



3 February 2023

**Dr Anne Tonkin**  
Chair  
Medical Board of Australia

[medboardconsultation@ahpra.gov.au](mailto:medboardconsultation@ahpra.gov.au)

Dear Dr Tonkin,

The Royal Australian College of General Practitioners (RACGP) thanks the Medical Board of Australia (the Board) for the invitation to provide additional feedback on the draft revised *Guidelines: Telehealth consultations with patients* (the guidelines). The RACGP welcomes efforts to support general practitioners and other medical professionals to deliver high quality and safe telehealth consultations to their patients. The RACGP produces a number of resources in this area, such as our [Guide to providing telephone and video consultations in general practice](#).

The RACGP provides the following comment in response to the consultation questions.

**1. Is the content and structure of the draft revised Guidelines: Telehealth consultations with patients helpful, clear, relevant and workable?**

The RACGP believes that overall, the revised guideline is helpful, clear, relevant and workable.

**2. Is there anything missing that needs to be added to the draft revised guidelines?**

*13. Follow-up and record keeping.*

The RACGP welcomes the inclusion of this point. We recommend that 'investigations requested' is included as information to be shared with the patient's usual GP or practice.

**3. Do you have any other comments on the draft revised guidelines?**

*2. b. not a personal account.*

We believe this point may be restrictive as practitioners often use personal accounts to conduct telehealth consultations and doing so does not necessarily mean the consultation is less reliable or secure. The main concern, which is perhaps out of scope for these guidelines, is for practitioners to consider their own privacy (e.g. blocking their phone number if using their personal mobile phones) when using personal accounts. The RACGP has produced the [Guide to providing telephone and video consultations in general practice](#) which provides advice on privacy and other considerations when delivering telehealth consultations.

*14. a. Ensure steps have been taken to confirm your patient has access to the necessary technology and connectivity and can use the equipment to participate in the consultation.*

As currently written, this point could prove burdensome and impractical to most practitioners and/or their practice. We suggest the alternate wording: "...is aware of the necessary technology, connectivity and equipment required to participate in the consultation."



*14. Keep a record of... d. consent from all participants If the consultation is recorded and/or when information is uploaded to digital health infrastructure.*

It is unclear what 'digital health infrastructure' refers to here. If it refers to the electronic medical record keeping system in use during a consultation, we do not believe express consent is required as it is reasonable to assume there is implied consent to take medical notes and upload/store them in a digital record keeping system.

If the point refers to a system such as My Health Record, express consent is also not required to upload patient information into their My Health Record as it operates on a model of standing consent.

*Page 11 - 'If you have never consulted with a patient':*

The RACGP would like to see the sentence "*Prescribing or providing healthcare for a patient with whom you have never consulted, whether face to-face, via video or telephone is not good practice and is not supported by the Board*" removed or the wording revised. If this guidance were followed, practitioners would cease to consult with new patients entirely, which we don't believe to be the intent of the Board with this statement. Such advice would also undermine the service models of virtual ED and afterhours locum services.

We suggest the line could be re-worded to "*Asynchronous requests for prescriptions or medical advice where the practitioner, or other practitioner from the same practice, has not previously consulted with the patient in real-time, is not good practice and is not supported by the Board.*" The addition of "or other practitioner from the same practice" is important to note, as it is common for patients to have a regular practice, as opposed to a regular GP.

The RACGP agrees with the subsequent statements, that requests for medication via text, email or online where a face-to-face or real-time telehealth consultation with that patient have not occurred prior, are not good practice.

Should you have any questions or comments regarding the RACGP's submission, please contact Ms Joanne Hereward, Program Manager Practice Technology and Management at [joanne.hereward@racgp.org.au](mailto:joanne.hereward@racgp.org.au).

Yours sincerely

Dr Nicole Higgins  
RACGP President