PABC Virtual Care Toolkit

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Summary

This toolkit provides what you need to get up and running with offering virtual care / telerehabilitation services in your private practice physiotherapy clinic in British Columbia within a relatively short time. The guide contains an overview of the steps you need to take, followed by sections with additional details you will need for each of these steps, and links to tools and key references throughout to assist in a systematic implementation. Use the Implementation Checklist to guide you through the key steps. In response to the COVID-19 crisis, some clinics have implemented services already and some are just now in the planning stages. The information contained here can be used to either plan your services from scratch, or review and improve what you have implemented already.

Note that virtual care/telerehabilitation for physiotherapists has been in a state of slow evolution since long before the COVID-19 crisis. In BC, we have been gradually developing the supporting systems for the service since approximately 2014. The COVID-19 crisis has required that we address in several days what we have been working on for several years, so refinement of this guide will be required as we work with regulator, funder, and academic partners to create a service that serves British Columbians well.

This toolkit will live on the PABC website and will be honed over time as our systems and knowledge mature and we develop additional helpful resources. We will endeavour to announce when updates have been made but encourage all clinicians / clinics to return to this toolkit periodically in the next several months to review new and modified content.

A word on terms . . .

You will hear a lot of words around this topic, and most mean the same thing - delivering care remotely by means of technology. The technical word for this is "Telerehabilitation". However, the word is not always well-known by our referral sources and funders. The broader term "telehealth" is more familiar and can also be used if you wish. More recently, Canadian doctors, digital health experts, and funders have adopted the term "Virtual Care". In order to enhance communication, we will integrate this term and use it alongside telerehabilitation as our primary terminology in this toolkit.

A word on technologies . . .

While virtual care could by definition be any technology (including phone, text, or email) that assists in delivering care remotely, the visual input from video is so important to the quality of the rehabilitation visit that we are primarily focussing on the video visit as the means of physiotherapy virtual care. This focus eases communications with referral sources and advocacy with funders. This guide is focussed on the virtual video visit form of virtual care / telerehabilitation.
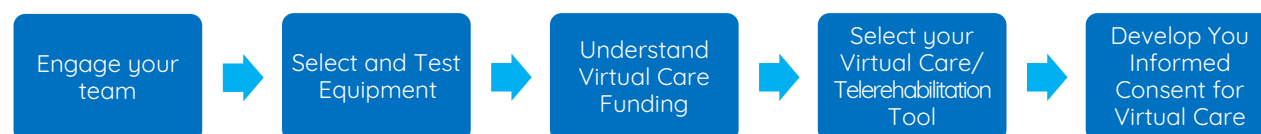
Updates to this guide will be made on an as needed basis. For the most recent version click here

Virtual Care Implementation: Overview and Checklist

Overview of PABC's Virtual Care Guide:

The following diagram gives an overview of the journey taken when implementing a Virtual Care / Telerehabilitation service. To help you go through step-by-step, we have created a Virtual Care Implementation Checklist that would be very useful to print off right away and keep at hand as you work through the manual. Print it off now and let's get started!

Get Ready . . .

Engage your team → Select and Test Equipment → Understand Virtual Care Funding → Select your Virtual Care/ Telerehabilitation Tool → Develop You Informed Consent for Virtual Care

Make it Informed, Safe, Private, and Secure . . .

Develop Informed Consent → Plan for Safety → Make it Private and Secure → Consider Your Liability Insurance

Make it Happen!

Choose Appropriate Clients → Plan Your Set-up and Your Visits → Improve the Quality of Your Care

Engage Your Team

- Virtual care implementation will require changes to almost all roles in the clinic from clinicians, to reception, to bookkeeping.
- Consider making staff members who have demonstrated above average technology skills and telehealth interest your champions who can help the 'not-so-techy' clinicians learn the skill.
- Consider internal meetings to discuss the changes, workflow, and responsibilities.

Selecting and Testing Your Equipment and Connection

Equipment essentials

For a virtual visit the computer, laptop, tablet, or smart phone you are using needs to have:

- Webcam
- Microphone
- Speaker

Laptop, tablet, or phone?

