



# Use of Telehealth for Mental Health Assessments and Examinations Policy

## 1. Background

The *Mental Health Act 2014* (WA) [‘the Act’] allows people located in non-metropolitan centres to be assessed or examined using audio-visual means (videoconferencing) if it is not practicable for the practitioner and patient to be in each other’s physical presence [section 48(3) and section 79(3)].

## 2. Policy Statement

This policy outlines how videoconferencing is to be used when assessing or examining people who are subject to the *Mental Health Act 2014* (WA) in the WA Country Health Service (WACHS).

All relevant provisions of the Act, clinical practice standards and policies apply as if the patient were being assessed or examined in person.

## 3. Definitions

<b>Audio-visual Communication (AV)</b>	A form of communication which has both a sound and a visual component such as videoconferencing to provide real time, synchronous video and audio transmission between locations
<b>Health Professional</b>	Medical practitioner, nurse, occupational therapist, psychologist, social worker.
<b>Providing site</b>	The site at which the Psychiatrist or Authorised Mental Health Practitioner is located during the consultation
<b>Receiving site</b>	The site at which the patient, the health professional and (where appropriate and possible) a carer or personal support person are present. In the case of a child, a parent or guardian must also be present.
<b>Additional Site</b>	The site from which a third party (e.g. carer or personal support person or in the case of a child, a parent or guardian) joins the videoconference.
<b>Authorised Hospital</b>	A public hospital or part of a public hospital, in respect of which an order is in force under section 542.

## 4. Roles and Responsibilities

### 4.1 All Staff

There is to be no AV or audio recording of a consultation without written informed consent of the patient and any third parties present.

### 4.2 Health Professional

The health professional is to:

- determine whether the patient's clinical state allows for safe and effective assessment or examination by videoconference
- provide the consulting practitioner all relevant information relating to this presentation and the patient's available medical and psychiatric history
- provide the patient with written and verbal information about the process, privacy, confidentiality and relevant technical aspects of assessment by videoconference and makes every effort to ensure that the patient understands (as far as is practicable) that information
- provide the patient with written and verbal information about their rights under the Act and makes every effort to ensure that the patient understands them, as far as is practicable
- include any personal support persons as far as is practicable
- make every effort, as far as is practicable, to ensure that the patient is involved in all decisions
- clearly document the consultation in the clinical record, noting at a minimum:
  - that it was conducted by videoconference, the reasons for the decision to use videoconferencing and which section of the Act permits this
  - the sites that were linked and names of those in attendance at all sites
  - any factors impacting on the quality of the communication
  - the outcome of the videoconference assessment and resulting treatment plans
  - that the patient was provided with written and verbal information in relation to the process, privacy, confidentiality and relevant technical aspects of the assessment.

### 4.3 Consulting Practitioner (Consultant Psychiatrist or Authorised Mental Health Practitioner) assessing the patient under the MH Act.

The Consulting Practitioner is to:

- ensure the patient receives an explanation and understands, as far as is practicable, the process of conducting the consultation via videoconference and their rights under the Act. Determine whether videoconferencing will allow an adequate assessment or examination of the patient.
- make every effort, as far as is practicable, to ensure the patient is involved in decision making.
- provide immediate verbal advice, as far as is practicable and with consideration of the safety of the patient and the health professional, about the outcome of the consultation, including orders to be made under the Act, to the patient, health professional and where appropriate, carer or personal support person.

- provide a detailed written assessment, treatment recommendations and case specific information to facilitate local care providers in:
  - ongoing provision of care, or
  - safe transfer of care in line with the Act and relevant clinical practice standards and policies
- liaise with appropriate local care providers to support implementation of the treatment plan and promote the ongoing safety and care of the patient.

#### **4.4 Health Professional at the Patient's Site**

The health professional present with the patient is to:

- manage the videoconference equipment
- ensure patient safety
- provide relevant clinical information to the assessing psychiatrist
- ensure that, where support persons are present, they are able to participate as appropriate
- document time and outcomes of assessment including those present and the details of the assessing clinician in the medical record.

