Registrar's message: recently published Virtual Care practice standard clarifies post-pandemic expectations

The use of virtual care was accelerated by both providers and patients during the COVID-19 pandemic. The pandemic has helped expand virtual care opportunities in the province and underscore numerous areas for improvement—both in practice and in policy. Key learnings from the pandemic, along with feedback gathered from 1,265 registrants (376 specialists and 889 family practitioners), 379 members of the public and numerous key health partners, have informed the College’s recently revised Virtual Care practice standard. Along with the updated practice standard, a short video outlining the changes to the standard, and a revised Virtual Care: What to Expect patient resource have been published.

In addition to updating the title from Telemedicine to Virtual Care, the revised standard reminds registrants that while virtual care can be highly beneficial to patients, it can also exacerbate disparities for those who lack access to technology, have limited digital literacy or face other barriers to virtual communication. Additionally, the standard has been revised to include a more relaxed consent process to reflect realistic expectations, to increase access to patients on opioid agonist therapy, and to outline clearer expectations on cross-border virtual care.

Perhaps the most significant revision to the updated practice standard is around the appropriate use of virtual care. Through the pandemic, there was a remarkable coming together across populations, health
professions, educators, regulators, governments, and learners to ensure patients continued to receive care. However, significant concerns were also raised, including the inappropriate referral of patients to specialists or emergency departments prior to completing a necessary in-person assessment. Another notable concern raised is the provision of virtual care by registrants based far away from the patient's location without an established relationship with local providers to whom the patient could be referred for necessary in-person care.

To address these issues, a new section has been added which acknowledges the benefits of using virtual care to screen patients during pandemics and epidemics, while highlighting the importance of integrating virtual care with comprehensive longitudinal primary care. In the context of episodic care, the College specifies that access to longitudinal care must be provided as indicated and required by patients. If a registrant is not near the patient's location, they must have a formal affiliation with in-person providers in the patient's home community, so that a timely in-person assessment can be arranged for when necessary. This is an important clarification intended to reduce fragmented care and inappropriate use of services, and emphasize the importance of using virtual care as a complementary component of the health-care system that is integrated into comprehensive longitudinal primary care and specialty care.

The College thanks all those who helped shape the updated practice standard and commends the physician leaders, system leaders, and communities who continue to help move the needle on patient-centred, quality care in our province. We look forward to continuing to play our part in ensuring virtual care is maximized in the best interest of BC patients.

Questions related to the revised Virtual Care practice standard may be directed to communications@cpsbc.ca.

Heidi M. Oetter, MD
Registrar and CEO

Comments on this or any other article published in the College Connector can be submitted to the communications and public affairs department at communications@cpsbc.ca.
Treating unvaccinated patients

While the majority of eligible British Columbians have received at least one dose of the COVID-19 vaccine to date, there are still patients who have chosen not to receive it for personal reasons.

Registrants must ensure unvaccinated patients are given the same access to care as vaccinated patients. It would be indefensible from an ethical point of view for a registrant to require documented proof that a patient has been vaccinated as a prerequisite for attending their office. However, it is reasonable for a registrant to request that patients report their vaccine status to them. Once aware of a patient’s vaccine status, registrants should manage appointment times in a way that does not compromise the health of other patients or their medical office staff.

If a patient is reluctant about the COVID-19 vaccine, registrants should discuss with the patient their reasons for the reluctance. Registrants are expected to answer questions to the best of their ability, and refer patients to supported scientific evidence about the vaccine from the BCCDC and other reputable sources.

More information can be found from the Canadian Medical Protective Association’s guidance on the expectations of care around the COVID-19 vaccine.
New College website launched

The College website launched on July 26. To ensure a seamless transition to the new site, following are some of the changes and new features to take note of:

**New features**

One of the main goals of the new website is to make it easier for registrants, staff at facilities and applicants to fulfill their regulatory obligations.

The College has tested the design and navigation, content and functionality with registrants to ensure the new site achieves that goal.

- Extensive changes have been made to the registrant portal to increase efficiency and enhance the user experience.
- There is more flexibility for how registrants make payments.
- The registrant directory has more dynamic search criteria. It is easier to rerun searches with fewer clicks, and a reverse MSP lookup feature has been added.
This short video tutorial of the new registrant directory will help you and your office staff get familiar with some of the new features.

Updating web browsers

The new College website is hosted on an upgraded platform. As such, some internet browsers will not be supported.

You will need to upgrade or switch browsers if you are currently using Internet Explorer 10 or older.

Supported browsers include Internet Explorer 11, and the most up-to-date versions of Chrome, Firefox, Microsoft Edge and Safari.

Acknowledgements

Registrants and members of the public were engaged through user testing at every project milestone and design iteration. More than 110 registrants provided their feedback through user testing, and much of this feedback informed decisions around the site’s final design. The College website project team would like to thank registrants who participated in user testing for their time and insight.
The Patient Relations, Professional Standards and Ethics Committee (PRPSE) met on June 14, 2021 to review and discuss revisions to a number of practice standards, including: **Complementary and Alternative Therapies; Leaving Practice; Medical Records, Data Stewardship and Confidentiality of Personal Information; and Primary Care Provision in Walk-in, Urgent Care and Multi-registrant Clinics.**

The revised practice standards have now been approved for publication by the College’s Executive Committee. The following edits were incorporated into each practice standard.

**Complementary and Alternative Therapies**

- Revised to include a new section outlining registrants’ obligations when their patient is attending another provider for complementary or alternative therapy.