- **Clinician Side:** The visual aspect of physiotherapy virtual care is extremely important for observations of movement, exercises, limitations, etc. Arguably, it is more important in physiotherapy virtual care than physician virtual care where decisions are made largely on medical history conversations with the patient. As such, smartphones are not recommended for virtual physiotherapy care (on the clinician side) due to their small screen size.
- **Client Side:** While in most cases laptops are most preferable, smartphones may be appropriate depending on the goals of the visit. If visual information is to be communicated (anatomy, streaming exercises, etc.), this information may not be as easily viewed on smartphone as a laptop. On the other hand, the mobility of the smartphone may help the therapist better visualize certain aspects of assessment (e.g. scars, swelling, foot assessments, etc.).

Testing your equipment

- It is important to test the hardware to ensure your webcam, microphone and speaker are all working and that you are familiar with how to adjust the settings. Your Virtual Care Tool software will also have settings you should be familiar with. It is especially important to know where to turn the camera and microphone on / off and how to select different cameras that may be on your device

Testing the speed of your internet connection

- Run an online speed test from the room you would use for video consults to find out the internet speed. New recommendations for modern telehealth programs are typically a minimum speed of 5-15 mbps. Lower speeds increase the chance of transmission issues.
- Use the equipment you are planning to use for the most accurate test. You can use the site (https://www.speedtest.net/).
- Although a wired connection is best, most high-speed internet connections will have no trouble even through Wi-Fi. For example, note that Telus's basic fibreoptic high speed hook up in the Lower Mainland is a way-more-than-necessary 150 Mbps. However, wireless connections can have packet loss that interrupts transmission even with sufficient speed.
- As you move away from urban centres the connectivity may become more of an issue, particularly on the client side. However, even satellite connections (e.g. Xplornet) can be used successfully for virtual care. Dial-up will not work.
- If you are in a rural region, you may need a deeper understanding of network options and speeds. You can find that information on our Understanding Networks Tool.

Next Level Equipment?

- Want to take the quality of your video up a notch? Consider a dedicated webcam such as the Logitech C920 , Bluetooth headset such as the Jabra Evolve 65, or an echo-cancelling speakerphone such as the Jabra Speak 510. These are industry standard devices for videoconferencing.

Understand Virtual Care Funding in BC

Funding has been the major barrier to widespread physiotherapy telehealth in the past. Private practice physiotherapy is largely private healthcare, gaining funding from the clients' themselves or from third-party funders, with some minimal and limited government coverage. Improving funding for physiotherapy virtual care requires advocacy on many fronts. See PABC's Virtual Care Funding; Current State PDF which outlines the current state of telehealth billing as of March 26, 2020. Note that PABC / CPA are currently in discussions with funders on all fronts and the landscape is changing daily. This document will be updated frequently and will be the source of truth on funding to the best of PABC's knowledge.

You can also check for live updates on funding at PABC website's Telerehabilitation Page

Selecting Your Virtual Care / Telerehabilitation Tool

It is impossible to give a blanket tool recommendation for physiotherapists. Due to the variety of care we could potentially give through virtual care, choosing an appropriate tool is even more difficult for our profession than it is for physicians. There are many videoconferencing platforms and your choice may vary according to your experience, goals, patient-groups, therapy context, equipment budget, preferences, or other consideration. If you continue in virtual care for any amount of time, you will likely change tools several times, or use different tools for different situation. Currently the most popular tools in BC appear to be JaneApp Video Visits, Embodia (Zoom Telehealth), Clinicmaster Telehealth, and Doxy.me (general medical).

When selecting a tool, most therapists are interested in (1) the features the tool has and (2) whether the tool meets the privacy and security needs for physiotherapy practice. The landscape of tools the physiotherapists can use is quickly evolving. We have two tools that should help you in your considerations. Click the links to view the tools.

Telehealth Versus Non-Telehealth Tools Considerations
Physiotherapy Virtual Tools Comparison Chart

Even after analyzing all the tools, there can be quite a bit of grey as to the privacy and security of the tools. In an ideal world, the best platform would be independently tested by IT security experts for BC Private Sector Privacy (PIPA) compliance (and FOIPPA compliance if you work with WorkSafeBC Clients) and have all the features you want. But we are just not there yet and there some risks with using any platform.

