

eAudiology: Privacy and Practicality.

William (Bill) Campbell, MCISc
eEHDI Advocate & Activist, Audiologist, a Past
President of CAA

Erica Zaia, MSc
Audiologist Owner Audio-Vestibular Clinic,
Vancouver, CAA Board Member

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Canadian Academy of Audiology is a professional association dedicated to enhancing the role of audiologists as primary hearing health care providers through advocacy, education and research.

Salima Jiwani - Host



Dr. Salima Jiwani is a Past President of CAA, and is the Director of Audiology at AudioSense Hearing & Balance in Toronto, a centre of excellence in Hearing and Balance Healthcare.

Salima earned her Ph.D. in Auditory Neurophysiology and Neuroscience with the Institute of Medical Science at the University of Toronto, at SickKids Hospital's Cochlear Implant Lab.

Speaker: William (Bill) Campbell

MCISc, eEHDI Advocate & Activist, Audiologist,
a Past President of CAA

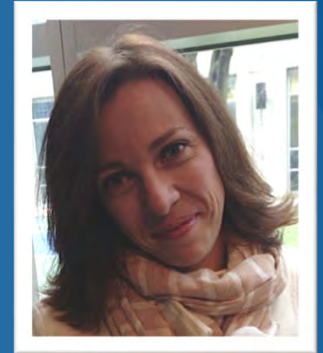


Voted “Most Likely to Invent Something” by his graduating audiology class at Western University in 2000, Bill Campbell has been involved in eAudiology since 2008. A regional program coordinator and audiologist for the Ontario Infant Hearing Program in Thunder Bay Ontario, Canada since 2001,

Bill has worked to solve access to services barriers in remote northern Canadian communities. He has collaborated with the National Centre for Hearing Assessment and Management (NCHAM) in developing a resource guide supporting teleaudiology. Bill has also collaborated with the University of South Dakota in developing their infant teleaudiology and related training program.

Speaker: Erica Zaia, MSc

Owner - Audio-Vestibular Clinic, Vancouver,
CAA Board Member



Erica Zaia, MSc, is a registered audiologist with 25 years of experience in Vestibular Assessment and Management. She is the owner of the Audio-Vestibular Clinic in Vancouver, where she offers comprehensive Vestibular Assessments and Vestibular Rehabilitation.

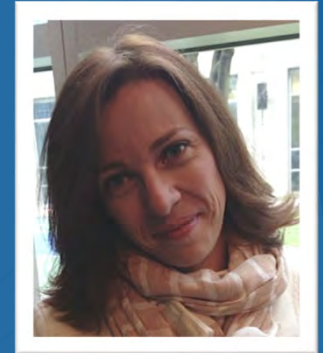
She's worked at St. Paul's Hospital, at the Royal National Throat, Nose and Ear Hospital in England and at several public and private clinics in Brazil. She is Clinical Faculty at the School of Audiology and Speech Sciences at UBC, President of the BC Balance and Dizziness Disorders Society, and Chair of the National Vestibular Special Interest Group at CAA.

eAudiology: Privacy and Practicality

Privacy, Solutions, and Examples

Bill Campbell, Audiologist

Erica Zaia, Audiologist



Acknowledgements

- Dr. Danielle Glista, Western University.
- Dr. Salima Jiwani, AudioSense Hearing & Balance.
- Dr. Jacob Shelley, Western University, Health Ethics, Law, and Policy Lab.

Getting to a Comfort Zone

- Why privacy and confidentiality?
- Privacy legislation is incomprehensible.
- Understanding risk, responsibilities, and liability.
- A change in the wind.
 - Who's responsible for what?
- Practical solutions. How to...
 - Videoconference solutions.
 - Real world counseling experience.

Why?

- What **data** might be transmitted during eAudiology?
- Personal Information (PIPEDA)
 - Patient identifying information Any information contained in a database that is being used during a session.
 - Patient data entered during the course of the session.
- Health Information (PHIPA)
 - Audiometric data
 - When eAudiology is used for screening or assessment.
 - Hearing Aid data
 - When hearing aid adjustments are performed.

Why?

- What **visual or audio** might be transmitted during eAudiology?
 - Patient identifying information
 - Patient's image.
 - Spoke site (patient) environment.
 - Case history information.
 - Patient intervention information.
 - Tinnitus counseling.
 - Auditory rehab.
 - Vestibular counseling.

