

MHEALTH A GROWING PHENOMENON: ETHICO-LEGAL CONSIDERATIONS

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COSTS

DIAGNOSE

VIRTUAL

E-HEALTH

DOCTOR

CHAT

MEDICAL

APPLICATION

HEALTHCARE

TELEMEDICINE

REMOTE

TABLET

PATIENT

SOFTWARE

HEALTH

COMPUTER

INTERNET

ONLINE

CARE

VIDEO

DIGITAL

WEB

#73117083

RESEARCH OBJECTIVE

- The aim of this study was to evaluate ethical guidelines, considerations and applicability in mHealth.

WHAT IS MHEALTH?

According to WHO (2015) mHealth is Improving health services using technology, this is inclusive of providing:

- Appointments
- Reminders
- Informational counselling
- Early teleintervention services



Telemedicine

#89837922

WHY MHEALTH?

- Healthcare workers are using technology to access patients in a way that is quicker, faster and more efficient.
- The use of smartphone applications in healthcare has been shown to improve access to Primary Health Care services and to further alleviate the human resource crises.

THE SPEEDY MHEALTH GROWTH

- Globally 8 in 10 countries are using mobile phone technology
- Community Oriented Primary Care (COPC)
- PEDS Tools smartphone App
- HearScreen App

ETHICO-LEGAL CONSIDERATIONS

- mHealth should not be applied in isolation and outside the parameters of ethics and the law (HPCSA, 2014).
- Ethical guidelines for good practice should be applied (HPCSA, 2014).
- Booklet No 1: General ethical guidelines for healthcare professions
- Booklet No 9: Seeking patients' informed consent
- Booklet No 10: Confidentiality

COMPETENCE, REGISTRATION AND AUTHORISATION

- Registration according to the Act
- Practitioners outside of SA: Registration with both their origin country and HPCSA.
- Adhere to the South African Health Standards.
- Held to the same standard as face-to-face health care providers.



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HEALTHCARE PRACTITIONER-PATIENT RELATIONSHIP

- The genesis of the relationship commences when the practitioner agrees to treat the patient and the patient agrees to the treatment.
- Mutual trust and respect
- Core ethical values as outlined in the HPCSA guidelines for Healthcare practitioners
- Care should not be influenced by non-clinical aspects

ASSUMPTION OF PRIMARY RESPONSIBILITY

- Treatment, decision and recommendations
- Efficient Record Keeping
- Ensure that advice and treatment are understood

EVALUATION AND TREATMENT OF PATIENT

- Case History
- Contra-indications
- Treatment and issuing prescriptions based on an online questionnaire is constituted substandard care
- Informed Consent; Services and Technology

PROFESSIONAL DUTIES

- National Health Act No 61 of 2003
- The SA National Patients' Rights Charter
- HPCSA's General Ethical Guidelines for Good Practice
- Acting in the best interest of the patient
- Respecting patients' privacy and dignity, giving patients the information they need about their conditions
- Maintaining confidentiality

PROFESSIONAL DUTIES

- The consulting and servicing healthcare practitioners should verify:
 - The location of the consulting or servicing healthcare practitioner
 - The identity and qualifications of the consulting or servicing healthcare practitioner
 - The identity of the patient



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DUTY TO INFORM AND INFORMED CONSENT

BOOKLET 9 & NHA

- Telemedicine technology – written informed consent
- Who will access their information
- The purpose of the telemedicine service
- The cost of the service and what the implications of the use of such information will be
- A copy in the patient's file and a duplicate issued to the patient
- Videoconference: Other people in the room, pt must consent

DUTY TO INFORM AND INFORMED CONSENT

BOOKLET 9 & NHA

- The details which should be on the informed consent:
 - The identities of the patient and the servicing healthcare practitioner.
 - The servicing healthcare practitioner's practice number.
 - The types of transmissions consented to using telemedicine technologies (e.g. prescriptions, refills, appointment scheduling, patient education etc.).
 - Agreement by the patient that the servicing practitioner will decide whether or not the condition being diagnosed or treated is appropriate for a telemedicine consultation.
 - Details of the security measures taken with the use of telemedicine technologies, such as encrypting data, password protected screen savers and data files, or the use of other reliable authentication techniques.
 - Any material risks to confidentiality arising from the use of telemedicine technologies that may influence the patient's decision to consent.
 - The patient's express consent to the transmission of the patient's personal medical information to a consulting healthcare practitioner or other appropriate third parties.



PATIENT CONFIDENTIALITY

- Pts Confidentially should always be maintained
- Electronic transmissions – password/encrypted
- Patient-practitioner electronic communication filed

- Constitution
- The National Health Act No 61 of 2003,
- The Promotion of Access to Information Act No 2 of 2000
- The Protection of Personal Information Act No 4 of 2013
- The Common law and the HPCSA's ethical guidelines on patient
- Confidentiality in Booklet 10

ROUTINE CONSULTATIONS

- There must be previously existing healthcare-patient relationship
- Patient-Initiated or Second Opinion
- WMA's Telemedicine guidelines, patient's safety and quality of care

SPECIALIST TELEMEDICINE

- Mainly rural areas
- Do not over or under service
- HPCSA ethical guidelines for good practices and Ethical rules of conduct for practitioners

EMERGENCY TELEMEDICINE

- Stabilising patient and referring for a thorough medical care
- Provide Emergency instructions in writing



QUALITY, SECURITY AND SAFETY OF PATIENT INFORMATION AND RECORDS

- Responsibility and Accountability
- Equipment and accessories optimally operational
- Periodic quality control tests and servicing of equipment
- Patient Information: Quality and Quantity
- Image resolution

QUALITY, SECURITY AND SAFETY OF PATIENT INFORMATION AND RECORDS

- Privacy: Who can access it?
- Authenticity: Who sends the information?
- Integrity: Has the information been altered during its transmission through the public networks?

QUALITY, SECURITY AND SAFETY OF PATIENT INFORMATION AND RECORDS

- Avoid accidental damage and loss of patient information;
- Provide safe procedures to avoid any alteration or elimination of patient data;
- Ensure that patient information obtained electronically is kept in line with the HPCSA's guidelines on the keeping of patients' records in Booklet 15;
- Comply with the legal requirements for data messages in the Electronic Communications and Transactions Act No 25 of 2002 regarding the protection of information and the principles regarding the electronic collection of personal information.

CONCLUSION

- Practitioners who engage in mHealth should always apply the general ethical guidelines for good practice in Telemedicine outlined by the Health Professions Council of South Africa and the law.

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THANK YOU FOR LISTENING