Having said that, and considering the current COVID-19 crisis, do consider the following:

- Designed-for-telehealth solutions are more likely to be appropriate for client care both in their usability and privacy / security features.
- The telehealth literature typically advises us not to use the non-telehealth / social media platforms client interaction. *It is not so much that they don't have some security measures (encryption), but how they handle data is not as transparent generally as telehealth platforms and security reviews in the context of healthcare have not been done.*
- **However:** We do know multiple physiotherapists have been using non-telehealth / social media tools for many years and we are unaware of any complaints. The actual risk appears to be very low in our context.
- The current need for rapid implementation may require that you use non-standard solution in order to facilitate ease of use for you and your clients.

- The use of any solution will require consent from the client for therapy through virtual care. If you are using a non-standard solution, we suggest you advise your client of this and get their consent to continue with this platform.
- Funders may require you to use a formal telehealth tool (WorkSafeBC and ICBC have recommended this).

Develop Your Informed Consent for Virtual Care

Published regulation and best practices indicate there are four components of consent you need to consider for virtual care. The first two components described here will be required for **all** telerehabilitation clients, the following two will be **required as needed**. The first consent (Consent for Virtual Care Delivery) is recommended to be provided in written form and a link to a document you can use is below. Also provided is a sample Chart Note Template which serves as a reminder and tool to ensure all potential consents. The Chart Template also integrates the in-session privacy and safety elements required.

Components of Virtual Care Consent

1.   Consent Virtual Care Delivery – for all Virtual Care clients

- The client must understand the unique risks and limitations of virtual care delivery. This can be written or verbal but best practice encourages providers to use a written consent for this component as the risks / benefits relate to technology and are not always top of mind for clinicians.
- This could take several forms ranging from a physically signed piece of paper, to an intake form digitally signed from an electronic medical record system, to a securely signed document sent through a document signing tool such as DocHub or Docusign.
- Some telehealth software integrates consent into the visit (client must check off before entering the visit) but consider that this may make the client feel rushed and he/she may not have the opportunity to read with comprehension if you are waiting for them on the other side.
- Note that some insurers require that the client receive written *information* describing virtual care. This could be separate, but considering the overlap, we have integrated the client information sheet and consent onto one page.
- In some situations, obtaining a written consent for Virtual Care Delivery might still be difficult. Verbal consent obtained at the beginning of the session and documented in client's chart is still acceptable as long as it covers the details. See the Chart Note Template Tool for suggested consent content.
- We have created a [sample patient information and consent you can download and edit here.](#)

2. Standard Consent for Therapy Plan – for all Virtual Care clients.

- Having received consent for Virtual Care Delivery, the therapist **will still require standard consent for the therapy they deliver within the session** per standard regulations. This is no different than what physiotherapists do daily for in person care. Most providers will use verbal consent and this is sufficient in most cases. See standard CPTBC resources on this type of consent.

3. Additional Consent for Recording – as required

- If video, still pictures, audio recording, or storing information and data from the session are planned, additional consent should be obtained for this purpose.
- Can be obtained through verbal or written form. Some providers do feel more comfortable getting this consent in written form due to the sensitivity surround potential abuse of recorded client images.
- Best practice typically has this as a separate consent (i.e. this would not be included as standard on your intake consent, but only requested as required).

4. Additional Consent for the Participation of Other Health Care Providers / Family- as required.

- Occasionally, it may be required, or the client may desire, that another care provider or family member participate in the session. Consent from the client should be obtained for this.
- This consent can be obtained through verbal or written form at the judgement of the therapist.

Options for Obtaining Written Consent(s) Remotely

If you use a written consent for any of these components (particularly the first component), you may need to come up with a way of obtaining that consent without the client being verbally present to sign a form.

Here are several possible options, depending on your clinic set-up:

1. Intake form linked to your EMR
This is probably the easiest and most thorough way of obtaining consent. Most EMR /Practice management systems will allow clients to securely fill out intake forms and automatically make them a part of the client chart. For example, JaneApp allows you to make an intake form you can use as an add-on to your regular intake process.