The Privacy Pit



- HIPAA: US law, self-certification (1996)
- GDPR: General Data Protection Regulation (EU member states)
- PIPEDA: Canadian federal law governing (2001)
 - Governs how for-profit businesses handle personal information
- Privacy Act: Canada (1983)
 - Governs how federal government handles personal information
- PHIPA: Ontario, Personal Health Information Protection Act (2004)
- PHIA: Personal Health Information Act, MB
- Provincial Acts (Ontario, Quebec, Alberta, BC)
 - And health related privacy acts: ON, NB, NL, NS
- Safe Harbor (Patriot Act, NSA, Homeland Security...)
- NS and BC require specific patient consent to store data in the US.

Spirit vs Letter



- Existing privacy regulations, policies, and guidelines are generally hopelessly complex and outdated.
- It is not feasible or reasonable for clinicians to have a full legal understanding of relevant privacy regulations or of supplier policy.
- “The critical question is whether [the clinician and/or] institution has taken reasonable steps to protect the privacy and security of records in it’s custody and control” (OIPC).
- Clinicians must act in good faith that the tools we are using and the guidance we’ve been given is appropriate for the job we are doing.

If We Don't Know, Who Does?

- Who can we count on to interpret and advise us on the applicable aspects of privacy legislation
 - Be as educated as you can. Apply that knowledge with common sense.
 - Your college or regulatory body is a key contact.
 - Your institution or agency.
 - Talk to a lawyer (consider the cost involved).

Mitigation

- All data collected should be for a specific purpose.
 - DON'T collect or retain any information that you don't need.
- Delete data that is no longer needed.
 - Don't keep records longer than necessary.
- Don't record or store data in an unsecure place!
 - Use a unique identifier where possible.
 - Ontario OIPC, PHIPA (2007)
 - Encryption
- Review data for accuracy.
 - Review data with the client.

Mitigation

- Select and maintain a provider based on:
 - Obviously; no social media oriented platforms
 - Choose a solution based on the security hierarchy
 - Advertised compliancy
 - Privacy policy/statement
 - Regulatory body approval or recommendation
 - Experience