#### **4.5 Aboriginal Mental Health Worker**

The Aboriginal Health Worker is to:

- support the patient
- advocate for individual needs
- support social and emotional well-being
- ensure cultural issues are considered.

#### **4.6 Children**

If the person being assessed is a child, the responsibilities of the health professionals detailed in sections 4.2, 4.3, 4.4 and 4.5 must include the child's care givers.

## **5. The Consultation**

### **5.1 Prior to the consultation**

- If the patient is Aboriginal<sup>1</sup>, where practicable, an Aboriginal Mental Health Worker, Traditional Healer, Elder and or family member may be present during the assessment.
- Make arrangements for any additional clinical support and where practicable, clerical support if required.
- The health professional and consulting practitioner will have a preliminary discussion about:
  - relevant clinical information
  - who will be present and the relationships between them

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<sup>1</sup> Within Western Australia, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. No disrespect is intended to our Torres Strait Islander colleagues and community.

- risk factors and appropriate strategies, including additional support available if required
- whether a videoconference consultation is the best way to proceed.
- If required to assist, the additional support person may be used to:
  - select the equipment and locations to be used for the consultation and ensure that they are suitable and available
  - book the videoconference consultation and provide dial-in details to all parties
  - ensure all involved are aware of the appointment time
  - ensure equipment at all sites is working
  - ensure mobile phone and phone coverage is available at all sites for use in the event of equipment failure (mobile phones are essential in the event of power failure) and that all parties have the correct phone numbers.

### 5.2 Conduct of the consultation

- The consultation with the patient will commence once all equipment is working, the call connected and all parties are present.
- The consulting practitioner at the providing site will identify each person present and facilitate introductions, outline the process and manage the consultation ensuring all parties have adequate time and opportunity to contribute.
- The consultation can be terminated by the patient, the health professional or the consulting practitioner for reasons of safety, call quality or any other factor likely to impede a successful consultation. Third parties can leave the consultation at any time but not terminate it.
- In the event of unplanned termination of the consultation for any reason, the consulting practitioner will remain on standby and the Health Professional will:
  - first ensure the safety and well-being of the patient and any others present
  - contact the consulting practitioner to discuss:
    - the need for further information
    - the best course of action to ensure safety of the patient and others
    - whether adequate consultation has occurred to make an order under the Act.

### 5.3 Following the consultation

- In line with the outcome of the consultation and the relevant sections of the Act, the health professional and the consulting practitioner will liaise with relevant clinical staff to ensure appropriate support and treatment is provided to the patient.
- Documentation is to be completed in accordance with clinical practice standards and policies.
- Once complete, the documentation will be placed in the clinical record and forwarded as per the requirements of the Act and relevant clinical practice standards and policies.

## 6. Compliance

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Employment Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (HSA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

## 7. Evaluation

Evaluation of this policy is to be carried out by the Executive Director Mental Health every two (2) years, or as required.

## 8. Standards

[National Safety and Quality Healthcare Standards](#) (First edition 2012):

1.8.1, 1.17.2, 1.18.1, 8.10, 8.12

[National Safety and Quality Healthcare Standards](#) (Second edition 2017):

1.15b, 1.6.1, 2.3, 2.8.1

[National Standards for Mental Health Services](#): 1.9, 3.2, 6.5

[EQulPNational Standards](#): 12.2.1

## 9. Legislation

[Mental Health Act 2014](#) (WA)

## 10. References

Addendum 7: [Use of audio-visual communication Clinicians Practice Guide](#)

[Use of audio-visual communication Clinicians Practice Guide](#).

WACHS intranet page [Introduction to Telehealth](#)

The Royal Australian and New Zealand College of Psychiatrists - [Telehealth in Telepsychiatry](#).

[Office of the Chief Psychiatrist - Clinician's Practice Guide to the Mental Health Act 2014, \(WA\) 3<sup>rd</sup> Edition 2015](#)

## 11. Related WA Health System Policies

[OD 0489/14 Statewide Telehealth use Policy](#).

## 12. Policy Framework

### Mental Health Policy Framework

**This document can be made available in alternative formats  
on request for a person with a disability**

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