2. Telehealth Software Integrated Consent
Some Virtual Care software will allow you to create a consent that the client will need to review and sign before entering the session. This can be a considered a written consent as the client's name is placed next to an explanation. Potential issues include the potential inability to edit the text of the consent, and the client may feel pressure to get the session going without thoroughly reviewing the information.

3. Secured Document Signing
If you do not have an EMR, the Doctors of BC Technology Office suggest tools such as Docusign and DocHub could be used to securely collect written client consent. Further information on these tools can be found in here.

4. Old-Style Email > Print > Sign > Scan > Email back.
This is a cumbersome process but can be done if necessary. The clinician may wish to consider instead sending them the client information (or directing them to the information on your website) and gaining verbal consent instead. You will also have to be aware of email security and ensure you have proper collection of client information consents prior to doing this.

Documenting Consent
Documenting Written Consent

- A copy of any written consent should be kept in the client chart.
- Again, the easiest way to do this is likely as an add-on intake form that is filled out remotely and automatically uploaded to your client's chart for review at the time of the session.
- If you are using one of the other methods, ensure the consent is stored in the client chart.

Documenting Verbal Consent

- If you get verbal consent, the chart will need to indicate consent has taken place.
- The Chart Note Template Tool provides checks for all 4 possible consents. Whether you require all of these will depend on your processes for collecting written consent. If you do not or were not able to get written consent for component one (Consent for Virtual Care Delivery), a script is also included in the Chart Note Template. If you have the JaneApp, this template has also been shared in the Jane Chart Templates under Jeremy McAllister / PABC.

Telehealth Consent Summary Chart

Consent can be confusing. The following chart summarizes the literature on this topic:

Consent Type	Which Clients?	Written or Verbal	Documentation	Notes
Consent for Virtual Care Delivery	All Telerehabilitation clients	Most often written to make it easier to cover the electronic delivery considerations.	Best by automated intake forms, but can be by Docusign or other measure	This is a consent unique to virtual care.
Consent for Therapy you are delivery	All Telerehabilitation clients	Typically, verbal	Typically documented in the chart note, see Chart Note Template.	This is just standard consent we get all the time for whatever therapy we do.
Consent for Video/Audio/Picture/ Data Recording	Only those clients you record	Most often written due to sensitive nature of taking recording and storing this information	If written, can again be done by automated form. If not, written copy should be kept in chart. If verbal, can use chart template note.	You should know your system inside/out before doing this and know exactly where this client information is going and being stored. You should also be aware of the crossover with Privacy Legislation and ensure your systems / processes are adequate.
Consent for Participation of Caregiver / Family	Only if applicable	Typically, verbal	Typically documented in chart note. See Chart Note Template	

Plan for Client Safety

All providers are responsible to consider the potential critical events that they may encounter and should have plans in place to manage these events. The following are considered safety risks in a virtual visit:

- Failure of the communications technologies used to provide services.
- Client medical emergencies (falls, injuries, heart attack, stroke).
- Other emergencies (e.g. fire).

At minimum, providers should:

- Test all technology prior to client appointments.
- Have access to appropriate troubleshooting and technical support information.
- Obtain an alternate number from the client to call.
- Obtain contact information for others within the client's environment (care providers, family members) and consent to contact these individuals.
- Obtain the number of the first responders local to the client, using designated phone numbers not 911.
- Have a safety protocol in place in the case of an adverse event.

The [Telerehabilitation Resource Guide for Alberta Physiotherapists](#) has handled this material well and our [Virtual Care Implementation Checklist](#), [Chart Template Sample](#), and [Patient Information and Consent For Receiving Physiotherapy through Virtual Care](#) is based on this information.

Make it Private and Secure

There is a lot to privacy and security, and it is not all black and white. Start with these recommendations and improve it over time. We will develop more resources in time, but for now the [GPSC Doctors Technology Office's Videoconferencing Guide: Privacy and Security Considerations](#) is relatively transferable to private practice physiotherapy care.

Choose your Virtual Care Tool with Privacy and Security in Mind

- This has been addressed in the Virtual Care Tools for Physiotherapy section. Please refer to this section and the considerations noted in the [Telehealth vs Non-Telehealth Tools](#) comparison tool.