Telemedicine Provider

Hearing Aid Manufacturer Software

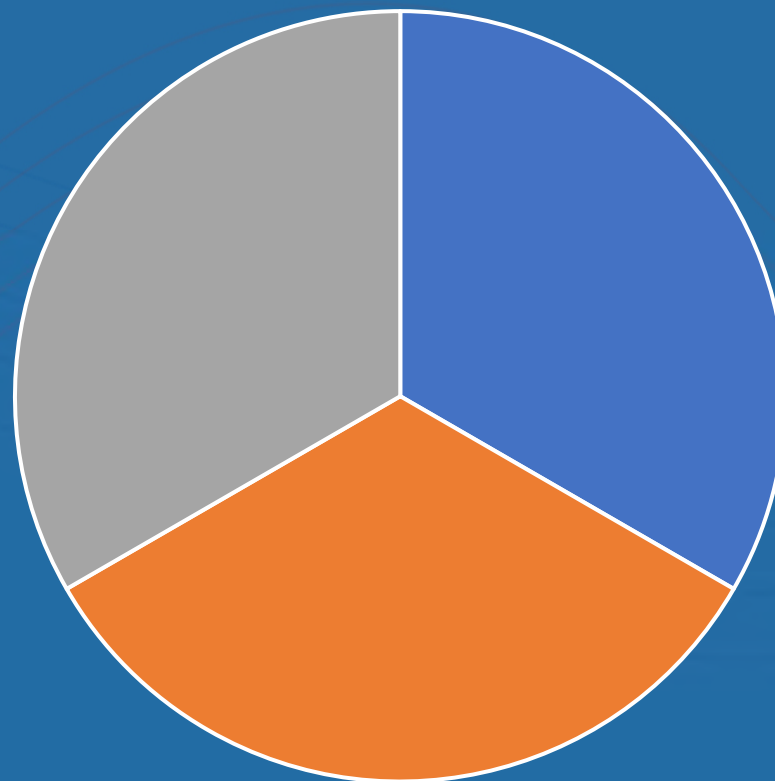
eHealth Platform

Business Platform

Social Media

Shared Responsibility and Liability

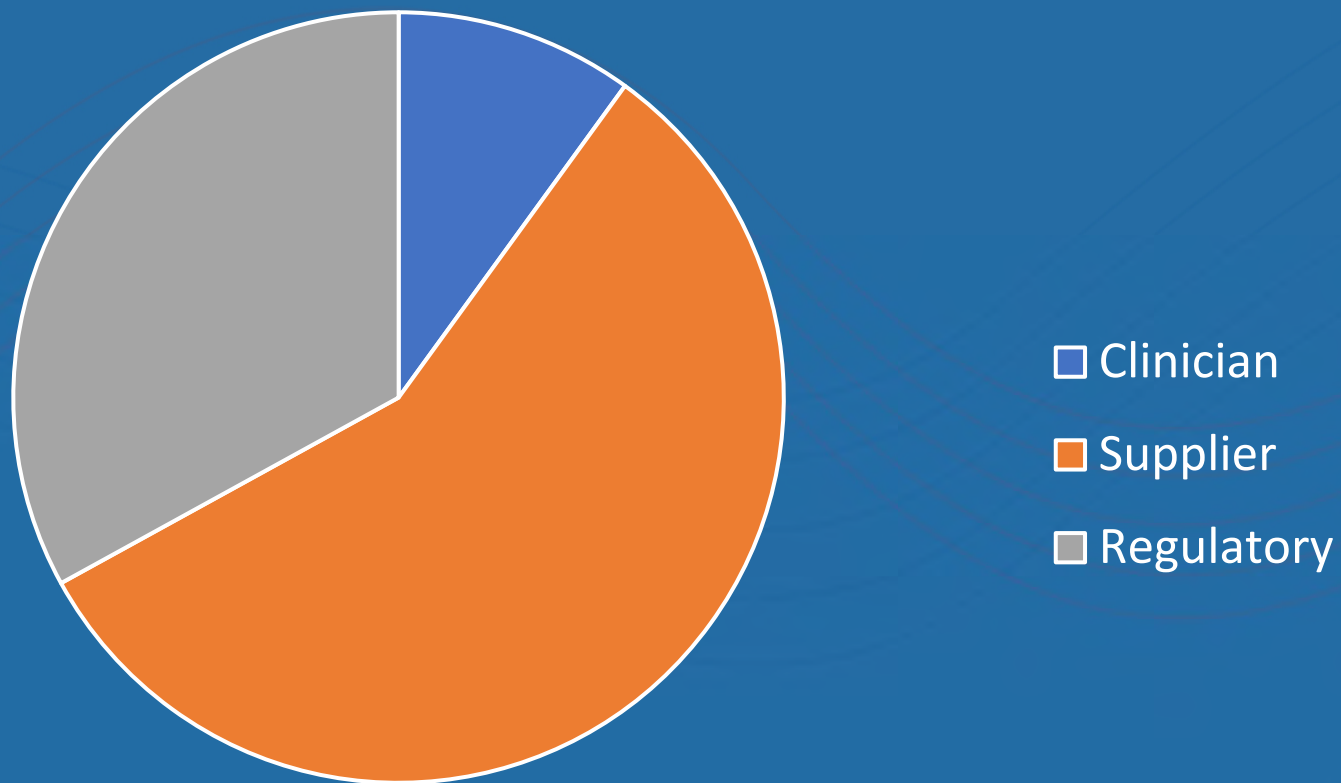
Responsibility and Liability



- Clinician
- Supplier
- Regulatory

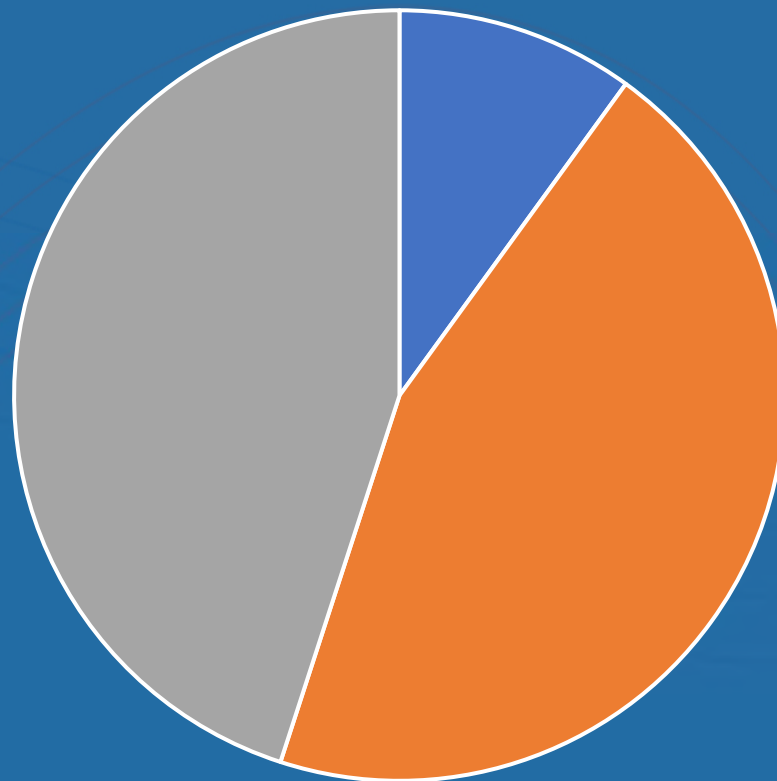
Shared Responsibility and Liability

Responsibility and Liability



Shared Responsibility and Liability

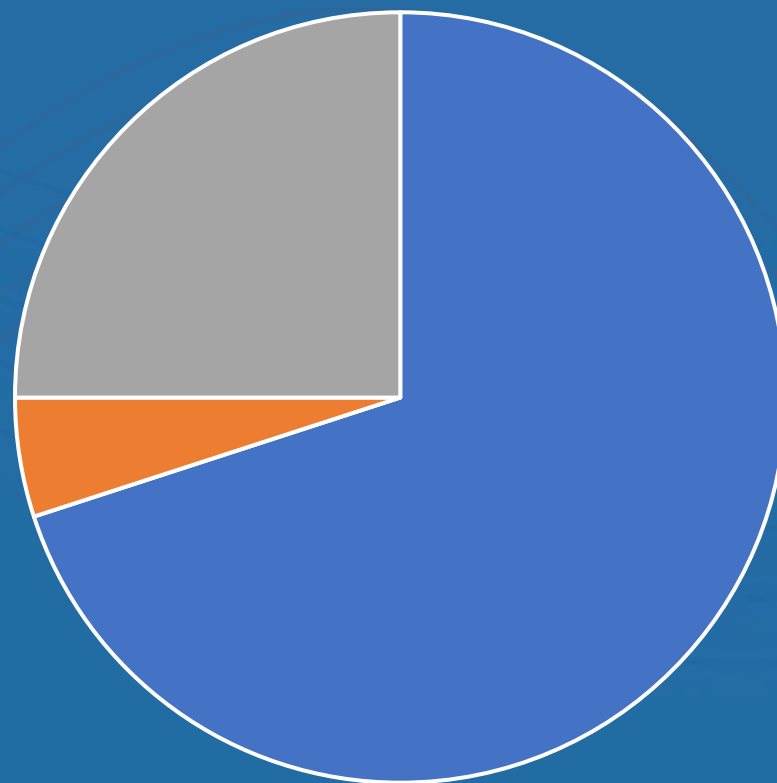
Responsibility and Liability



- Clinician
- Supplier
- Regulatory

Shared Responsibility and Liability

Responsibility and Liability



- Clinician
- Supplier
- Regulatory

Practical Solutions for Videoconference

- Eastern Canada Provincial Telemedicine Providers
 - NL: Telehealth NL.
 - NB: Horizon Health Network.
 - Services NB, northern NS and PEI.
 - Unsure of ability to access.
 - NS: Virtual Care.
 - Unsure of access.
 - QB: Clinique GO, Telehealth McGill.
 - Unsure of access.
 - ON: Ontario Telemedicine Network. <https://otn.ca/contact/>
 - Offers options for non-profit and for-profit health providers.
 - PCVC.

Practical Solutions for Videoconference

Western Canada Provincial Telemedicine Providers

- MB Telehealth. Contact local coordinator.

<https://mbtelehealth.ca/contact/>

- MyMBT. / Unsure of access.

SK: eHealth Saskatchewan. Contact local coordinator.

- <https://www.ehealthsask.ca/services/telehealth>

AB: Alberta Telehealth - elehealth.info@ahs.ca.

