Practice Guide for Virtual Home Assessments

The intent of this document is provide practice guidance for occupational therapists who conduct, or are considering conducting, virtual home environmental assessments. For the purpose of this document, virtual home assessment includes communication by phone and /or by video. Virtual assessment does not include an in-person face-to-face visit by the clinician.

Virtual assessments by video require unique clinical competencies and advance preparation. This document is not intended to train occupation therapists how to assess the person - environment fit as it impacts on occupation. It is designed as a tool to identify some of the multiple facets that need to be considered when conducting a virtual assessment.

Certain client / clinical situations cannot be easily or safely assessed virtually and may require an in person, observational assessment. For those situations, clinicians need to consider what information can be gathered virtually before proceeding on an in-person, hands on assessment.

Guiding Principles

- The client has the right to decline a virtual assessment / intervention.
- Client physical safety must be maintained.
- The primary role of the occupational therapist does not change, enabling meaningful occupations.
- Develop and maintain the therapeutic relationship (i.e., trust, rapport and communication).
- Communication needs to be clear and concise, recognizing the limitations of virtual care in relaying non-verbal information.
- Virtual care is not all or nothing but can be combined with in-person intervention.
- Virtual health care intervention does not change pre-existing standards of care (informed consent, confirmation of client identity, privacy / confidentiality, regulatory requirements [i.e. ACOT Standards of Practice], documentation requirements)
- Consider trans-disciplinary competencies and the use of technology to facilitate completion of tasks.
- Additional education may be required for clinicians to become comfortable in integrating virtual care into clinical interventions.
- The recording of virtual health interventions is not approved by AHS. See the <u>Virtual Health Insite page</u> for further direction and resources.

Enablers

The following identifies person and environment factors that facilitate successful virtual home assessments.

Clinician

- Is already familiar with the client from previous encounters.
- Is familiar with the home setting (i.e., client lives in a congregate living setting where the rooms have a similar set up).
- Has used the technology before or has done a practice session with a colleague.

Refer to the document Considerations for Virtual Home AADL Equipment Assessments for specific guidance for assessment for AADL funded equipment



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Virtual Home Assessment Practice Guide

 Has collaborated with a team member who is familiar with the client and with the home environment.

Client

- Is ready, willing, and able to use virtual technology.
- Has experience with virtual technology or is given the opportunity for a practice session.
- Has friends, family or caregivers able to provide in-person assistance.
- Has simple and straightforward occupational concerns and strong personal (social, emotional, cognitive) resources.

Environment is

- Clear of clutter, has good lighting, and enough space to get a clear view.
- Quiet and free of distractions.

Technology

Client's device has:

- A camera, microphone, and adequate speakers or headset, and the ability to have the Zoom app installed.
- A screen large enough for them to see but portable enough to take it throughout the home if required.
- (nice to have): a stand so the device can be propped up on a table or counter

The client's home has:

• Strong, reliable, Wi Fi with enough bandwidth for video.

Potential Barriers

The following factors need to be considered as potential barriers to virtual health and may indicate the need for an initial in-person visit. The approach to future visits (virtual or in-person) may depend upon the ability to overcome the barriers identified.

The client has

- Expressed that they are unable or not interested in a virtual visit.
- A health condition-specific and/or family-specific factors that warrant a regulated health professional in-person presence to mitigate the possibility of adverse events (i.e., risk of falls or pressure injury).
- Cognitive or mental health challenges affecting their ability to participate in the assessment.
- Physical or sensory limitations affecting their ability to participate.
- Language barriers and neither a family nor a professional interpreter are available.
- Cultural views on technology and rehabilitation that render virtual care inappropriate.

The Home

- Is cluttered, has poor lighting, or cramped spaces so the clinician will be unable to get a clear view.
- There are pets in the home which could present a falls risk or a distraction (noise or attention).



