



COLLEGE OF
DENTAL HYGIENISTS
OF MANITOBA

PRACTICE DIRECTION: PROVISION OF VIRTUAL SERVICES

September 2022

The College of Dental Hygienists of Manitoba is responsible for developing professional resource documents for dental hygienists and in serving the public interest. Council approves these documents, of which, the purpose is to explain, enhance, add, or guide dental hygiene practice in accordance with The Dental Hygienists Act and Regulation. It is the responsibility of the dental hygienist to understand and comply with these documents.

College of Dental Hygienists of Manitoba's Practice Direction for the Provision of Virtual Services

Purpose

This guideline is intended to increase access to dental hygiene services by facilitating the provision of virtual care to clients.

CDHM registrants may offer virtual dental hygiene services to clients as *part* of an oral health model of care that continues to offer in-person care.

The purpose of this document is:

1. To support the provision of safe, effective, ethical, and competent virtual dental hygiene services.
2. To provide CDHM practicing registrants with standards for acceptable use of virtual dental hygiene services.
3. To ensure virtual dental hygiene care services:
 - complement in-person services as part of the overall model of oral health care;
 - are provided to the public in a manner that is safe, appropriate to the services being provided, competent, of high quality, and sustainable; and
 - improve accessibility, timeliness and efficiency.
4. To mitigate risks, but realize opportunities, that will assist in providing continuous, appropriate dental hygiene services to the public.

Background

What are Virtual Dental Hygiene Services?

Virtual dental hygiene services are a viable means to increase access to oral health care, especially for underserved populations in rural communities, and those who may face travel, physical mobility, and other barriers. It has been shown that virtual dental hygiene services connects practitioners to more clients at a lower cost, improves health outcomes and quality care, and reduces oral disease burdens.

The term, 'virtual dental hygiene services', refers to the dental hygienist and client not being in the same physical location, but communicating using technology such as: videoconferencing, teleconferencing, email, or other technology. Use of virtual dental hygiene services provides the public with an additional tool to manage their oral health.

The model and concepts for virtual dental hygiene services are similar to tele-dentistry, tele-dental, telemedicine, tele-health, and virtual health services. And the terms tele-dentistry and tele-dental, and their respective subunits such as: teleradiology, teleradiology and telemonitoring, are essentially synonymous with virtual dental hygiene services.

Dental hygienists must ensure that the platform they choose to provide virtual dental hygiene services enables them to meet the Standards set out in this document.

Requirements

1. All virtual dental hygiene services provided must adhere to the *Dental Hygienists Act* and Regulations, and the CDHM Standards of Practice.
2. Registrants must use their professional judgement to determine the suitability of virtual dental hygiene services by taking into consideration the following factors:
 - a. Whether virtual services are the most appropriate method to deliver services;
 - b. Ability to deliver substantively equivalent care by virtual means as that delivered in-person; and
 - c. Whether client factors such as physical, sensory, or cognitive deficits may impact the ability to provide appropriate virtual services.

Dental Hygiene Services that may be Provided Virtually

While many dental hygiene services can only be provided in-person (e.g., sealants, periodontal debridement), some dental hygiene services can be provided effectively through virtual means.

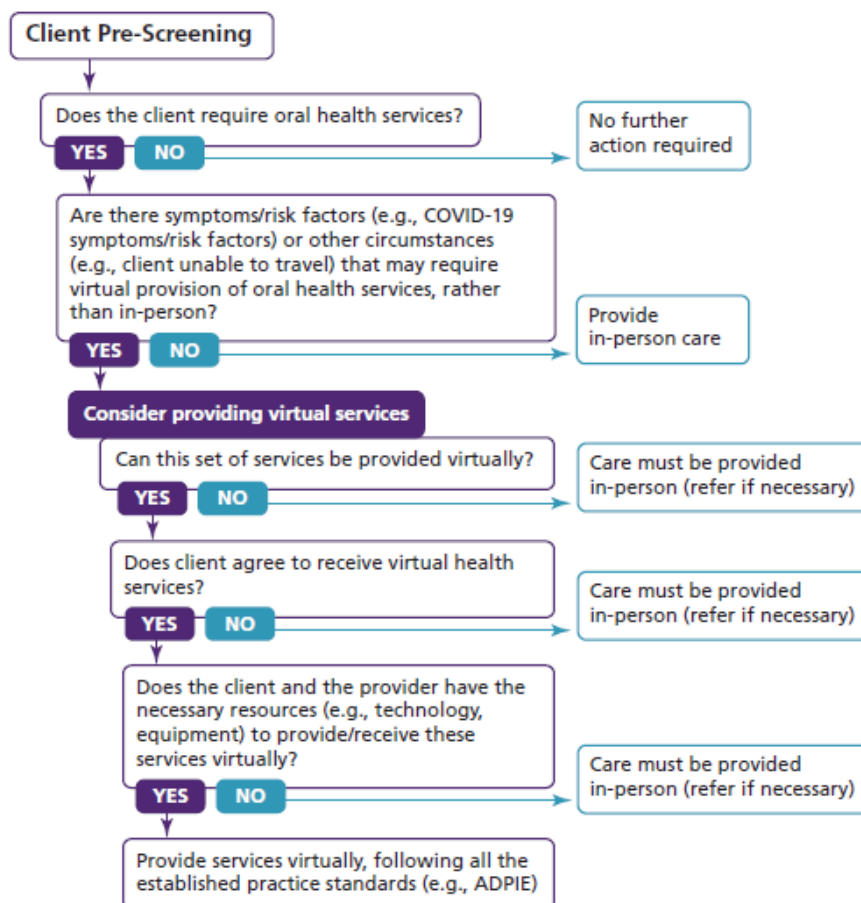
These may include:

- Client education, instruction, advice, or counselling;
- A review of electronic health history and/or records;
- Assessment, diagnosis, examination or evaluation of new or existing conditions or lesions;
- Monitoring or follow-up (e.g., for existing ongoing care or following recent care), including:
 - Virtual imaging (photographs & videos);
 - Photographs for purposes of dental hygiene diagnosis and;
 - Non-ionizing scanning procedures.
- Consultations and treatment (care) planning and;
 - Professional communications/case presentations
- Assessing the need for a referral.
 - Electronic referral systems

Decision Making Flowchart

The provision of virtual dental hygiene services must be in the best interest of the client. Registrants must recognize when it is not appropriate or safe to provide care virtually. At no time should registrants compromise the quality and safety of care by delivering virtual dental hygiene services that are inappropriate or unsafe.

The flowchart guides decision-making and assists in determining when it may be appropriate to provide virtual dental hygiene services.



Technology, Security, and Privacy - Standards and Legislative Requirements

Virtual dental hygiene services can be provided using a variety of methods. The CDHM does not advise on the use of specific platforms/methods. Any platform/method selected must meet standards of practice and legislated requirements regarding technology, security, and privacy.

Technology

Below are examples of technology that may be used during the delivery of virtual dental hygiene services:

- **Live video (synchronous):** Live, two-way interaction between a person (client, caregiver or provider) and the registrant using audiovisual telecommunications technology. Real-Time Consultation involves a videoconference in which dental professionals and their patients, at different locations, may see, hear, and communicate with one another
- **Store-and-forward (asynchronous):** The storing and forwarding of recorded health information (e.g., radiographs, digital impressions, photographs and video of clients) through a secure electronic communications system to a registrant who uses the information to evaluate a client's condition or render a service outside of a real-time or live interaction (i.e., non real-

time consultation). Recorded health information of a patient is transmitted to a practitioner for evaluation

- E.g., The transmission of clinical information and intra-oral images collected and stored by a registered dental hygienist, who forwards them to a dentist for consultation and treatment planning; the client is not present during this exchange.
- **Please note:** Asynchronous methods of virtual care such as texting and email are not approved at this time for the actual provision of virtual care. The areas noted above and other activities such as texting or emailing to confirm appointments remain acceptable.
- **Remote client monitoring (RPM):** Personal health and medical data collection from a client in one location via electronic communication technology that is transmitted to a registrant in a different location for use in care and related support of care (e.g., via a data processing service).
 - E.g., Patients are monitored at a distance and can either be hospital-based or home-based.
 - Where personal health and medical data collection is forwarded to a provider in a different location for use.
- **Mobile health (mHealth):** Health care and public health practice and education supported by mobile communication devices, such as smartphones, tablets, or computers, and other wireless technologies: mobile apps, SMS text messaging etc.

Security and Privacy

In addition to the applicable standards of care, registrants are expected to provide virtual dental hygiene services in compliance with all legislative and regulatory security, and privacy requirements relevant to their practice. Regardless of the method used, all reasonable steps must be made to ensure that personal client health information is protected. Concerns about confidentiality arise from both the transfer of client history and records, as well as from general security issues of electronically stored information.⁴

- Health information **custodians**, as defined in *The Personal Health Information Act (1997)* (PHIA), must ensure the security and privacy of personal health information.
- All **agents** of the custodian e.g., an employee of the custodian, must also comply with PHIA when collecting, using, or disclosing personal health information.
- Document privacy and security measures used to protect the client's health information.
- Establish and follow policies and procedures to verify *your* identity, including your professional designation, the client's identity and any third parties who are observers or engaged in the delivery of care (e.g., family members, support staff, other health professionals). Document the verification processes used.
- Conduct the appointment in a private environment where the client information is not overhead or seen by other individuals not involved in the appointment.
- Employ authentication and encryption technologies, as well as secure transmission systems and storage mechanisms.
- Follow policies and procedures to ensure that client records cannot be accessed by unauthorized users, tampered with or destroyed, and are protected at both the originating and remote sites.
- Secure all physical devices and information related to virtual services.
- Remain up-to-date on current and emerging risks to client privacy inherent to virtual health services and employ technical, administrative, and physical controls to address these risks.

