

Information for practitioners who provide virtual care

May 2024

National Boards have developed this document to help registered health practitioners¹ understand how their Board's existing standards, codes, and guidelines, in particular their *Codes of Conduct*², apply when delivering safe and effective virtual care services.

Virtual care

Virtual care is a broad term for health care services provided by practitioners to patients through digital communication channels such as video calls, phone consultations online messaging or similar, that allows them to interact with patients without a physical presence. It can include telehealth (telephone and video-enabled), telemedicine, tele-education, teletherapy, online prescribing and telemonitoring. Virtual care does not refer to the use of technology, such as voice to text notes or automated predictive apps, and similar, during a face-to-face consultation. Not all health services are appropriate for virtual care.

Practitioners can use virtual care if:

- they are appropriately skilled and competent
- it is safe and clinically appropriate for the health service being provided, and
- it is suitable for the patient³.

Expectations when providing virtual care

Your professions *Code of Conduct* defines your National Board's expectations for a practitioner's professional conduct, including the importance of maintaining a high level of professional competence in order to provide the best health care. These codes are also intended to let the community know what they can expect from practitioners when receiving care.

Codes of conduct provide guidance on:

- delivering safe and quality care
- effective communication
- confidentiality and privacy
- informed consent
- health records
- culturally safe and sensitive practice
- professional boundaries
- patients who may have additional needs
- working collaboratively with other practitioners
- practising within your scope of practice, and
- insurance.

[Codes of conduct](#) apply when using virtual care.

National Boards have the same expectations of practitioners using virtual care to provide patient consultations/patient services as they do when practitioners are delivering services face-to-face. When providing virtual care, Boards expect that:

- You will practise in accordance with your Board's regulatory standards, codes and guidelines, specifically that you will:
 - act in accordance with the standards set out in your profession's *Code of conduct* or equivalent including expectations about confidentiality and privacy, informed consent, continuity of care, providing good care, communication, health records and culturally safe practice. Further information about the Codes of conduct or equivalent is available [here](#), and
 - ensure you have appropriate professional indemnity insurance (PII) arrangements in place for all aspects of your practice, including virtual care consultations. If you or your patients are not located in Australia, you likely will require additional cover. Your PII provider can advise you about your PII cover.

1 The term *registered health practitioners* refers to individuals registered under the Health Practitioner Regulation National Law, as in force in each state and territory, to provide a health profession. It does not refer to individuals who hold non-practising registration.

2 Each of the 15 National Boards have an approved code of conduct or code of ethics that applies to the registered health practitioners they regulate, the details of these can be found on the Ahpra [website](#)

3 *Patient* means a person who has entered into a therapeutic and/or professional relationship with a registered health practitioner. The term 'patient' includes 'clients' and 'consumers'. It can also extend to their families and carers (including kinship carers), and to groups and/or communities as users of health services, depending on context.

- You are aware of and comply with:
 - legislative requirements including (but not limited to) requirements from authorities that regulate the capture and storage of health information, including health records, videos and images, and digital image prescriptions,
 - privacy legislation and/or any other relevant privacy requirements,
 - when appropriate, the use of government health and prescription monitoring services such as Prescription Shopping Programme, My Health Record, Healthnet, Real Time Prescription Monitoring platforms, and
 - any other relevant legislation and/or regulatory requirements.

Guidance for medical practitioners

The Medical Board of Australia has developed [Telehealth consultations with patients](#)

Delivering safe, effective health services using virtual care

You can deliver safe, effective health services using virtual care by adhering to the same principles you apply when providing care during a face-to-face consultation.

The lists below are not exhaustive but provide some helpful steps to use virtual care safely and effectively in your practice.

Preparing to use virtual care

- Consider whether virtual care is an appropriate and viable method in which to deliver the particular health care service. Not all health services or consultations are appropriate for virtual care. An initial consultation, for example, may require a physical examination, or a particular treatment methodology may not be appropriately delivered via virtual care.
- Regularly assess and reflect on your knowledge, skills and competence to use virtual care and undertake relevant CPD when required.
- Ensure your chosen technology meets your clinical requirements, your patients' needs and complies with relevant privacy legislation and other requirements (e.g. MBS telehealth arrangements).
- Be transparent with patients and prospective patients if you have any financial interest in any virtual care product or service you may be endorsing for financial compensation or selling.
- Be aware of your obligations and the risks of using AI, Apps and/or Chat Bots and similar technology to simulate a conversation regarding the provision of care. You should ensure patients are aware they are not consulting with a registered health practitioner, routinely check in with patients who are accessing care via these applications and ensure patients are informed of the limitations of these applications.

At the beginning of a virtual care consultation

- Identify yourself and confirm the identity of your patient.
- Provide an explanation to your patient of what to expect from a virtual care consultation.
- Ensure information is provided to your patient in a way they understand and that informed consent is obtained. In particular:
 - the technology and/or communication method to be used
 - how an online link will be secured (if relevant)
 - any associated fees
 - proposed treatment
 - sharing of information with others in their care team, and
 - if you are recording the consultation.
- Assess (and regularly re-assess) whether virtual care is safe and clinically appropriate for the patient, particularly noting the limitations of virtual care, and whether it is necessary for the patient and practitioner to be in each other's physical presence in order to provide good care.
- If, because of the limits of technology, you are unable to provide a service then you must advise the patient of this and facilitate access to alternative care arrangements (e.g. a face-to-face consultation).
- Ensure you protect your patient's privacy and their rights to confidentiality. Be aware that virtual care technology enables patients to access services from their home, work or a public environment. These environments may not always be safe for the patient and may not adequately protect their privacy and confidentiality. Consider whether anyone can overhear the consultation and confirm the patient consents to this.

