

ED 031 Remote ECTV (External Clinical Teaching Visit) Policy and Procedure

1. Purpose

The purpose of this document is to outline how remote ECTVs are to be performed within MCCC.

2. Scope

To outline the reasons behind which video conferencing platform has been chosen by MCCC to livestream remote ECTVs and what measures can be taken to minimise the risks associated with video conferencing platforms. It also outlines the procedure to use when conducting a remote ECTV via a video conferencing platform. This policy relates to all MCCC medical educators, all MCCC supervisors including those undertaking remote ECTVs and all registrars and practice managers involved in the process. It relates to all MCCC operations staff including the ICT team who have been involved in this process.

3. Definitions

Remote ECTV: an external clinical teaching visit that is performed using livestreaming rather than being performed face to face.

Remote ECTV Visitors: all Medical Educators and Visiting Supervisors

For all other definitions please refer to TO 004 MCCC Acronyms, Abbreviations and Definitions

4. Principles

During the COVID 19 pandemic, external clinical teaching visitors (medical educators and supervisors) have been unable to perform ECTVs face to face. MCCC has had to move to the remote ECTV model, which has been accepted by the RACGP as an appropriate alternate model. Remote ECTVs will be undertaken as live streamed ECTVs (rECTVs).

1. The MCCC ICT Department determined Zoom to be the optimal platform for livestreaming of rECTVs¹.
2. Rationale:
 - a. Ease of use. Optimal use of Zoom will ensure that the educational experience and value of the external clinical teaching visit for the registrar, educator and supervisor is minimally disrupted by using this remote format.
 - b. There was no storage or recording of data (recording is possible but is user activated)
 - c. With the correct use of the platform security is achievable. However, for security to be optimal it is essential that all users follow the procedure² as outlined below.
3. All remote ECTV visitors must use the MCCC professional (full licence) Zoom account (with version 5 downloaded) to send invitations to the registrar and to livestream the visit.
4. Any breaches of security recognised during an rECTV must be immediately reported to the regional head of education (RHE) and the MCCC ICT department.

Any person wishing to utilise another platform to perform remote ECTVs must contact their regional RHE before booking or proceeding with the remote ECTV.

5. ¹Procedure for and the optimal use of Zoom livestreaming

1. All remote ECTV visitors must read and follow the guidance and summary documents before undertaking an rECTV (linked below).
2. All remote ECTV visitors must ensure that they have had a 'trial run' of the technology with the registrar prior to the visit.
3. All patients booked for the rECTV must have either signed the rECTV consent form (which is then scanned into the patient file) or had it read to them at booking or emailed to them and signed and returned prior to the visit. MEs/visiting supervisors must ensure that either signed or documented verbal consent has been obtained for all patients. Registrars must confirm verbal consent at the start of any telehealth consultation that is being remotely observed.
4. Remote ECTV visitors must ensure that while observing the registrar remotely, they are in a private secure location and that consultations cannot be overheard or observed by a third party.
5. Remote ECTV visitors who are not confident in ZOOM use or who have not previously used Zoom for rECTVs should view the 'how to Zoom' videos available on MeL/MCCC homepage.
6. All other issues can be referred to your Regional Head of Education.

6. Related documents or websites

[TOF 022 rECTV Patient Consent](#)

[Guidance document - rECTV processes for Medical Educators and Visiting Supervisors](#)

[Remote ECTVs Instructional Videos](#)

[TO 004 MCCC Acronyms, Abbreviations and Definitions Resource Document](#)

¹ MCCC has configured the Zoom platform, as recommended, specifically for the purpose of privacy and security for use in clinical telehealth settings and all reasonable precautions have been taken. However, there is not a single set of comprehensive guidelines applicable to Australian telehealth.

We have researched opinions from our stakeholders and provide you with the following information:

- **The Department of Health** has confirmed that for Medicare purposes, no specific equipment is required to provide Medicare-compliant telehealth services
 - Services can be provided through widely available video calling apps and software such as Zoom, Skype, FaceTime, Duo, GoToMeeting and others
- The **Victorian Department of Health and Human Services** states that no specific equipment is required to provide Medicare-compliant telehealth services. They can be provided through

widely available video calling apps and software such as Zoom, Skype, FaceTime, Duo, GoToMeeting and others

- The **RACGP** states Skype and other free video software (such as WhatsApp, Facebook Messenger and Tox) are convenient and widespread and they support the use of these platforms for use in clinical settings
- **ACRRM** has advised that it is 'reasonably safe at the present time' to use general video conferencing software for calls
- The websites of six **Medical Defence Organisations or MDOs** were also reviewed for information on telehealth. All six MDOs cover claims related to telehealth, with Avant Mutual stating Zoom, Skype, FaceTime, Duo, GoToMeeting and others are acceptable. MDA stated that they did not have a technology preference, but Skype may be **inappropriate** due to privacy, confidentiality and quality issues. MIPS stating any freely available software was acceptable the other MDOs did not have any technology preferences stated.