Session Safeguards

- Always **ensure the patient is ready** to have a confidential conversation. When appropriate, start video session with clear introductions and confirming the client's identity.
- Conduct the video session in a **private space in both yours and the client's location**. During the session, check if the volume is set to an appropriate but discreet level.
- A patient may want to include a family member or caregiver during the video consult. If so, **be aware of who is in the room with the client.** Establish the level of client comfort and follow the same principles as with in-person visits.
- **Do not leave connection unattended** and/or set on automatic call answering. Once the session is over, all participants are expected to disconnect from the call immediately.

Technology Safeguards

- Refrain from using any unsecured public networks. When setting up **a wireless connection** in your clinic, use an adequate password that is shared only with authorized users.
- All systems, applications, and devices should be **behind the firewall** with anti-malware and anti-virus software installed.
- Updates and security patches should be applied as they are made available by the software vendor. Ensure the **device used for videoconferencing is not obsolete** and software is current so the **most recent updates can be applied.**
- All devices used for videoconferencing, and the sessions themselves, should be **password protected** to prevent accidental configuration changes or hacking attempts. Do not use default settings and be sure to create adequate passwords.
- **Avoid recording videoconference sessions** containing personal or clinical information unless it is necessary. If a recording must be made, the best is to retain it as part of the clinical record. Implement security measures such as secure storage behind a firewall. When using personal, mobile and desktop devices, the best practice is to encrypt a device and use two-factor authentication for access.
- **Disable cameras and microphones when not in use**, either by disconnecting power, connection cables, and/or using lens coverage.

Consider Your Liability Insurance

Providers should ensure their liability insurance is applicable to virtual care delivery. As a Canadian Physiotherapist, if you have purchased insurance through the Canadian Physiotherapy Association, you are covered as long as you are practicing within your scope of practice and you reside in Canada. See the BMS Group Virtual Health Care Resource.

If you did not purchase your insurance through the CPA, please check with your individual policies / insurance provider.

Consider Your Abilities

Not everyone can do virtual care. Consider the following in assessing your own abilities to perform this service: You will rely heavily on your ability to take and interpret a subjective history and it is of great benefit if you have seen the conditions you will be dealing with many times in person before you assess and treat them online.

- You will rely heavily on your ability to take and interpret a subjective history. If you find this difficult and rely more on your physical assessment skills, virtual care will be difficult.
- It will help if you have seen common conditions repeatedly in in-person care as you will more quickly compensate for the limitations of the physical assessment and will often know from the subjective history alone what you are dealing with. As such, new grads and those with limited experience may find virtual care very challenging.
- Of course, you will need some skill and aptitude for computer technology. Generally, those with average to above average computer skills will find the service much more effective than those without.

Choose Your Appropriate Clients

Consider Appropriate Conditions

Physiotherapy virtual care / telehealth has been shown to be appropriate and beneficial for the assessment and treatment of conditions for which the therapeutic goals can be achieved through assessment, active exercises, progression of exercises, functional rehabilitation activity, education, self-mobilization, self-management, and trained observation, and monitoring. Some conditions that have been particularly suitable for virtual physiotherapy include:

- Pre and Post-surgical orthopedic clients
- General sprains and strains
- Chronic musculoskeletal pain
- Acute orthopedic injuries
- Respiratory clients
- Stroke clients (with assistant)
- Concussion
- Women's Health
- And more. . .

A good way to start identifying these clients within the current COVID-19 crisis is to go over your list from the last two weeks and identify the clients who fit these criteria.

If you want to investigate virtual care for a specific condition, try combinations of the keywords "telerehabilitation", "telehealth", "physiotherapy", "physical therapy", and "virtual care" along with the condition you are interested in.

Consider Characteristics of the Client:

- Client preference of treatment mode (are they comfortable with a TR mode of treatment?).
- Client proximity to the clinic (Is the travel distance for a physiotherapist's visit prohibitive or unduly burdensome?).
- Client mobility (is physical attendance the clinic burdensome to the client considering the treatment to be rendered?).
- Client technological capabilities (is the client capable of visiting a website for teleconference, making minor computer adjustments to their system as needed, receiving / sending email to set up appointments).
- Physical capacity to participate (does the client have any visual, auditory or other challenges that would limit their ability to participate?).

