

Department of Pediatrics Prevention Research Center for Family and Child Health Mail Stop 8410 13121 East 17th Avenue Aurora, Colorado 80045

Principles for Telehealth Usage in NFP I May 2021

Developed by the 'Covid-19 and use of Telehealth International Working Group'

Principles (including examples)

- 1. NFP is a home visiting program ideally delivered face to face (CME 7), Telehealth should therefore be seen as a hybrid approach, used to enhance the face-to-face contact (Increased flex, promote client retention, reduce cross infection risk etc)
- 2. Client challenges with accessibility and confidence in engaging with Telehealth should not be underestimated (e.g., Internet poverty and literacy challenges)
- **3.** Telehealth should do no harm to client or nurse (e.g., Risks re client disclosure of IPV and being aware of who else is in the client's home at the time, inadvertent breach of confidentiality, challenges of TH for clients with MH issues, blurred boundaries through home working,)
- 4. The focus should always be on the well-being of the child (often described as 'always keeping the child in mind/at the centre of all discussions')(e.g., potential for 'client avoidance' or 'disguised compliance' leading to lack of a robust assessment to protect a vulnerable child)
- 5. The NFP Nurse is best placed to assess which clients should receive Telehealth, in what dosage and when, based on their therapeutic relationship. Prolonged use of Telehealth with a family should be discussed and explored further with the NFP supervisor. (Ideally avoid Telehealth in the pregnancy period when the relationship is in the early stages of development, may be very helpful where clients have relocated and wish contact to remain with NFP nurse)
- 6. Telehealth can complement the Reflective Supervision process and also help maximise team connectivity when meeting face to face is a challenge
- 7. NFP Nurses require the skills and confidence to effectively deliver Telehealth through effective education and ongoing support (NFP nurses require support to use various visual approaches, and will benefit from an enhanced understanding re the various modalities and benefits of video contact and its advantages over telephone contact)
- 8. As Telehealth use in NFP is a new approach, evaluation of its impact should be undertaken by each implementing country (This should include the client and nurse experience, cost benefit analysis etc)
- **9.** Rates of Telehealth use and its impact on program delivery and outcomes should be captured through ongoing data collection and analysis (Including where needed a review of current data collection systems and processes, impact on e.g., client attrition, visit completion rates)
- **10.** In line with all new approaches to communication, a country's guiding principles around Information governance should be respected and adhered to *e.g.*, *UK/ European General Data Protection Regulations* (*GDPR*)