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Chapter XI

Telehealth Organizational Implementation Guideline Issues:
A Canadian Perspective

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Abstract

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The current status of policies, guidelines and standards related to the organizational context of clinical telehealth practice were investigated. The directions these should take to meet the healthcare needs of Canadians also were outlined. An environmental scan approach was employed, consisting of a literature review, stakeholder survey questionnaire, and 12 key informant interviews. The literature review resulted in 260 sources related to organizational leadership issues, of which 176 were abstracted. The stakeholder survey questionnaire response rate was 64% (156/245), with 55% (84/154) completing the organizational context section. All (100%) key informants who were selected for interviews participated. Findings were categorized into four key organizational themes: organizational readiness, quality assurance, account- ability, and continuity. Organizations need to review existing policies, standards, and guidelines in order to determine whether telehealth is covered and, if not, revise them or develop new telehealth-specific policies. Telehealth policies and procedures should be integrated with those in existence for face-to-face services.

Introduction

In Canada, there are 14 health jurisdictions; all are engaged in deploying telehealth applications. Telehealth, as defined in this project, is "the use of information and communications technology to deliver health and healthcare services and information over large and small distances" (Picot, 1998). Clinical telehealth applications are now operational in tertiary and community healthcare settings. As the number of telehealth projects, programs, and services has increased steadily, greater attention is being focused on policy and quality issues related to the delivery of telehealth services. There is increasing interest among healthcare professionals and administrators, healthcare institutions, organizations, businesses, government agencies, and regulatory bodies to develop and adopt policies, procedures, guidelines, and standards for use within provinces across Canada.

The National Initiative for Telehealth Guidelines (NIFTE) was established in order to develop consensus on a national, interdisciplinary framework of guidelines for use by health-sector organizations (National Initiative for Telehealth Guidelines, 2003). The guidelines were designed by telehealth providers for use by health professionals in developing their specific standards and as benchmarks for standards of service and by accrediting agencies in developing accreditation criteria. A major activity of the project was an Environmental Scan designed to examine four content areas related to telehealth: Organizational Context, Technology and Equipment, Clinical Standards and Outcomes, and Human Resources (National Initiative for Telehealth Guidelines Research Consortium, 2003).

The organizational context team investigated the status of policies, guidelines, and standards as they related to the organizational or administrative context of clinical telehealth practice in Canada. In addition, this component also explored the directions that telehealth administrative policies, guidelines, and standards should take in order to meet the healthcare needs of Canadians. The purpose of this article is to synthesize the findings of the environmental scan and to summarize the organizational issues and recommendations related to clinical telehealth implementation within organizations.

Literature Review

There is a recognized need for national standards for healthcare professionals and guidelines for the accreditation of healthcare organizations and facilities that provide telehealth services. This lack of standards and guidelines has been considered to be a barrier to the successful integration of telehealth into healthcare facilities. Standards are requirements that an organization must meet in order to earn accreditation and

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