Client Resources:

- Hardware available to the client (do they have a PC, tablet, or smartphone and is what they have appropriate to the treatment required?).
- Networks available to the client (does the client have sufficient infrastructure in their region and bandwidth in their home to participate in a videoconference?).

Setting up and Conducting the Visits

Set up the appointment with your client

How you establish the video link to your clients is rapidly evolving. Physiotherapy EMRs are just now beginning to integrate virtual care directly into their practice management systems (e.g. JaneApp, Clinicmaster) in response to the COVID-19 crisis and this should greatly enhance the ease with which connections are made. Other therapists may operate in practices with physiotherapists where these tools are already integrated (e.g InputHealth).

If you are using a non-integrated tool, the most common way to connect is to through a hyperlink. A hyperlink is a web address the client can click on that takes them to a video session on an internet browser.

The client can access this hyperlink typically in one of two ways:

Virtual Care Appointment Set-up Email Invitation

You can create the link and email to the client in an appointment confirmation email. An Appointment Set-up Email Template is included in the tools. The email invitation should come from your clinic email address and include:

- Time of the appointment
- How to connect (an appointment hyperlink generated from your virtual health tool)
- Contact #'s if any questions or for quick technical support if having trouble connecting
- Attached Quick Guide for Clients

Virtual Care Appointment Set-up from Your Website:

Depending on the Virtual Tool choice, some practitioners choose to set-up their services to link the client from their website to their room. This works very well, for example, with Doxy.me. This web page can also include the written client information materials required by some insurers, FAQ, and any other items that

might assist you client in their virtual care or promote your service.

Include a Quick Guide for Clients in an email or on your website

With the popularity of smart phones and video chat, many of your clients may be familiar with the basic functions needed to enable virtual care visits. Still, it is important to clearly communicate with them so they know what to expect, what the benefits are and how they can get started with virtual care. Create a 1-page Quick Guide for Clients that can be attached to your email or found on your website. The guide should include:

- A brief description of virtual care.
- The best environment in which to conduct their session (private, enough space for movement, etc.).
- How to connect to your service on their laptop, tablet, or phone.
- Audio suggestions if they are having feedback issues (common).
- A number to call if they are having any troubles.

See a sample A Quick Guide for Patients on Virtual Physiotherapy here (note the Quick Guide is a simplified information form to prepare clients for a visit, not a consent form):

Conducting the Visit

These are some key steps to keep top of mind during every visit. We have created a 1-page Clinician Quick Guide for Virtual Physiotherapy Care that you can laminate and have at hand for every visit.

Prepare the Environment
- Ideally the provider should be in a room with a closed door to ensure privacy.
- Consider lighting – it should be from the side or front, not from the back. Natural window light is best.
- Enable privacy mode on your EMR (if equipped) to ensure you don't accidentally screen share.
- Ensure all programs are shut down both for privacy and optimal computer performance.

Start the Session
- Confirm consent has been obtained and obtain any further consent required at the start of the session.
- Confirm you have the client's alternate contact number, emergency personal contact number (family / caregiver), and gain consent to contact that number in case of emergency.
- Confirm you have the number of local emergency services.

In-session Tips
- Demonstrate activities (ensure you have enough room), exercises, self-palpation and assessment procedures.
- Use screen-share feature to share anatomy education, stream video exercises, use concussion software, and more.
- Use file-share feature to transfer to transfer educational pdfs.
- Give them the language to report on self-palpation findings (does it feel tender, tight, knotty, numb, etc.).
- Use self-mobilization techniques and supply with videos.
- Use self-taping instruction and supply with video.
- Use your creativity to reproduce what you would do in-clinic with the client as your assistant. Research shows inter-rate reliability for many conditions is high when you use the patient as your partner / assistant in the assessment.

Book the Next Appointment

- It is much easier to set up a subsequent appointment while the client is in your virtual clinic than by emailing back and forth (just as you would in-person). If another session is required, set up the next appointment before you end your session.

