



## Orthopedic and Sports Injury Services

1 – 7650 Grant Street, Mission, BC V2V 3T3

Phone: 604-820-8285 Fax: 604-820-8287

Email: info@oasismissionphysio.com



### Patient Information and Consent for Receiving Physiotherapy through Virtual Care / Telerehabilitation

#### Patient Information

Telerehabilitation is the use of information or communication technologies to allow you and your physiotherapist/kinesiologist to connect via video to receive physiotherapy services at a distance, when an in-person visit is not possible. Here are a few frequently asked questions about telerehabilitation in physiotherapy.

#### When might telerehabilitation be appropriate?

Telerehabilitation is being implemented to continue care for patients during the COVID-19 Virus outbreak. This allows us to continue to provide services while keeping people at home and in a safe environment.

#### When would telerehabilitation not be appropriate?

Telerehabilitation has limitations compared to an in-person encounter such as the inability to perform hands-on examination, assessment and treatment. For this reason, in many circumstances, if suitable in-person care is available it will be preferable. Please contact us for further information.

We are under strict guidelines as to who is eligible for in-clinic treatments as per recommendation from BC Health Officials. For more details on this, please visit our website, oasismissionphysio.com and select "COVID-19 Health and Safety Policy under the News tab.

#### Will I get good quality care?

Expect to receive the same safe, quality care that you would get during an in-person visit. The College expects physiotherapists/kinesiologists to meet the same standards of practice regardless of how the services are delivered.

#### What are the risks of receiving care via telerehabilitation?

The risks of receiving physiotherapy care specific to telerehabilitation relate mostly to concerns about the privacy of your personal health information, and your personal safety. To ensure this our telehealth application employs authentication and encryption technology to ensure compliance with PIPA and PIPEDA. The physiotherapist/kinesiologist is required to ensure that the location where you receive care is safe, and that procedures are in place to ensure the availability of help in the event of an emergency. We do recommend that the visit proceed in the presence of another person to enhance the safety and value of the visit. If this is not possible, we request an emergency contact number that we can call in the case of an emergency.

#### Do I have to pay for telerehabilitation physiotherapy services?

It depends. Some physiotherapy services may be covered by government funding, for example if you are having a follow up visit after discharge from hospital. ICBC, and WorkSafeBC have agreed to fund all current patients. If the service is not publicly funded, you would need to pay in the same way as you would if you were attending an in-person visit. In some cases, extended benefit carriers will cover your virtual care session. Please contact your provider.

#### If my physiotherapist isn't in the room, who will help me and what types of care can be provided?

Depending on the setting, physiotherapists/kinesiologists providing consultation via telerehabilitation may require assistance from your family or friends.

The physiotherapist/kinesiologist is required to ensure that an appropriate level of support and assistance is available to address your needs and ensure your safety, and that you agree to the involvement of this assistance.

Examples of services that can be provided by telerehabilitation include, but are not limited to, consultation with local physiotherapists, education and instruction, monitoring your progress with a treatment program, and supervised exercise or meetings with your health care team.

#### What if I have a concern about the care?

You may choose to raise your concerns with the BC College of Physical Therapists at (604) 742-6556 or info@cptbc.org.

#### Consent:

By signing below, I confirm that I have read and understood the information provided on telerehabilitation and that I agree to receive my physiotherapy through telerehabilitation. I also understand that I can withdraw my consent at any time.

Patient Name: .....

Patient Signature: .....

Date: .....

Emergency Contact:.....

Emergency Contact Number: .....