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Practical Tips

Preparation Phor	ne Call with Client		
Technology	Confirm the client has a:		
	 Device with a camera, microphone, and adequate speakers or headset. 		
	Screen large enough for them to see but portable enough to take it throughout the home if required.		
	 Strong, reliable, Wi Fi with enough bandwidth for video. Data plan with sufficient available data and that will not result in financial hardship if proceeding with the virtual visit. 		
	Device that has the ability to have the Zoom app installed.		
	Nice to have a:		
	 Stand so the device can be propped up on a table or counter. Extension pole to provide a higher or more distant view. 		
Scheduling/ Practice	☐ Share the AHS <u>Patient Guide to using Zoom</u> (which includes links to instructional videos).		
	Practice a virtual meeting prior to the assessment meeting (if		
	appropriate).Schedule extra time for preparation and follow up and recognize the		
	virtual session may need to be longer than a usual in-person		
	assessment due to extra explanation and set up. Virtual assessment may be more fatiguing for clients so you may need		
	to consider additional, shorter sessions.		
	Inform the client of any equipment / materials they will need (i.e., measuring tape, paper & pen, transfer belt, hand sanitizer).		
Client Safety /	Discuss:		
Preparation	Obtain verbal consent to be able to proceed with a virtual visit.		
	☐ Is the client able to independently mobilize and transfer?☐ Confirm with the client who will be providing in home physical		
	assistance (if required), and who will be assisting with the device. If no family, friend or care provider support is available, are there other health providers available? (i.e., nurse or therapy assistant).		
	☐ Back-up plan if virtual technology fails (i.e. phone available).		
	Confirm home address that the virtual visit will be occurring from and who to contact in case of an emergency during the virtual call.		
	☐ Safety preparation:		
	☐ Clutter removed.☐ No pets in the assessed areas (distraction and tripping hazard).		
	Appropriate clothing and footwear.		
	Mobility aids (cane / walker, wheelchair with functional brakes).If indicated, a stable chair nearby for balance.		



During the Video Call			
Setting the Stage		Introductions – ensure to provide name, occupation and duty (NOD). Confirm two patient identifiers.	
		Discuss goals and expectations for the virtual call (including duration)	
		Obtain verbal informed consent to proceed with the virtual visit.	
		Acknowledge that this might be new for the client and thank them for	
		giving it a try.	
		Determine if there are any other individuals present and if indicated,	
		identify their role.	
		Confirm that the client is not using Zoom to record the session. You may ask if the client is recording the session with another device.	
		Ensure the clients' camera is providing the view you need to see.	
	_	Request that the device be moved as indicated to improve the view.	
		Check with the client to ensure they have an adequate view of	
	_	yourself. Move your camera as indicated to improve the view.	
		Let the client know they can stop the virtual session at any time.	
		Carefully attend to the clients and your own verbal and non-verbal	
		cues throughout the session. Technology can be frustrating for	
		everyone at times.	
Safety/ Equipment /		Confirm there is someone in the home to provide physical assistance if required, as well as another individual to help hold and operate the	
Devices		device.	
		Discuss what the assistance will look like for safe mobility and transfers.	
		Confirm the back-up plan if the call or virtual technology fails (i.e.	
		phone available).	
	u	Safety check:	
		Check lighting quality, request blinds / drapes be opened or additional lights be turned on if needed.	
		☐ Clutter removed.	
		No pets present in the areas being assessed.	
		Ensure appropriate footwear, request appropriate clothing if indicated.	
		☐ Mobility aids (cane / walker, wheelchair with functional brakes).	
		☐ If indicated, a stable chair nearby for balance.	
		Confirm the equipment / materials are in place (i.e., measuring tape,	
		paper & pen, transfer belt, hand sanitizer).	
		Do not put the client at risk. Monitor the situation at all times for safety. Do not rely on the individual providing physical assistance or the individual assisting with the device to be responsible for stand by	
		safety monitoring.	



Virtual Home Assessment Practice Guide

Virtual Tour	 □ Request the camera operator to provide a 360° view including the floor BEFORE the client proceeds into the space being assessed. Identify and rectify any hazards before proceeding. □ Ensure to tour the entire environment including entrances. □ While observing the client's mobility, make sure you can see their feet to adequately look at footwear and gait dynamics. Request a different camera angle or view if it will help provide better information. □ If assessing transfers or equipment use, ensure adequate camera view is available and that person providing physical assistance is not blocking view. 			
If Conducting an In-Person Home Visit				
Prepare for Future Video Calls	Consider if a virtual follow-up would be appropriate.			
	 If appropriate, plan for extra time during the home visit to discuss and coach. Come prepared with a copy of the AHS <u>Patient Guide to using Zoom</u> (which includes links to instructional videos). 			
	Complete the virtual visit <i>Preparation Phone Call with Client Practical Tips</i> section as an in person session. Provide training on using virtual technology:			
	If the client has a device, assist them in downloading the Zoom app and show where the instructional videos can be found.			

References

ACOT Interim Practice Advisory – Considerations for the Delivery of Occupational Therapy Services through Electronic Means http://acot.ca/wp-content/uploads/2020/03/Practice-Advisory-OT-service-delivery-using-electronic-means.pdf

AHS Virtual Practice Guidance for Allied Health Professionals

https://insite.albertahealthservices.ca/main/assets/tls/ep/tls-ep-covid-19-allied-virtual-practice-guidance.pdf

