



Operational Governance Guidance for Telehealth Implementation

During COVID-19 Outbreak (Acute Hospitals), 22nd April 2020, Final Version

1.0 AIM

This document aims to provide guidance for consideration on organisational governance to support the implementation of Telehealth in an acute hospital setting and to ensure readiness.

Please ensure that you read the document carefully and complete the details required as outlined. When completed this document should be returned to Acute Operations at SC.AcuteOperations@hse.ie

2.0 WHY TELEHEALTH?

The implementation of Telehealth in the Acute Hospital System has the capability of sustaining healthcare and support for all patients, both COVID and NON-COVID positive patients during the current COVID-19 crisis. Many sites may already have already implemented Telehealth but if sites wish to expand services or introduce new services, then this guidance will prove useful.

Telehealth can be used to reduce exposure to coronavirus by enabling both patients and clinicians to consult while in isolation. It can also increase organisational resilience by protecting the workforce and enabling support to be provided from different geographical locations.

3.0 ORGANISATIONAL GOVERNANCE

The success of any implementation requires engagement, resources and organisational governance. Outlined below is a summary of the proposed structure and defined roles and responsibilities to successfully implement Telehealth in any acute hospital setting. A diagram is outlined in Figure 1.

4.0 SPECIFIC ROLES REQUIRED

4.1 Hospital Group Project Lead (Champion1) – Group Level

This person should have the appropriate skill set, competencies and experience to carry out this role as determined by hospital group management.

Key responsibility: To coordinate with Acute Operations to support the roll out of Telehealth across the Group Hospitals.

This will be achieved by liaising with Project Managers in Hospitals. (Champion2) and will involve:

- a) Liaison with the National OoCIO/Acute Operations team on Telehealth.
- b) Liaison with hospital sites to engage local project managers (Champion 2) and local IT supports.
- c) Contribute to the coordination and communication in developing policies and protocols around use of Telehealth.
- d) Identifying and escalation of issues around implementation and information such as, risk assessment, hardware requirements, data protection, information governance and standards etc.
- e) Enabling Champions 2 to delivering Training for all staff. (Following Train the Trainer from OoCIO).



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4.2 Hospital Project Manager (Champion2)

This person should have the appropriate skill set, competencies and experience to carry out this role as determined by hospital management.

Key responsibility: To support the roll out of Telehealth in the local hospital

- a) Support the roll out of **Telehealth** in the hospital/division
- b) Liaison with local IT supports
- c) Undertake to become a super user and to coordinate and provide a Train the Trainer approach at hospital level
- d) Supporting the local Hospital Telehealth rollout in developing policies and protocols around use of Telehealth
- e) Identifying hardware requirements to roll out Telehealth and ensuring that they are addressed.
- f) Disseminating information to staff on Telehealth.
- g) Supporting services to apply for Telehealth licenses.
- h) Providing brief training for staff, including medical, nursing, health and social care professionals and administrative staff.

5.0 PREPAREDNESS

For each specialty implementation the following elements will need to be considered (local Check list / business process) as part of same

- a) The implementation has been agreed with the clinical service
- b) You have a process in place to identify suitable patients
- c) You have considered how to record patient consent where required
- d) You have considered how to communicate the process with the patient in a way they will understand
- e) You have identified staff to schedule the patients
- f) You have an approach to ensure that patient activity is captured and appropriately recorded
- g) The process is aligned to local clinical governance policies
- h) You have considered the data governance elements associated with Telehealth and made provision for same
- i) You have provision made for staff to be appropriately trained in the use of Telehealth and work within the scope of their practice.
- j) You have considered the location(s) where virtual clinics will take place, taking into consideration:



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- A private, well-lit area where you will not be disturbed during the consultation
- Ensure background of the video call is appropriate, no visibility of sensitive information e.g. whiteboard with personal data, X-rays, personal items etc.

