Guidelines for Telepractice in Occupational Therapy

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Originally Issued 2001
Introduction

With advances in technology, clients, occupational therapists (OTs), employers and other stakeholders are seeking alternatives to face-to-face professional interactions. Requests to access occupational therapy services through information and communication technologies (ICT) are becoming more frequent, particularly in the following situations when:

- OTs and their clients are not in the same location.
- OTs or clients are temporarily out of province and seeking a seamless continuation of service.
- Clients living in one jurisdiction are exploring occupational therapy services in other locations.
- Employers are exploring the delivery of occupational therapy services from a centralized location to clients across the country.

Telepractice refers to the use of information and communication technologies (ICT) for the purpose of delivering health care services when the client and occupational therapist are in different physical locations. It is seen as a means of improving health outcomes by removing barriers to access services.

Telepractice allows OTs and clients to work together through the use of various technologies, including video conferencing, remote monitoring, virtual apps, video games, and data transmission. Telepractice facilitates service provision between OTs, clients and other health care providers for assessment, treatment, monitoring, and consultation.

This guideline aims to help OTs:

- understand the complexities of telepractice, and
- determine if telepractice is an appropriate approach for use with their clients.

Guidelines cannot address all circumstances. The College expects OTs engaging in telepractice to stay informed of relevant changes to legislation, regulations, standards, policies and procedures.


These guidelines are intended to facilitate the use of professional judgement by OTs. As with any service or method of service delivery, OTs need to exercise their judgement case by case. The OT’s

1World Federation of Occupational Therapists, 2014
2World Federation of Occupational Therapists, 2014
3World Federation of Occupational Therapists, 2014
fundamental responsibilities to clients remain the same whether service is provided face-to-face or by telepractice.

**Overview**

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1. Jurisdiction

OTs should know and apply the legislation, standards and guidelines for telepractice services within the client’s jurisdiction.

The College of Occupational Therapists of Ontario has jurisdiction over occupational therapists who are registered and practice within Ontario. Different rules may apply outside of Ontario.

The jurisdiction for the provision of occupational therapy services is defined by the location where the client resides. If the client is residing in Ontario, then the jurisdiction for OT services is Ontario. If the client resides in British Columbia, then the jurisdiction for OT service delivery is British Columbia regardless of where the OT is located.

Where telepractice service is provided to clients residing outside Ontario, the OT should be aware of the legislation, professional standards of practice and regulatory requirements in the client’s location. The OT should not assume that the standards applicable in Ontario would be the same as those which apply in the client’s jurisdiction. OTs registered in Ontario are also accountable to the College in Ontario even though they may be providing service to a client in another jurisdiction.

If OTs wish to provide services to a client residing outside Ontario, the OTs are responsible for determining what, if any, regulatory or registration requirements exist in those other jurisdictions. The following chart outlines the regulatory requirements for Ontario based on the location of the OT and the client.
### Regulatory Requirements for Providing Occupational Therapy Telepractice

<table>
<thead>
<tr>
<th>OT Location</th>
<th>Client Location</th>
<th>Registration</th>
<th>Legislation &amp; Standards</th>
<th>Professional Liability Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registrant in Ontario</td>
<td>Client in Ontario</td>
<td>COTO</td>
<td>Comply with the COTO Standards of Practice, applicable legislation and regulations</td>
<td>Professional liability insurance must include sexual abuse therapy and counseling fund endorsements as per College bylaws, part 20.</td>
</tr>
<tr>
<td>Registrant in Ontario</td>
<td>Client outside Ontario</td>
<td>Regulatory organization where client resides. Registration may be required in the jurisdiction where the client resides.</td>
<td>Comply with the regulation, legislation and standards of practice in Ontario and the jurisdiction where the telepractice service will be provided. Clients must be notified of the location from which the OT is providing service.</td>
<td>Contact the regulatory body in the client’s location to obtain the requirements for professional liability insurance. The OT should contact their own professional liability insurance carrier to ensure the appropriate coverage for providing telepractice services in other jurisdictions.</td>
</tr>
<tr>
<td>Registrant residing outside Ontario (registered in Ontario)</td>
<td>Client in Ontario</td>
<td>COTO</td>
<td>Comply with the COTO Standards of Practice, applicable legislation and regulations.</td>
<td>Professional liability insurance must include sexual abuse therapy and counseling fund endorsements as per College bylaws, part 20.</td>
</tr>
<tr>
<td>OT from outside Ontario (not registered in Ontario)</td>
<td>Client in Ontario</td>
<td>COTO (OTs from outside Ontario must be registered in Ontario to provide direct client care in Ontario through telepractice)</td>
<td>Comply with COTO Standards of Practice, applicable Ontario legislation and regulations. Clients must be notified of the location from which the OT is providing service.</td>
<td>Contact COTO to confirm the requirements for professional liability insurance which must include sexual abuse therapy and counseling fund endorsements.</td>
</tr>
</tbody>
</table>
When practising across jurisdictions, OTs should have knowledge of the available products, equipment, health care services and resources in that jurisdiction as a client may require a referral to access local supports.