Provision of Care

A dental hygienist must meet the established practice standards, such as the APIE process of care model. Included are specific considerations for virtual dental hygiene services in the next sections.

- Determine own competence to safely and effectively engage in virtual oral health services with the client, including competence in using the technology and the skills to deliver the services virtually (e.g., effectively assess and evaluate the client virtually, developing rapport).
- Have ready access to the client’s information/file/chart.
- Follow quality assurance mechanisms to ensure that care provided virtually is safe, effective, and consistent with legal and professional obligations.
- Work with the client to determine the best modality for the specific client encounter/situation. This includes meeting the following:
 - Ensuring adherence to practice standards and protocols outlined by the CDHM.
 - Prioritizing client’s preferences and needs, including risk of increased client isolation.
 - Using professional judgement based on consideration of all factors, including determining if a virtual option is appropriate.
 - Remaining within the dental hygiene scope of practice outlined in the Act and Regulations, as well as your individual scope of practice and competencies as a dental hygienist.

Informed Consent

Informed consent in virtual dental hygiene services encompasses that which exists in standard, in-person clinical informed consent.⁴ **Clients have the right to choose an in-person visit and/or refuse a virtual appointment.** As with all healthcare services, a consent must be “informed” to be valid.

Advise the client that part or all of the virtual dental hygiene services may not be eligible for reimbursement with their insurance plan.

- In addition to the general requirements of informed consent for virtual dental hygiene services, the client must:
 - have a clear understanding of the limitations that virtual services present as compared to in-person services.
 - be aware of all available treatment options, including options to receive in-person care and the unique risks and benefits that virtual dental hygiene services provide, and any safeguards employed to address the risks.
- Augment routine informed consent processes as required to support virtual delivery. This may include express consent:
 - to receive services virtually rather than in person.
 - for videotaping, recording, or otherwise storing information and data from the virtual session.
 - for the transmission of information via virtual technologies.
 - for the participation of other healthcare providers, or the client’s family or caregivers, in the provision of care.

Adverse Events/Safety Concerns

Consider the various safety issues that are possible with providing virtual dental hygiene services such as:

- Failure of the communication technologies used to provide the virtual services.
- Client medical emergencies (e.g., falls, injuries, heart attack, stroke).
- Other emergencies (e.g., fire).
- Develop and follow protocols and strategies to manage these events:
 - Obtain access to appropriate technical support for trouble shooting in the event of technical difficulties.
 - Test all technologies prior to the appointment to ensure system functioning as per what is done with all technologies used in oral health care.
 - Have an alternate method to contact the client.
 - Determine a reasonable and timely course of action for follow-up with the client should the virtual care technology become unavailable during the appointment.
 - Have a safety protocol in place in the event of an emergency or adverse event.
 - Be aware of other service providers in the client's area for referral purposes in the event of a client adverse event or complication.
 - Facilitate the transfer of care to another service provider or schedule an in-person visit if the RDH or client determines that virtual services are not appropriate.

Documentation and Billing

Services delivered virtually are subject to the same standards as in-person healthcare services; however, several additional documentation and recordkeeping considerations must be addressed:

- You retain the accountability for evaluating any information gathered from a third-party source (e.g., a non-HCP physically co-located with the client), to determine its reliability and accuracy, and the ability to incorporate the information into the assessment or treatment.
- Document each interaction in accordance with Standards of Practice.
- Retain any video or audio recordings on the client record that is generated as part of virtual interventions. These are kept confidential and in a secured space.

Billing for services: As with all services provided (virtually or in-person), billing for services provided should be transparent, accurate, and comprehensive. Below are additional elements to address:

- Provide receipts reflecting that the dental hygiene services were delivered *virtually*.
- Ensure the client is aware of what services can be expected in return for fees charged.
- If, during a virtual visit, you determine that a care plan cannot be determined from the preliminary virtual clinical assessment and an in-person encounter is required to make an appropriate clinical assessment and decision, you are not to bill for the virtual assessment.

*This practice direction reflects current knowledge and is subject to periodic review and revisions with on-going research.

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