Safety instructions should be given at install and reviewed as necessary

Instructions who to call about equipment