OTs should ensure they have adequate information about the client’s jurisdiction to provide effective OT service and make any limitation in their knowledge clear to the client. For example, the OT may not have full knowledge of the availability of local resources or socio-economic factors relevant to treatment and should explain any possible limitations to the client.

2. Risk Management

**OTs should consider if telepractice is the most appropriate means of providing occupational therapy services, with consideration of risk management and liability.**

OTs engaging in telepractice are accountable and responsible for all occupational therapy services provided to clients. OTs should ensure clients are aware OTs are regulated health professionals and clients can contact the College with any concerns. OTs should clearly explain their scope of practice and any benefits and limitations of telepractice so they can manage expectations with clients, family members and referral sources. OTs should consider what occupational therapy services can be reasonably and safely delivered using telepractice technologies. OTs should also have a process to deal with any adverse or unexpected events during a telepractice session.

Since telepractice services can cross regions with varying access to resources, OTs must understand what local resources are available to the client to ensure any recommendations are appropriate and that the client has realistic expectations. OTs should be aware of any policies or procedures that impact their ability to provide service in each region to ensure appropriate and compliant service delivery. For example, client’s in one local health integration network (LHIN) may have different eligibility criteria to access services than client’s living in a different LHIN.

In some situations more than one health professional may be involved in the telepractice plan of care. Under this circumstance, OTs must ensure the client is aware of the components of the treatment plan the OT is responsible for within the OT’s scope of practice.

OTs providing service through telepractice should consider any potential issues or concerns that may arise specific to any given client, and be aware of options if telepractice is no longer appropriate to meet the client’s needs.

OTs should ensure that clients understand how telepractice service will be organized and ensure clients know what to expect regarding the time and duration of appointments. OTs should also clarify
client expectations for communication between scheduled service and direct the client how to address any emergent health issues that may arise.

3. Technology

**OTs must understand the capabilities and limitations of ICT equipment and the implications for providing telepractice.**

The OT must ensure that the technology used in telepractice is of sufficient quality to:

- communicate effectively;
- provide safe occupational therapy interventions; and,
- form an accurate professional opinion to make necessary health care decisions.

The OT should also consider the client’s needs, reliability and security of the IT systems (home computer or organizational system), internet access, and technical support. Before engaging in telepractice, OTs should have sufficient training in the use of the technology, and take reasonable measures to ensure minimal service interruptions. As well, OTs should establish a process to quickly contact the client in the event of technical difficulties.

The OT must ensure that the communications system is sufficiently secure to protect the privacy of the client’s health information. This involves understanding how personal information is transmitted, processed and stored. The OT should consider consulting a technology specialist to ensure security mechanisms that protect a client’s personal health information against theft, loss, unauthorized access, use or disclosure are in place prior to using telepractice.

4. Confidentiality, Privacy and Access

**OTs using telepractice services must take reasonable measures to maintain confidentiality and protect personal health information.**

The OT is obligated to ensure the client’s privacy is respected and the confidentiality of personal health information remains protected. Practices must align with the relevant legislation in the jurisdiction where the occupational therapy services are provided.

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5 IPC, 2016
OTs should inform their clients of the limits to privacy and confidentiality and be transparent about the risk for inadvertent disclosure when using communication technologies\(^6\). When transmitting client information by electronic means, OTs should maximize confidentiality. Confidentiality may be enhanced by using encryption and password protection, using a secure network, and limiting the use of personal health information (as outlined in the College Standards for Record Keeping).

OTs are encouraged to develop and share privacy policies and procedures with clients, and are expected to comply with any organizational policies and procedures related to records security\(^7\). OTs should also inform clients how to access any of their health information that has been collected and used for the purpose of OT service delivery.

