

Virtual ROU Assessments

Overview

- ROU admissions should be 1-3 days. By day three, a disposition decision should be made of either:
 - Discharge
 - Admit to an onsite ward.
- Length of stay can be flexible based on clinical need.
- Individuals in ROU should be assessed daily. If the individual is not known to the assessor, the first ROU assessment may be more comprehensive. Subsequent assessments will focus on daily updates in symptom status, response to treatment, safety issues, and whether the goals of ROU admission have been attained.

Process for Day One of Admission

1. Call the individual between 8:00-9:00am.
 - a. Confirm individual's identity – full name plus additional details as required.
 - b. Inform them again that they have been admitted to the Virtual ROU, where they will be followed by a psychiatric team for up to three days to assess and treat the situation with which they presented.
 - c. Briefly assess their status (voluntary, agreeable) and confirm that they are currently safe.
2. During the initial call, inform them that they will receive a link by email to a videoconference visit for that same day.
 - a. Confirm their email address. The email will have the subject line: **“Appointment.”**
 - b. They should prepare for the appointment at least 5-10 minutes in advance.
 - c. Explain that we are using a safe video-conferencing software, which is fully encrypted. We will not be sharing any personally identifying information (eg. PHIN) over the platform, and the meeting is not recorded.
 - d. When they click the link, they will be prompted to download a plug-in which takes about 30-60 seconds. Following that, they will join the appointment with the doctor. The email will include additional information about the visit. They may

contact us if they have any questions before your visit.

- e. Ensure that they have a phone available as back-up in the case of any technical difficulties.
3. Before terminating the call, confirm that they have the number for mobile crisis (204-940-1781) and that they can - and should - call at any time, 24 hours/day, if they are suicidal or if they have any concerns.
4. **Email content:** Cut and paste the following into the email to the individual, sent from one of the CRC gmail accounts:

“Your upcoming appointment is scheduled for _____ with Dr. _____ by videoconference.

Clicking this link will take you to your appointment. [insert zoom link from the google calendar for matching appointment]

Please plan to get set up at least 5-10 minutes prior to the appointment start to ensure your technical requirements are set up. Keep a phone available as back-up in the case of technical issues with the videoconference platform.

Please note the following considerations and guidelines:

- We are using Zoom videoconferencing software. This platform is fully encrypted. Details are available at: zoom.us
- To protect your privacy, we will not exchange any of your personally identifying health information (eg. PHIN, date of birth) over the videoconference platform. Neither your name nor personal email is shared with Zoom.
- The video appointment will not be recorded in any way.
- Please arrange a private space where you can have your appointment. If you have small children, try to arrange a plan for childcare or have them in a separate room if safe to do so.

Technical Requirements:

- Download a plug-in or app, accessible through an appointment invitation or the app store
- An internet connection – broadband wired or wireless (3G or 4G/LTE)
- Speakers, microphone, webcam
- Operating systems:
 - macOS X with macOS 10.7 or later
 - Windows 10, 8 or 8.1, 7, Vista, XP

- Supported Browsers:
 - Windows: IE 11+, Edge 12+, Firefox 27+, Chrome 30+
 - Mac: Safari 7+, Firefox 27+, Chrome 30+
 - Linux: Firefox 27+, Chrome 30+
- Bandwidth:
 - 600kbps (up/down) for high quality video
 - 1.2 Mbps (up/down) for 720p HD video
 - Receiving 1080p HD video requires 1.8 Mbps (up/down)
 - Sending 1080p HD video requires 1.8 Mbps (up/down)

You may contact us at 204-940-1781 if you have any questions before your visit.”

5. Conduct the videoconference. Confirm individual’s identity – full name plus additional details as required.
 - a. Document in a Progress Note.
 - b. Medication changes can be called in to the pharmacy used by CRC, and delivered to the individual.
6. Arrange with the individual the approximate time for the assessment the following day.
 - a. Document the time, and pass on to the next day team.
 - b. Inform the individual that they will receive another email with a zoom link the following day, and that the team may call to confirm the time as occasionally it may change.

Assessments on Subsequent Days

- Call the individual if the time of assessment must be changed. Email the individual with a new zoom meeting link, as per the process outlined above.
- ROU daily assessments will be documented as a ‘progress note’ in the open visit plan.
- On each assessment, evaluate whether the person can be discharged from ROU.
- An SRA should be done and documented each day in the ROU

Discharge and Follow-up

- If by day three it is clear the person requires a longer admission, call the bed manager (HSC psychiatrist on call on weekends) and arrange an admission.
- If the person is improving and could likely be discharged within an additional 1-2 days, they can remain in ROU.
- A friend/family member should be informed of the discharge and in agreement with the plan. This should be documented.
- An SRA should be completed in the final discharge note. Consideration should be given to a SAFE plan.
- Follow-up should address the presenting issue, and could include any of the following:
 - Follow-up by GP (ensure documentation is faxed). If no GP, document that the individual has been provided with the information for obtaining a GP
 - Referral to UFITT for classes
 - Referral to RAC for short term psychiatric follow-up
 - Elective self-referral to RAAM