Documentation:

Services delivered through Virtual Care are subject to the same Standards of Practice as in-person care. In addition, the Alberta Telerehabilitation Guidelines recommend the following:

- The physiotherapist retains accountability for evaluating any information gathered from a third-party (such as a non-physiotherapist health provider, physically co-located with the client) to determine its reliability and accuracy and the ability to incorporate the information into the assessment or treatment.
- The physiotherapist should retain any video or audio recordings generated as part of the virtual visit as part of the client record.
- Follow the documentation standards of both jurisdictions when telerehabilitation is delivered across borders.
- If the clinical or financial record retention records differ between jurisdictions, the physiotherapist must retain the record for the longer of the time required.

Troubleshooting Session Problems

Connection and transmission difficulties will happen in your virtual care practice. Often these are related to the initial connection and a result of the therapist or client missing a step or clicking an incorrect link. Some of the most common issues include:

- Difficulty in establishing connection (broken link off email, using the wrong browser for the software, etc.).
- Choppy / Interrupted video transmission.
- Audio echo.
- Client (and sometimes clinician) not knowing their camera is off or mic is muted or using a rear camera instead of a back camera.

Familiarise yourself with this Virtual Care Trouble Shooting Guide. It is important that you and your staff are comfortable with the most common troubleshooting tips in order to make this a positive and successful therapy session for your client. Be sure to:

- Train your staff on how to troubleshoot the most common technical issues related to virtual care so they can assist patients over the phone.
- Always have an alternate contact number for the client as a part of your intake process.
- Also have an alternate contact number (typically a cell number) and have access to that phone in case the client should need to call.

Promoting Your Virtual Care Services

Now that you have equipment, virtual care software, consents, and other processes in place, you will need to communicate with your clients to let them know the service is available.

Make Your Website Your Virtual Care Information Hub

Your website – hopefully you have one – is usually the best place to centralize the information on your virtual care practice. Your advertising, emails, posters, and staff can all point to the website and all of the essential information can be linked there. You may wish to even create a Virtual Care menu with subcategories including general information, Quick Start Guide for Patients, FAQ, and (with some telehealth programs) even a virtual waiting room link.

Initial Contact Blitz: What to Communicate

You will need some way of announcing your virtual care services. Many clinics are doing this through a mass email to their clients. A list of tools to use of mass mailing can be found on the More Digital Tools to Support Virtual Physiotherapy Care. Others are phoning, putting posters up (on the outside of closed clinics), or advertising in other ways. Some information you may want to communicate includes:

- A start date for your virtual services.
- General information about physiotherapy virtual care – to many clients the idea of 'physical therapy' and 'virtual care' are incongruous. This is your opportunity to educate your clients on the importance of activity, self-management, pain management, education, self-mobilization.
- Examples of conditions that may be suited to physiotherapy virtual care.
- Exciting examples of how virtual care can help them and some of the tools you use (besides just the videoconference – streaming exercises, anatomy apps, educational videos, etc.).
- How they can sign up for a virtual care session on your (phone or email clinic, go to website, online booking or other).

Competence and Quality in Virtual Care

This guide has focussed on getting you up and running. Some feel that is all there is to it, but there is much more. The videoconference is only a small part of the potential for telerehabilitation which can bring in a variety of other tools, each enhancing the quality of the care that can be provided from a distance. Once you're running, research what you can do to make your care better. You can start with a literature search combining various forms of the terms "telehealth", "telerehabilitation", "virtual care", "physiotherapy", "physical therapy", "remote care", and others.

Key References

Document	Source	Link (if available)
Telerehabilitation Resource Guide for Alberta Physiotherapists	Physiotherapy Alberta College & Association College of Physiotherapists of Manitoba	Link
Guidelines for the Provision of Telerehabilitation	College of Physical Therapists of BC	Link
Report of the WCPT/INPTRA	World Confederation of Physical Therapy International Network of Physiotherapy Regulatory Authorities	Link
UBC Telerehabilitation Toolkit	University of British Columbia	
Virtual Care Toolkit	Doctors of BC – Doctors Technology Office	Link

Frequently Asked Questions

As virtual care is an evolving field, the FAQ section is linked as a tool and will be updated periodically. You can link to the Physiotherapy Virtual Care /Telerehabilitation FAQs here.