BC: Island Health - Fixed Locations / Unsure of access

YK: Yukon Telehealth. <http://www.hss.gov.yk.ca/telehealth.php>

NWT: NWT Telehealth. <https://www.nthssa.ca/en/services/telehealth>

Nunavut: GN.Telehealth@gov.nu.ca.

Also links to networks in AB, MB and ON.

Practical Solutions for Videoconference

Private eHealth provider Examples (From CASLPO, 2020)

- Telesense Canada: Very little information online. No cost info. Uses Swiss company (Adaya) for software and encryption support.
- Doxy.me: Website claims HIPAA, GDPR, PHIPA/PIPEDA compliance. BAA included. No privacy/security differences between free and paid.
- TheraPlatform: US based videoconference solution designed for SLP's and other similar health professionals. HIPAA compliant with BAA included. Pricing for single providers, with varying degrees of scheduling and billing features. Tech support and BAA. Secure chat and messaging. Online system monitoring.
- Cisco Webex: US based, business oriented with eHealth component. HIPAA compliant. BAA available. Global hosting. Transcripts available**

Practical Solutions for Videoconference

- Private eHealth provider Examples
 - Livecare. Canadian (BC). Started in BC for provincial telemedicine.
 - Videoconference and secure messaging.
 - <https://livecare.ca/platform>
 - Medeo. Canadian (BC).
 - Videoconference and secure messaging.
 - <https://medeohealth.com/>
 - Wellx: Canadian, meeting all privacy legislation. No idea from website what the product actually is, appears to be secure messaging only. No pricing on website.

BUT.....

- Technology and providers change quickly.
- What was current and applicable a few years ago has changed.
- Be prepared for change. Either internal or external.

Hearing Aid Manufacturer

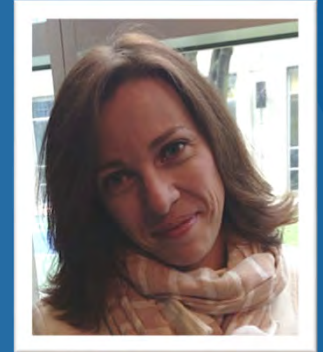
- All current manufacturers offer some sort of remote connection to later model devices.
- All major manufacturers offer secure videoconference and/or chat as well.
- Data transferred through these platforms is GDPR compliant.
- Bottom line: Use of hearing aid manufacturers software to connect to and interact with a patient can be considered as “acting in good faith”.
- Whenever possible, synch new hearing aids to remote options even if the patient may not use it.

Two Birds with One Stone

- There can be confusion in finding a videoconference solution.
- What about use of a manufacturers solution for all aspects of eAudiology?
 - The embedded videoconference solution could be used regardless of the client's hearing aid brand and age.
 - This component of manufacturer software will continue to expand in future.
 - Patient (spoke site) must have appropriate technology.
 - Spoke site must be secure, to the degree that the patient understands and consents to any risks to confidentiality.

Other options

- Online or app based hearing assessment
 - Mimi
 - uHear
 - HearX



eAudiology

Vestibular Rehabilitation

experience

Erica Zaia, MSc, Registered Audiologist
Audio-Vestibular Clinic – Vancouver, BC

The need

- * Telehealth – virtual – online – remote
- Not new – access to specialized professionals outside Lower Mainland
- Urgent and universal since physical distancing implemented

The individual

- Previously seen in person for vestibular assessment and rehab
...not necessarily!
- Comfortable with technology
- Confident the process can be effective remotely

How it is done?

- Previously used Facetime – NOT recommended
- Recent search lead to:
 - EMR software
 - App based (Skype, Hangouts, Zoom)
 - Web based – Doxy.me
 - Simple for the user – link opens in a web browser
 - Only requires individual's first name
 - No other info shared/stored
 - High quality video and audio

How is it done?

- Provider's perspective
 - What Bill said about etiquette – self and space
 - Having the ability to show the exercises if needed
 - Moving camera closer or further
- Individual's perspective
 - Audio/video
 - Ability to show you how they are performing the exercises

Still not for everyone... why?




- From the provider: reliance on objective testing
- From the individual:
 - Invitation to their space
 - Level of comfort and confidence with technology
 - Ability to maintain therapeutic relationship

Still not for everyone... why?