During a virtual care consultation

- Ensure you effectively communicate with your patient to establish their presenting condition and any relevant information such as social and family history, current treatment, and past health and medication history.
- Take all practical steps to meet the specific language, cultural, and communication needs of patients, including by using translating and interpreting services where necessary, and being aware of how these needs may affect understanding⁴.
- Support the health and safety of Aboriginal and Torres Strait Islander patients by ensuring you engage in culturally safe practice for all virtual care consultations.

Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families, and communities. Culturally safe practise is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours, and power differentials in delivering safe, accessible and responsive healthcare free of racism.

- Being conscious of any specific care needs e.g. the importance of relationships with the relevant Aboriginal Community Controlled Health Organisation and their referral pathways when providing care to Aboriginal and Torres Strait Islander patients.
- Use evidence-informed practices to reflect the standard of care expected in a face-to-face consultation, as much as possible.
- Ensure you maintain clear and accurate records of the consultation, in accordance with relevant legislative and any other requirements. More information about [managing health records](#) is available on the Ahpra website.

Ensuring continuity of care

- Where indicated and appropriate make arrangements to either handover or follow up the progress of your patient
- Where indicated and appropriate and with the consent of the patient inform other relevant health practitioner(s) of the treatment or advice provided, including any medications or other assistive technologies prescribed or provided.

Prescribing and virtual care.

Registered health practitioners who prescribe medication should be aware of and comply with relevant state, territory and jurisdictional legislative requirements for prescribing medicines.

Prescribing medication or other assistive technologies (for example orthoses or glasses) for a patient with whom you have never consulted, whether face-to-face, via video or telephone is not good practice. This includes requests for medication or other health services communicated by text, email or online that do not take place in real-time or based on the patient completing a health questionnaire where the practitioner has not formally consulted with the patient.

Any practitioner who prescribes for patients in these circumstances may be asked to explain how the prescribing and management of the patient was appropriate and necessary.

Registration requirements.

Providing virtual care to patients in Australia.

Australian registered health practitioners located outside Australia wanting to provide virtual care services to patients in Australia are expected to continue to comply with the relevant National Boards' regulatory frameworks including standards, codes, and guidelines.

National Boards expect that you will:

- be transparent about your location and inform your patients about any associated risks or impacts
- ensure you have appropriate professional indemnity insurance arrangements in place for all aspects of your practice, including virtual care consultations and ensure you have adequate coverage when based outside Australia

⁴ Ahpra shared Code of conduct; Effective communication; p10; <https://www.ahpra.gov.au/Resources/Code-of-conduct/Shared-Code-of-conduct.aspx>

- ensure that you are meeting your ethical and legal obligations to protect the privacy of patients and that your patients' personal health information is safely stored, and practitioners and patients should be aware that the information may be stored outside Australia and subject to additional privacy legislation and requirements for regulating and storing health records
- check with the regulatory authority for your profession in the jurisdiction you intend to practise and with Australian health services and funders such as Medicare in relation to any other requirements these bodies may have, and
- ensure you adequately maintain quality continuity of care and referral networks in Australia, to enable safe referral of patients if/when required.

Providing virtual care to patients outside Australia.

Registered health practitioners in Australia who wish to provide virtual care services to patients located outside Australia are expected to continue to comply with the relevant National Boards' regulatory frameworks including standards, codes, and guidelines, including ensuring they hold appropriate professional indemnity insurance.

These practitioners should check whether they are required to be registered by the relevant regulatory authority for their profession in the country where the patient is located and comply with legislative requirements in that jurisdiction, including for prescribing and professional indemnity insurance.⁵

Information for practitioners registered outside Australia.

Practitioners who are registered outside Australia are expected to be registered by the relevant National Board for their profession in Australia before providing a health service⁶ to patients located in Australia, including virtual care services. Limited exceptions may apply in circumstances where the patient is located in Australia, managed by an Australian-registered practitioner, and another practitioner is providing a second opinion or advice to that practitioner.

Refer the relevant National Board's website for more information about registration, including when the Board expects a practitioner will be registered.

Information for nurses

The Nursing and Midwifery Board of Australia supports the International Nurse Regulator Collaborative (INRC)'s position statement on [Practice location and Inter-country nursing practice](#).

This statement sets out that nurses must be currently registered/licensed in the country where the patient is located unless practising under a mutual recognition licensure/registration agreement between countries.

Helpful resources

There is a range of information and resources about virtual care available. The list below is not intended to be exhaustive and the use of virtual care in your practice may be subject to additional requirements.

- State and territory health departments have information and resources about virtual care.
- The Digital Health Cooperative Research Centre has developed a [telehealth hub](#) dedicated to telehealth resources.
- The Department of Health's [MBS website](#) has information specific to the MBS items for telehealth.
- The [National Strategy for the Quality Use of Medicines](#) provides information for practitioners on things to consider when prescribing, either face-to-face or virtually
- Your professional association(s) may have profession-specific information and resources about virtual care.
- [Culturally Safe eHealth Interventions with Aboriginal and Torres Strait Islander People: Protocol for a Best Practice Framework](#) , Chelberg GR, Butten K, Mahoney R; eHRCATSIH Group. The overall aim of this research program is to produce a best practice framework that will guide the co-design, implementation, and evaluation of culturally safe eHealth interventions with Aboriginal and Torres Strait Islander people.

Review

Last reviewed: X

⁵ Medical Board of Australia; Telehealth consultations guidelines;

⁶ A health service is defined in the National Law as including services provided by registered health practitioners (s.5).