



# PRACTICE ADVICE

## FAQS: COVID-19 AND PATIENT CARE - 1

EFFECTIVE: APRIL 3, 2020

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These FAQs apply to current patient care. Please stay in contact with the College. We will inform you if any of the answers change because of Ministry directives.

Here at CASLPO we have received many questions from audiologists and speech-language pathologists on how to manage patient intervention during the COVID-19 pandemic. We have included three FAQs here and will develop others as different challenges arise. Always remember, prevent transmitting the virus, keep your patients safe and keep yourself safe.

**Question: I'm an audiologist in private practice and my office is closed to the public due to the Covid-19 pandemic. Can I still go into the office to do admin work like returning phone calls and mailing out batteries or repaired hearing aids?**

**Answer:**

Please consider the best interests of the wider community given that Ontario has declared a state of emergency and the Canadian government has strongly urged all Canadians to stay at home and practice social distancing. Traveling to an office and carrying out administrative work increases your exposure to other people and the risk of community transmission of the virus.

It is strongly advised that you limit time spent in a clinic to tasks that must be done from the office. Only one person should be in the clinic at one time and general hygiene procedures like frequent hand washing and disinfection must be followed.

Our recommendation is to carry out as many administration tasks as possible from home. Ensure that you document any significant patient interactions by phone or e-mail in the patient record.

**Question: I want to start providing telepractice services to my patients who really need intervention. There are so many different products. How do I know if they are safe and comply with PHIPA?**

**Answer:**

As audiologists and speech-language pathologists you are providing service to patients and families in very difficult times. Telepractice presents various challenges, not least of which is maintaining the confidentiality and security of your patient's personal health information. **We expect that you carefully balance the need for intervention with the degree to which you can ensure confidentiality and security.**

The Information and Privacy Officer of Ontario offers the following guidance:

“In a public health crisis, it is understandable that service professionals, especially in the health and child protection sectors, may need to send or receive information by phone, text, email or other messaging services. [This] applies to technologies not normally used for business during this crisis.”

However, there are a number of things you can do to ensure the security of patient information when providing telepractice services.

Ask yourself “how can I keep my patients’ personal health information (PHI) secure?” You have to consider three areas of security:

1. where the patient is physically located
2. where you are physically located
3. the telepractice platform.

You must make reasonable efforts to manage each area, and telepractice technology is likely the most challenging. Please consider the following steps to maximise confidentiality and security.

- If you work for an organization that has an IT department collaborate with them to research a telepractice product that complies with the *Personal Health Information Protection Act (PHIPA)*.
- If you are working on your own or for a small organization, take time to research the different telepractice products and their security features. Go onto a product’s website and put “security features” into the search function. If a company advertises that they are PHIPA compliant, check to see which of their products is PHIPA compliant. It might be that one of their paid versions has the required security features built in. With some products you will have to adjust available security features to meet PHIPA requirements. The product should tell you how to change the features.
- If you see that a product is HIPAA compliant, that is referring to the United States’ *Health Insurance Portability and Accountability Act*. The US has different security requirements. Seek advice on adjusting the security features of the product to make it PHIPA compliant.
- If a patient or family wants to use familiar communication products such as Skype, explain to them that you are providing health care and should avoid the risk of using insecure products. Encourage the patient or family to use secure products explaining that they look and act in a similar manner to Skype.
- If the patient’s needs are acute requiring immediate attention and waiting would impose an unacceptable risk of harm, document in detail your reasons for using any insecure telepractice platforms to provide the required intervention.
- Always be cautious about what personal health information you collect, use and disclose when using telepractice. Only collect the minimum amount of personal health information needed to safely provide services. If you are working with a patient or family who have sensitive PHI,

consider the most secure way to complete different facets of their intervention. For example, you may have to complete the case history by telephone.

If you have a practice with a number of registrants, support personnel and administrative staff, consider designating one person as a security officer.

E-health Ontario have produced a [Guide on Information Security for the Health Care Sector](#). The Guide has useful information for small practices.

**Question: We work with communication disorders assistants (CDAs). We are moving to a telepractice model of service, can the CDA who works with me provide telepractice?**

**Answer:**

Yes, the CASLPO [Position Statement on the use of Support Personnel by SLPs](#) applies to telepractice as well as in-person intervention:

POSITION: Speech Language Pathologists (SLPs) are responsible for all aspects of patient care assigned to support personnel. SLPs are expected to exercise discretion and judgement in assigning tasks. SLPs must supervise support personnel (Code of Ethics, 4.2.4).

In the section "SLP Responsibilities", SLPs must:

- e) Ensure that the support personnel has the knowledge, skill and judgement to provide the intervention assigned. If the support personnel requires additional training/education, the SLP must ensure that it is provided

As the supervising SLP, you have to make sure that support personnel have the competencies to provide intervention to patients via telepractice. If they do not, you should provide education to develop the skills required to provide treatment via technology.