6.0 KEY ROLES AND RESPONSIBILITIES TO ENABLE IMPLEMENTATION

The organisational governance is outlined in Figure 1.

6.1 Chief Executive Officer /Hospital General Manager

The CEO/GM is accountable for ensuring that there are effective arrangements for the use of Telehealth in the hospital. They are also responsible for securing resources and overall operational governance and ensuring that use of Telehealth aligns with organisational strategic priorities. The CEO/GM can delegate responsibilities to the appointed project manager, Clinical Director, CCO, CCIO, Director of Nursing, Department head, IT Managers, Clinical Risk and others as deemed appropriate whilst ensuring there is an identified project sponsor and business owner.

Key Chief Executive Office delegations (in the absence of individual specific site managers)

6.1.1 Information Technology: CEO/GM is responsible for ensuring that there is an IT resource that can support ensuring that the hospital IT system can support the use of Telehealth prior to any implementation planning, to include provision of adequate hardware(PC's Laptops)WIFI, equipment, microphones, videos, supporting home set up where possible.

Key areas of note:

- The provision of hardware is outside of the scope of this project
- This project relates to the provision of the software solution for virtual clinics and enabling devices to support the technical element of virtual clinics
- Please ensure that any requirements for enabling devices such as webcam, headset etc. are included in your submission
- In the event that there are hardware requirements (Desktop/Laptop/Surface Pro/Smartphone), these should go through the normal processes within your organisation
- Google Chrome should be installed on the device that you plan to use for Telehealth
- You must have access to HSE network (e.g. cabled site, MIFI, HSE Smartphone) at the location where you intend to carry out video consultation

6.1.2 Information/Data Governance Lead: CEO/GM is responsible for ensuring that there is a resource to support governance of clinical and operational information to ensure new processes required to implement the Telehealth solution and adhere to GDPR regulations.



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6.1.3 *Transformation Lead:* CEO/GM is responsible for ensuring that there is a resource to support the clinical change management process associated with the Telehealth solution. This should include communication and stakeholder management plans that will support successful implementation and adoption of Telehealth.

6.1.4 *Risk Management:* CEO/GM is responsible for ensuring that there is a resource to support undertaking a risk assessment to ensure any critical or major risks have been mitigated in advance of implementation. Many sites will already have in place a risk assessment and/or quality improvement frameworks. If required, a risk assessment template can be provided and amended as appropriate to suit local needs.

6.2 CLINICAL USERS: Clinical Director, Director of Nursing, HSCP Leads / HSCP Head of Department

Each of the above leads should ensure:

- Provision is made for staff to be appropriately trained in the use of Telehealth and work within the scope of their practice.
- Appropriate policies are provided and adhered to when utilising the Telehealth process in their area and ensuring there is and mechanism to monitor same as required.
- Ensuring that there is a mechanism for patients to provide feedback in a safe manner that is followed up and addressed as needed.



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7.0 READINESS

7.1 TO BE COMPLETED BY HOSPITAL CEO

Confirm that your organisation will be working within the recommendations Operational Governance Guidance for Telehealth implementation documentation

Confirm that you will undertake the appropriate steps in terms of preparedness for roll out of Telehealth within your specialties/services

Indicate Hospital Project Manager (Nominated by Hospital CEO)	Name:
	Email:
	Phone:

Indicate identified an ICT lead (where relevant) to support this process	Name:
	Email:
	Phone:

Hospital CEO agreement and approval

Hospital CEO:
Signature:
Date:

6.2 TO BE COMPLETED BY HOSPITAL GROUP CEO

Confirm that your organisation will be working within the recommendations Operational Governance Guidance for Telehealth implementation documentation

Indicate Hospital Group Project Lead (Nominated by Hospital Group CEO)	Name:
	Email:
	Phone:

Hospital Group CEO agreement and approval

Hospital Group CEO:
Signature:
Date:

Figure 1. Organisational Governance Summary for Implementing Telehealth in Acute Hospitals

