



## Telephone Encounters

Although telephone calls with patients are commonplace, a few best practices can improve clinical effectiveness for virtual care. Telephone-facilitated assessment, follow-up, education and care planning is familiar to patients and easily supported with existing infrastructure.

### Indication

A telephone encounter is suitable when in-person interaction is not required, video is not needed, and the patient's hearing, speaking and cognition are adequate. Appointment scheduling, test result communication and health maintenance reminders are typically brief. Assessment and planning encounters can last longer and include multiple team members.

#### Benefits

- Most people have access to a telephone and are familiar with its use.
- If a relationship is already established, a phone call can work well for follow-up assessments and care reinforcement.
- The telephone may offer an alternative to a video visit if a patient is uncomfortable with more complex telecommunications.

#### Limitations

- Participants typically cannot see each other.
- Care must be taken to not expose personal contact information of providers.
- Some telephone plans may incur extra charges for time spent on distant or longer encounters.
- Some locations struggle with unreliable cell coverage.

### Best Practices

- Confirm the patient's agreement to conduct the planned telephone encounter, while reassuring that teleconference or in-person alternatives can be arranged.
- Confirm the planned patient telephone number in the event of any disconnect and the encounter location in the event of emergency.
- Avoid unintended release of personal information by turning off caller-id, using Skype for Business, or using an office/clinic phone.
- Leave clear instructions if a patient is not available or does not answer.
- Confirm the patient's identity (2 identifiers if patient is new to the provider), your identity and purpose (**Name, Occupation and Duty; NOD**), and other permitted person(s) joining the call, including by speakerphone.
- Ensure the patient feels able to talk freely, in a private space.
- Document the encounter in the patient's record of care, including and discussed next steps.

### Documentation

Scheduled telephone encounters can be initiated, navigated and document like other virtual health appointments.

Ad hoc (not scheduled) telephone encounters should be documented with a "Telephone Encounter" visit type (created as a new encounter).

If a telephone encounter satisfies an outpatient referral, be sure to use the communication (Letter) workflow to generate an appropriate consultation or follow-up letter to the referring provider.

### Resources

- [Manual: Virtual Encounters](#)
- [Insite: Virtual Health](#)
- [Web: BC Office of Virtual Health](#)