

Messaging Guidelines for Virtual Care

This document provides clinicians with guidance for using “messaging” as a means of asynchronous (not occurring in real-time) virtual care communication with patients* or their alternate decision-maker. Clinical programs should establish their own procedures based on the information and resources contained within this document. **For the purposes of this document, patient also refers to the alternate decision-maker.*

AHS Messaging Platforms for Communicating with Patients

1. Connect Care MyAHS Connect patient portal
2. AHS secure email (Outlook)
3. Whenever possible, use either of the above two messaging platforms, as text messaging is not secure (encrypted) on all platforms
 - When text messaging (least preferred option), use the built-in text messaging application on an AHS-owned mobile device or personal device meeting AHS mobility standards (see links below). Ensure no personal health information is exchanged.

Adhere to AHS Policies and Procedures for Digital Communication

- [#1109](#) Information Technology Acceptable Use
- [#1113](#) Transmission of Information by Facsimile or Electronic Mail*
- [#1133](#) Records Management
- [#1133-03](#) Transitory Records
- [#1160](#) Mobile Wireless Devices & Services*
- [#1113-01](#) Emailing Personal Identifiable Health Information*
- [#1133-01](#) AHS Records Retention Schedule
- [#1133-02](#) Official Records Destruction

**Not applicable to messaging within Connect Care*

Prepare for your Messaging Encounter

- Messaging is an option for brief interactions with patients who have an existing relationship with you, the clinician (e.g., questions about an appointment, prescription, brief follow-up or check-in).
- Provide patients with program options for communicating with you between scheduled visits and discuss their preferred method.
- Screen patients for eligibility and technical requirements, ensuring communication using messaging that:
 - Aligns with the content and sensitivity of the information being shared
 - Supports patient outcomes and is in the best interest of the patient
 - Considers the patients' condition and symptoms
 - Corresponds to the patient's mental health, cognitive, and communication abilities
 - Considers the patient's primary language and need for translation services
 - Supports the patient's physical abilities
- If messaging is determined not appropriate, provide the patient with an alternate visit type.

Messaging outside of Connect Care:

- Inform patients of the [benefits and risks](#) of digital communication, obtain their [verbal agreement](#) to use technology for virtual care, and document this communication within the Legal Record of Care.
- Prior to emailing or text messaging, re-confirm the patients email address or mobile phone number.
- Note: When text messaging, the patient will have access to the mobile phone number from which the text was sent and may try calling you.

Inform Patients

- **Advise patients to call 911 if they have an emergency or urgent medical need.**
- Messaging is *one* of many options for communicating **non-urgent** information between in-person visits. This form of virtual care is intended for brief interactions.
- Discuss your program's policy regarding clinician messaging response timeframes to help patients understand that a response will not be immediate and when they can expect to hear back from you.
- Advise patients that they can call your clinical program during office hours, or contact Health Link at any time if they need to speak with someone sooner.
- Request patients avoid sending more than one message for the same request and advise them to call your program or schedule an appointment if they require a more timely response.
- Recommend patients check with their internet or cellular service provider to determine if fees will result from data or service use when connecting with this type of visit. Inform them that AHS is not responsible for these costs.

Messaging outside of Connect Care:

- Discuss the risk of unpredictable network connections and the impact on messages being sent or received, including what to do if they have not received a response within discussed timeframes.
- Inform patients that text messages are not encrypted and may be sent to the wrong person in error.

During the Messaging Encounter

- Be aware of the absence of tone and emotional expression within digital communication and how your message might be perceived by the recipient.

Messaging outside of Connect Care:

- Request patients respond to an initial 'test message' to verify their identity, before proceeding with additional conversation.
- Understand there is no guarantee messages will be read by the patient, and be prepared to follow-up, if required, or use an alternate form of communication.

Documentation

Messaging outside of Connect Care:

- Document the messaging encounter within the Legal Record of Care, as messaging within the platform is transitory. Refer to Clinical Documentation Directive [#1173](#) and Process [#1173-01](#), and Transitory Records Procedure [#1133-03](#).
- Ensure the messaging communication is noted as an encounter within your program's current registration system.
- Delete the communication from the device, as per Official Records Destruction Procedure [#1133-02](#).
- Images received should be treated as health information.

Additional Resources

[AHS Virtual Health](#)

[Connect Care – Health Professionals](#)

[Connect Care Communication Norms](#)

[AHS InfoCare](#)

[Connect Care Physician Manual – Virtual Care](#)

Please note AHS Virtual Health frequently reviews and updates documents. To ensure you are using the most current version, please download directly from the Virtual Health internal or [external](#) webpage at the time of use.