
Professional Standards Regarding Virtual Care

Preamble

The regulation and provision of virtual care continue to evolve. The College will be revisiting this standard on a regular basis, recognizing the role virtual care plays and will continue to play in the provision of medical care.

The decision to provide virtual care requires an exercise of professional judgement, considering the circumstances and condition of the patient.

This standard applies to synchronous and asynchronous virtual care.

Professional Standards

1. When providing virtual care, physicians must meet the standards of care that apply to care delivered in person, including those pertaining to prescribing, medical record keeping, protecting personal health information, consent to treatment, and continuity of care.
2. When arranging their clinical schedules, physicians must:
 - a. Offer virtual care to patients only in conjunction with in-person care, not as an absolute alternative to in-person care; or
 - b. If unable or unwilling to provide in-person care themselves, physicians providing virtual care must have an arrangement in place with an accepting provider to provide in-person care in a reasonable timeframe to patients who require or request it.
3. When offering virtual care to patients, physicians must:
 - a. Apply professional judgment to determine if, when and how to use virtual care;
 - b. Provide virtual care with the informed consent of the patient;

Physicians are encouraged to review the College's [*Professional Standards and Guidelines Regarding Informed Patient Consent to Treatment*](#). In addition to the requirements of this document, the patient-consent process for virtual care services must ensure the following information is reviewed by the patient:

- i. Where the physician is located and licensed to practice medicine; and
- ii. How the privacy of the patient's personal health information will be managed.

c. Document their logic as to why virtual care was appropriate for the particular patient.

4. During a virtual visit, physicians must:

- a. Provide care consistent with accepted standards of practice. Virtual care must not compromise the standard of care;
- b. Not prescribe opioids or other controlled medications to patients whom they have not examined in person, or with whom they do not have a longitudinal treating relationship, unless they are in direct communication with another regulated health professional who has examined the patient;
- c. Where the virtual encounter is synchronous, physicians must confirm the physical setting of the patient is appropriate and safe; and
- d. If the physician determines it is not appropriate or safe to proceed, the physician must take action, which may include re-scheduling the appointment in a timely, safe and appropriate manner.

5. When virtual care identifies the need for an in-person assessment:

- a. If the physician determines that an in-person assessment is required, the physician must schedule an in-person assessment with themselves or an accepting provider as soon as the patient requires; and
- b. If the physician determines that an in-person assessment is required by a health care provider in a different scope of practice, the physician must make the referral, inform the patient and document the reasoning. If the virtual visit was the result of a referral from another physician, then the original referring physician must also be informed.

A note on Maple and VirtualCareNS, two pilot projects supported by government presently ongoing in Nova Scotia:

Presently, Nova Scotians unattached to a primary care provider can receive care through Virtual Care NS. Physicians providing care through that platform are not held to the standard set out in 5 (a).

As well, Nova Scotians attached to a primary care provider can access further care through Maple. Physicians providing publicly insured care through that platform are also not held to the standard set out in 5 (a).

All other provisions of this standard apply to physicians providing care on Maple and VirtualCareNS.

6. When offering virtual care, physicians must use technology that:
 - a. Allows physicians to gather the information needed to provide the care; and
 - b. Supports the sharing of high quality and reliable patient health information (e.g., diagnostic or other images that are of sufficient quality);
 - c. Take reasonable steps to protect personal health information (PHI), including protection against theft, loss, and unauthorized access, use, and disclosure of PHI. When providing virtual care, physicians must:
 - i. take reasonable steps to accurately identify the patient (e.g., verify their name and date of birth);
 - ii. conduct the encounter in a private setting, where applicable;
 - iii. disclose the identities of all participants that will be present during the encounter;
 - iv. ask the patient whether they are in a reasonably private setting and are comfortable discussing or sharing their PHI at that time; and
 - v. use secure information and communication technology (e.g., platforms that are protected by encryption), unless it is in the patient's best interest to do otherwise, taking into account:
 - (i) the nature and purpose of the encounter, including the degree of sensitivity of the PHI being shared,
 - (ii) the availability (or lack thereof) of alternative technology,
 - (iii) the volume of information and frequency of use,
 - (iv) patient expectations, and
 - (v) any emergency or other urgent circumstances;

- d. If using less secure technology (e.g., unencrypted platforms), physicians must obtain and document the patient's express (i.e., verbal or written) consent to do so.

Physicians must review the [Nova Scotia Personal Health Information Act](#). Note that certain communication technologies may not adequately protect the security of personal-health information. Physicians may wish to consult with the [Canadian Medical Protective Association](#).

7. Regarding jurisdiction:

- a. Physicians licensed in Nova Scotia who deliver virtual care to Nova Scotians are subject to the regulation of the College, irrespective of where the physician is located.
- b. Physicians licensed in Nova Scotia who deliver care into other jurisdictions in Canada will be held to the standards of that jurisdiction, while subject to the regulation of this College.
- c. Physicians licensed elsewhere in Canada who deliver virtual care into Nova Scotia will be held to Nova Scotia standards but subject to the regulation of their licensing authority.

Definitions

Virtual Care encompasses all means by which healthcare providers remotely interact with their patients' using communications and digital technology. Synchronous virtual care refers to interactions in real-time through telephone or video platforms. Asynchronous virtual care refers to interactions that do not take place in real-time, such as through email or message boards.

Personal Health Information, means identifying information about an individual, whether living or deceased, and in both recorded and unrecorded forms, if the information:

- relates to the physical or mental health of the individual, including information that consists of the health history of the individual's family;
- relates to the application, assessment, eligibility and provision of health care to the individual, including the identification of a person as a provider of health care to the individual;
- relates to payments or eligibility for health care in respect of the individual;
- relates to the donation by the individual of any body part or bodily substance of the individual or is derived from the testing or examination of any such body part or bodily substance;
- is the individual's registration information, including the individual's health-card number; or
- identifies an individual's substitute decision-maker.

Resources

College of Physicians and Surgeons of Nova Scotia

- [Professional Standard Patient Consent to Treatment](#)

Nova Scotia Department of Health and Wellness

- [Provisions of Publicly Funded Virtual Health Services \(November 2023\)](#)

Doctors Nova Scotia

- [Getting Started with Virtual Care: Everything you need to know to provide synchronous virtual care.](#)
- [E-health Privacy and Security Guide \(January 2021\)](#)

Canadian Medical Protective Association

- [Virtual care](#)

Canadian Medical Association

- [Virtual Care Playbook March 2020](#)

Nova Scotia Health

- [Virtual Care Information](#)
- [Virtual Care Patient Information Guide](#)

Canada Health Infoway

- [Providing safe and high-quality virtual care: A guide for new and experienced users](#)

Acknowledgements

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Document History

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