- Current tendency to "stay put"
– many people are not reaching out
- Visits to ER and Family Physicians down 40 to 50%


< Home 

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B.C. doctors fear 'collateral damage' as patients spooked by pandemic

 **Penny Daflos**
Multi-skilled Journalist, CTV News Vancouver
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Resources



- CASLPO Security and Privacy document.
<https://caslpo.com/members/resources/standards-and-resources/security-and-privacy>
- IAPP.org -
[https://iapp.org/media/pdf/resource_center/Comparative Table of Personal Information Protection Laws English.pdf](https://iapp.org/media/pdf/resource_center/Comparative_Table_of_Personal_Information_Protection_Laws_English.pdf)
- PHIPA <https://www.ontario.ca/laws/statute/04p03>
- Ontario IPC <https://www.ipc.on.ca/wp-content/uploads/2016/08/Thinking-About-Clouds-1.pdf>
- Privacy Commissioner of Canada
<https://www.priv.gc.ca/en/about-the-opc/what-we-do/provincial-and-territorial-collaboration/provincial-and-territorial-privacy-laws-and-oversight/>

Resources



- Oticon RemoteCare
 - <https://www.oticon.com/professionals/tools-and-support/remote-care>
- Phonak eSolutions
 - <https://www.phonakpro.com/ca/en/esolutions/solutions>
- Starkey Hearing Care Anywhere
 - <https://www.starkey.com/blog/articles/2018/09/Hearing-care-anywhere-blog>
- Sivantos Telecare 3.0
 - <https://www.signia-pro.ca/telecare/>
- Widex Remote Care
 - <https://www.widex.pro/en/products/remote-hearing-aid-fitting>
- ReSound Assist and Live Assistance
 - <https://www.resoundpro.com/en-CA/assist>
- Al-Abri et al, 2016, The accuracy of IOS device based uHear as a screening tool for hearing loss: A preliminary study from the Middle East. Oman Medical Journal,31(2); 142-145

Questions?

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- CanadianAudiology.ca
- Contact@CanadianAudiology.ca
- Webinar recording, and PDF will be posted to the CAA website within a few business days. For those attending this session live you will receive a thank you for attending email. That is your record of attendance and CEU.

Future CAA Webinar



Applying Person-Centered Care (PCC) in the Appointment Webinar

Wednesday, May 27 at 11 am ET

Speaker: Dr. Cherilee Rutherford, Ida Institute

FREE FOR ALL

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CAA webinars count towards CEUs.

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UPCOMING WEBINAR: UNDERSTANDING CASES OF TINNITUS WITH A NORMAL AUDIOGRAM: IS HEARING LOSS UNDETECTED WITH BRANDON PAUL – JUNE 9TH, 2020



ARCHIVED WEBINAR: THE IMPORTANCE OF VESTIBULAR ASSESSMENT IN SPORT-RELATED CONCUSSIONS WITH JAMIE M. BOGLE, FEB 25, 2020



ARCHIVED WEBINAR: WHAT THE AUDITORY CORTEX DOES BEFORE AND AFTER HEARING LOSS WITH STEPHEN G. LOMBER (MAY 29TH, 2019)



ARCHIVED WEBINAR: SPEECH UNDERSTANDING IN COMPLEX ENVIRONMENTS BY CHILDREN WHO ARE HARD OF HEARING – SEPT 25, 2019



- COVID19 Resources
- Visit CanadianAudiology.ca
- Under Professional Resources
- COVID19
- <https://canadianaudiology.ca/professional-resources/covid19-links/>

COVID19 HELPFUL LINKS

The Canadian Academy of Audiology would like to thank its members, associates and communities for all they are doing to manage the COVID19 efforts directed by the Federal, Provincial and Municipal governments together with their regulatory colleges.

We understand that this is a challenging time for you. Many have had major impacts on their ability to go to work and many have had to manage challenging communication with their patients. We know many of you also have stresses related to your personal and family life.

CAA will be monitoring ways we can support your needs within the scope of a professional association.

Facilitating your information needs:

We have provided a list of links to your regulatory college websites where you will find COVID19 messages and links. We have provided links to recommendations by other constituencies and some government health and business links.

We have also included links to the Employment Insurance website. We urge you to continue to monitor federal, provincial and municipal government websites to ensure that you are informed about the health and employment related mandates and policies.

Thank you