

Ways of Working: Guidance for Addiction Services on Remote Consultations

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Introduction

The Covid-19 pandemic has brought with it unprecedented challenges for Addiction Services and an urgent need adapt to new ways of working and to ensure that our service users continue to receive the help they need despite the obstacles that this crisis presents. It was recognised early on that this *tyranny of distance* could potentially be bridged by use of the telephone, and video links where these were in existence and are approved for use. Numerous issue have arisen, along with what is often people's first experience of working remotely. This guideline is therefore an evolving document, to be informed by those impressions and encounters, and presented in the dual interests of best practice and a pragmatic approach.

Before contacting the Service User, consider the following:

- Do you know them already? If not be aware of additional considerations undertaking a telephone consultation with a service user/family member/carer not known to you.
- Is the service user/family member/carer currently based in Ireland? If not, you may need to advise them to attend the local service wherever they are based.
- Do you have access to their records, recent letters or initial assessment summary?
 Make efforts you familiarise yourself with important details from their records such as history/risk/allergies/current and past treatments before commencing the consultation.
- Are you using a secure form of communication?

Once you commence the consultation, consider the following:

Are you talking to the correct patient? Ask them for DOB/Address to confirm.

- Have you clearly explained who YOU are as the professional? If this is a video consultation, consider showing your ID badge to the camera.
- Advise the service user/family member/carer where you are ringing them from, and reassure them that you are in a room alone in order to protect their privacy; reassure the service user/family member/carer that if it is a video consultation, it is NOT being recorded or streamed.
- Have you advised the service user/family member/carer of the importance of privacy and confidentiality in THEIR location as well as yours? Advise them that they need to be in a room alone, or if they wish another person to be present, check that they are consenting to you undertaking a consultation in the presence of this person, and ask who this person is so you can document their name in your records and confirm same with patient.
- Have you explained the reasons, risks and benefits for the consultation being remote
 instead of face to face? (reasons: COVID 19 affecting service delivery; benefits: social
 distancing, reduce risk of infection in light of COVID 19; risks: communication may
 not be as effective as face to face consultation, communication may not be as secure
 due to technological issues).
- Have you checked with the service user/family member/carer that they consent to proceed using a remote consultation process?
- Advise the service user/family member/carer that the duration of the appointment will be that of a regular review appointment.
- Undertake information gathering and risk assessment in as thorough a manner as usual, whilst being aware that you will be missing non-verbal communication cues if this is a phone consultation as opposed to a video consultation.
- Consider at the end of the consultation whether you need to follow-up with a face to face consultation, and if so, advise the service user/family member/carer of this and check their willingness to proceed.
- Ensure the usual measures are adhered to at the end of the consultation, ie. Advice, recommendations, safety netting and follow-up plan.

After the consultation, adhere to the following documentation practices:

- Ensure the date and time of the consultation is recorded.
- Ensure you document that the consultation was undertaken remotely.
- Document your location when undertaking the consultation.
- Document the patient's location when undertaking the consultation.
- Document what method you used to undertake the consultation (phone/video, and if video what was the software).

- Document that you have advised the service user/family member/carer of the need to undertake a remote consultation.
- Document that you have checked their understanding of this and their consent to proceed in this format.
- Document that you have checked that they are in a room alone, or if they have a person with them, that they are consenting to proceed in the presence of this person, and you have documented the identity of the person present.
- Document your clinical findings in the usual manner.
- Document your advice, recommendations, safety nets and follow-up plan in the usual manner.
- If you do not have access to the service user/family member/carer clinical file, ensure that the documentation is forwarded securely to the location where the original chart is located so that it can be filed securely and chronologically.