What is telehealth and how does it apply to patients with disabilities?

The National Consortium of Telehealth Resource Centers defines telehealth as “a collection of means or methods for enhancing health care, public health, and health education delivery and support using telecommunication technologies.”¹ Telehealth has been shown to improve access to healthcare services for many vulnerable populations. However, significant challenges exist for patients with disabilities when it comes to accessing both in-person and remote healthcare. In particular, barriers to communication access prevent patients with disabilities from utilizing telehealth to the fullest extent.²

Definition of Disability³

According to the Americans with Disabilities Act (ADA), an individual with a disability is defined as:

1) a person who has a physical or mental impairment that substantially limits one or more major activities; or
2) a person who has a history or record of such an impairment; or
3) a person who is perceived by others as having such an impairment

Legal Obligations⁴

Under Section 504 of the 1973 Rehabilitation Act, no qualified individual with a disability shall, by reason of his or her disability, be excluded from the participation in, denied the benefits of, or subjected to discrimination under any services, programs, or activities of the covered entity (e.g., healthcare providers). In the context of healthcare, nondiscrimination on the basis of disability means equal access to available health care services, whether those services are provided in-person or via telehealth.

Additionally, there may be other requirements under state laws that go beyond what is in the ADA or the Rehabilitation Act. Whatever accommodations are required when providing services in-person to meet these obligations will likely also need to be addressed when utilizing telehealth. One area where the policies may not be clear or where the use of technology had not been considered is requirements on having certain accommodations for physical access such as wheelchair accessibility. Whether these physical access requirements are still required if a practice is solely providing services via telehealth may not have a clear answer in law or regulations at this time.

1) Center for Connected Health Policy. What is Telehealth? https://www.cchpca.org/about/about-telehealth
Prevalence of Disabilities

The Centers for Disease Control and Prevention (CDC) reports 61 million adults in the United States are living with a disability, with 1 in 4 adults having some type of disability. According to the National Center for Health Statistics, approximately 15% of American adults (37.5 million) aged 18 and over report some trouble hearing. Additionally, data from the 2018 National Health Interview Survey reveal that roughly 13% of adult Americans reported having trouble seeing (even when wearing glasses or contact lenses) or that they are blind or unable to see completely.

The CDC also reports that adults living with disabilities are more likely to have obesity, diabetes, and heart disease. Many of these conditions require chronic management that can be overseen via telehealth.

General Recommendations for Providers

1) Take an inventory of the products, services, and factors that are required to provide effective telehealth services to patients and ensure that these meet basic accessibility requirements for people with disabilities.

2) Consider compatibility of assistive technology (e.g. alternative keyboards) used by the patient and whether those products can work effectively with your chosen telehealth modality.

3) Learn about and incorporate into practice accessibility features (e.g. Communication Access Real-time Translation (CART) Captioning incorporated into video conferencing platforms that you are using or provided via separate weblink) of software programs you plan on using.

4) Consider the important role that a patient’s caregiver, family member, or home health aide may play during the telehealth visit.

5) Increase your knowledge and awareness related to cultural competency and linguistic sensitivity.

6) Unsure of the patient's needs? Contact or survey patients with disabilities about their accessibility requirements.

7) Develop understanding that if a person is deaf/hard of hearing or a person who is blind/person with vision impairment does not have appropriate accommodations that provide effective communication, they cannot truly participate in an equal conversation about their care, cannot fully carry out orders as prescribed and cannot truly give valid consent.


8) Allow accommodations request to be made through patient portal. When a specific accommodation is requested, confirm to the patient when the accommodation has been secured.

9) One size does not fit all when accommodating a disability. Work with the patient to see what works best for them.

10) Provide an alternative way for the patient to communicate with the provider if communication accommodations are not working such as by text or email.

11) Patients need to be able to provide feedback from the appointment on accessibility. Provide a follow up survey that asks about accessibility.

Effective Communication

In order to provide equal access to healthcare during telehealth appointments, covered entities (e.g. healthcare providers) must ensure that communication with people with disabilities is as effective as communication with others. Covered entities must provide auxiliary aids and services to ensure effective communication with people who have hearing and vision disabilities. It is never the patient’s responsibility to provide their own accommodations or to pay for accommodations.

Examples of auxiliary aids and services for people who are deaf or have hearing loss:

- Qualified sign language interpreter
- Deaf Interpreter Team
- Qualified cued-speech interpreter
- Qualified tactile interpreter
- Communication Access Real-time Translation (CART) captioning
- Video remote interpreting (VRI)
- Written materials including appointment notes and post appointment instructions

Examples of auxiliary aids and services for people who are blind or have vision loss:

- A qualified reader
- Information in large print, Braille, or electronically for use with a computer screen-reading program
- An audio recording of printed information

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Tips When Treating Patients who are Deaf or Have Hearing Loss

1) Provide remote interpretation services or communication access real-time translation (CART) services, if requested.¹⁰
2) If the patient is hard of hearing, ensure the patient has access to headphones or a headset.
3) Consider sending an amplification device to patients for use during their telehealth appointment.
4) Use video to allow lip reading and provide visual clues like gestures.
5) Send PDFs of all written materials prior to the appointment and written aftercare instructions post appointment.
6) Understand that ASL and English are not the same; English is not a first language for many Deaf patients.
7) Use a quality microphone or headset such as a boom mic.
8) Avoid wearing facemasks, however, if necessary, use a clear mask.

Tips When Treating Patients who are Blind or Have Vision Loss

1) Be aware of your background. There needs to be contrast between you and your background. Blurring the background may make it challenging for the patient.
2) Ensure lighting is bright enough in order for the patient to clearly see your face.
3) Include simplified and enlarged text.
4) Ensure patient has a computer-screen reading program for transmission of electronic information.
5) If possible, provide an audio recording of printed information provided during the appointment.¹¹

Tips When Treating Patients with Physical/Developmental Disabilities¹²

1) You may need to work directly with the patient in their home if the goal is to provide ongoing care via telemedicine.
2) Consider consulting with certified assistive technology professionals or rehabilitation engineers to develop tools for the patient to interact with required technologies.