**Leaving Practice**

- Revised to change “secure email” to simply “email.” The qualifying term was removed as dictionaries define “secure” as including encryption (and the requirement of a password or other means of authentication) which could pose as a barrier to effective communication.
- To reflect more realistic expectations, the following was added to the standard: “Care must be taken
to protect personal information, in accordance with privacy legislation. Messages must be limited to factual, general advice. Email distribution lists must be concealed.

**Medical Records, Data Stewardship and Confidentiality of Personal Information**

- Revised to include the requirement of registrants to maintain a cumulative patient profile (CPP).

**Primary Care Provision in Walk-in, Urgent Care and Multi-registrant Clinics**

- Revised to include the requirement that a medical director must have a clearly identified alternate, who is also a physician, to assume their responsibilities when the medical director is unavailable.

Any questions related to the updated practice standards can be directed to communications@cpsbc.ca.
Philips Respironics recall of positive airway pressure (PAP) devices—what registrants should know

The College believes this is an important issue that registrants should be aware of and have access to information to guide their patients.

Philips Respironics voluntarily recalled many of its positive airway pressure devices due to secondary harm from breakdown of the polyester-based polyurethane (PE-PUR) sound abatement foam. On June 23, 2021 Health Canada posted a recall for the same devices.

The Canadian Thoracic Society (CTS), Canadian Sleep Society (CSS), and Canadian Society of Respiratory Therapists (CSRT) have recently provided guidance in a position statement and Philips’ website also includes advice to providers.

Patients may be contacting their physician for advice on whether to continue using their positive airway pressure devices. The CTS, CSS and CSRT statement provides direction to registrants in this regard. As there are immediate risks in some patients with discontinuing treatment, registrants are advised to become familiar with this guidance and discuss treatment options with their patients.
New Controlled Prescription Program website launched

The drug programs department is pleased to announce the launch of a Controlled Prescription Program (CPP) website hosted by the College of Pharmacists of BC, which contains useful information on all things relating to the CPP, duplicate prescription forms, and drug scheduling.

This website was developed with program partners including the College of Dental Surgeons of BC, the College of Pharmacists of BC, the BC College of Nurses and Midwives, the College of Veterinarians of BC, and the BC Ministry of Health.

Visit the website to find:

- updated information on Schedule 1A drugs which require a duplicate prescription
- information on the new harmonized duplicate prescription pad
- information on ordering pads
- examples of how to fill out duplicate prescription pads for various drugs and circumstances, including opioid agonist treatment (OAT)
- information on statutory requirements for documentation and record keeping
Patient safety incident review: malignant hyperthermia in the non-hospital setting

The following information and recommendations are being shared to assist facilities in their continuous quality improvement.

The Non-Hospital Medical and Surgical Facilities Patient Safety Incident Review Panel has recently reviewed an incident involving suspected malignant hyperthermia (MH). The case was very well managed, and the rapid use of dantrolene may have prevented the further harm that is often seen with a fulminant MH crisis. This case highlights the need for dantrolene as part of a non-hospital facility’s emergency supplies.

The following recommendations provided to the facility involved are important when dealing with this critical situation:

• It is suggested that MH cases with modern volatiles and less severe presentations be reviewed by the most responsible physician with MH experts in Toronto and/or the Malignant Hyperthermia Association of the United States.
• Modern volatiles seem to result in less severe MH cases especially when no succinylcholine is used as a co-agent.¹ Temporal delay from onset of use of volatiles seems typical with sevoflurane/desflurane versus halothane. Perhaps with modern volatiles the single dose of dantrolene 2.5 mg/kg is all that is
needed to break the cycle.

- Facilities must ensure that documentation of the event is as detailed as possible.
- The Non-hospital Medical and Surgical Facilities Accreditation Program standards state periodic MH drills must be conducted to ensure that the facility is physically prepared, and staff are ready to act in the event of a MH crisis. All personnel must receive training, and simulated MH drills must be performed annually at a minimum.

Read the Malignant Hyperthermia accreditation standard for more detailed information.

Medical directors and clinical leads are encouraged to share this information with their clinical team and to review protocols to prepare for this life-threatening situation.

Reference

Laboratory medicine standards revised

The foundation of the Diagnostic Accreditation Program (DAP) is the provincial standards and accompanying criteria set by the DAP.

The laboratory medicine standards were revised after completing a formal review of the existing transfusion medicine standards with CSA Z902-2020 National standards for blood and blood components. The review and revision process included meetings with the DAP Transfusion Medicine Advisory Committee, and feedback received from stakeholders across BC.

The revised standards (version 1.6) were published on July 2, 2021. Laboratory medicine facilities will be assessed to the new standards starting February 1, 2022.

The standards, along with the revision record, are available on the College website.
Sexual and gender diversity resources

British Columbia celebrates LGBTQ2S+ citizens between June and August. To mark the occasion, the College library has curated a collection of sexual and gender diversity resources that is available to registrants.

The resources focus on medical aspects of care and inclusive practice to help registrants provide diversity-competent care. Over 30 online books and books chapters, five guidelines, and 15 review articles for generalists and specialists may be viewed online. Some are also available for download. Physical books may be received by mail with return postage included.

The library welcomes suggestions for adding high quality, evidence-based material to the library’s collection and this reading list. Suggestions can be sent to medlib@cpsbc.ca.
CPD events

Information on all upcoming events and workshops can be found on the College website.
Regulatory actions

Read the full public notification.

• West, Jacques – July 15, 2021