### 5. Consent

Prior to initiating telepractice services, OTs must obtain informed consent for occupational therapy services (assessment, treatment and consultation) and knowledgeable consent for the collection, use and disclosure of personal health information.

The requirement for OTs to obtain client consent is the same for telepractice and in-person client interactions. The OT should clearly outline the nature, benefits, risks, limitations, and potential outcomes of the occupational therapy services. The client should have the opportunity to ask questions and hear about alternative courses of action as appropriate.

Depending on where the client lives, different professional standards for obtaining consent may apply. The OT should be aware of the applicable standards and legislation.

The OT should include information about the risks associated with providing health care services in formats other than in-person interactions. For example, the OT may not have the benefit of viewing non-verbal cues, which could influence the OT’s professional opinion. Disclosure to the client should include:

- The OT’s name, work address, practice jurisdiction, area of practice and training/education as applicable
- Registration with the College of Occupational Therapists of Ontario
- Registration with the regulatory body in the jurisdiction where the client resides (location of telepractice service)
- Any potential conflicts of interest
- Fees for occupational therapy services
- Risks and benefits of participating or not participating in occupational therapy services including telepractice as a delivery method for services

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\(^6\) APA, 2007  
\(^7\) IPC, 2010
• Participation of other care providers
• Options or alternatives to occupational therapy services (if available)
• Client’s right to refuse or withdraw participation at any time

Consent is an ongoing process. OTs must ensure that consent is obtained, recorded and maintained as part of the client record.

6. Record Keeping

**OTs engaged in telepractice are required to maintain client records in accordance with the Standards for Record Keeping.**

It is imperative that OTs maintain comprehensive clinical records and document all professional encounters that take place through telepractice. How the occupational therapy intervention was provided, the technology used and the details of the care itself must be included in the record. Additional record keeping standards may apply in other jurisdictions.

7. Professional Boundaries

**OTs must establish and maintain professional boundaries.**

OTs always have the responsibility to maintain professional boundaries and be aware of warning signs for boundary crossings. Warning signs may include excessive personal disclosure, development of personal relationships, and concessions that are atypical of a client-therapist interaction. OTs are expected to establish policies and procedures to prevent boundary issues.

Telepractice brings the potential for more informal interaction. OTs should be aware and monitor self-behaviours at all times. It is important to pay attention to the environment where telepractice intervention will take place and to avoid any personal items that may place the OT at risk for boundary crossings or violations. OTs should consider setting parameters at the onset of service to limit the potential for boundary issues. OTs are encouraged to consult the Standards for Professional Boundaries.

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8 APA, 2015
9 CAPR, 2006
8. Continuing and Transferring Care

OTs should be aware of options for continuing care when providing telepractice services.

In the event that telepractice is no longer appropriate for OT service delivery for a specific client and in-person follow-up care is required, the OT should take reasonable measures to ensure the client will be referred to the most appropriate qualified individual in a timely manner. OTs treating clients by telepractice should be aware of alternative service options in the client’s location. Please refer to the Guide to Discontinuation of Service for additional information.

9. Ethics

OTs are required to uphold the Code of Ethics and inform clients of their rights.

Regardless of the nature of practice or method of service delivery, the Code of Ethics serves as a foundation for occupational therapy practice. In delivering telepractice service, OTs should implement the core values of respect and trust and apply the principles of collaboration and communication, client-centred practice, respect for autonomy, honesty, fairness, accountability, and transparency.

10. Advertising

OTs providing services by telepractice must understand and adhere to the advertising regulations.

Before advertising telepractice services, OTs in Ontario should review Ontario Regulation 226/96: General - Part V: Advertising. OTs engaging in telepractice services outside Ontario are encouraged to review any relevant regulations in the jurisdiction in which they wish to advertise.

11. Fees and Billing

OTs are expected to transparently communicate all fees associated with telepractice.

If there are any fees associated with telepractice services, OTs should clearly communicate this information to clients prior to commencing service delivery. If the OT is providing telepractice services
privately, the OT should ensure a fair and equitable fee schedule. OTs need to be aware of the billing requirements of the local health authorities where the telepractice service is being offered and/or the requirements for third-party payers.

References


College of Occupational Therapists of Ontario (2016). Standards for Record Keeping. Toronto, ON.


This document replaces:
