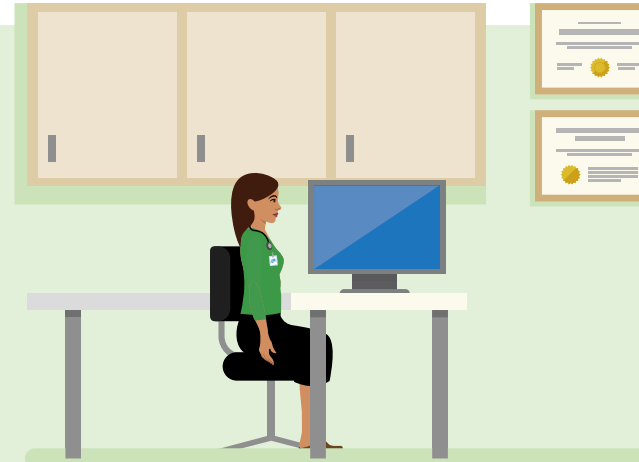


# Telehealth Etiquette for Family Planning Visits

The purpose of this job aid is to help Title X family planning agencies provide a positive client experience when conducting telehealth visits. Telehealth etiquette, or “webside manner,” is new for many family planning providers and requires attention to detail that differs from an in-person encounter.<sup>1</sup> While telehealth is also sometimes done by telephone, the tips below apply to virtual (video) telehealth visits. Family planning visits conducted via telehealth should be conducted in a private, [HIPAA-compliant environment](#) with adequate privacy.

## Prepare your setting

- Make sure the provider is in a physical space that protects the client’s privacy.
- Turn off other applications and potential notifications on your devices; reduce any background noise and silence cell phones.
- Communicate to others that you will be conducting a client visit (e.g., put a “do not disturb” sign on your door).
- Wear clothing that is professional, the same type you would wear during an in-person family planning encounter. Consider wearing a lab coat and/or name badge during appointments. Try to avoid wearing detailed patterns, which can cause distortion on video.



## Test your equipment



- Before the visit, test your audio for volume and clarity and your video for lighting and appearance using your telehealth platform.
- Check the angle of the camera and try to put the webcam at eye level or slightly higher. Your head and shoulders should be centered on the screen.
- Try to position the webcam and monitor (client on screen) as close to each other as possible, so you are looking at the client and maintaining eye contact rather than looking in another direction.
- Use a natural (i.e., not virtual) background to ensure the client knows the setting is confidential, given the sensitivity of topics discussed in a family planning visit.
- Check the lighting in the room to ensure adequate lighting and that you are not back-lit.

## Start the visit

- Confirm that you and your client can see and hear each other.
- Confirm consent has been obtained for medical and telehealth services. A sample consent form for family planning services is available [here](#).
- Explain how the equipment being used in a telehealth visit ensures privacy and security.
- Check in with the client to ensure they are in a space that protects their privacy. If the client has concerns (e.g., has been experiencing intimate partner violence or has children in the background during the visit), suggest alternatives to reinforce the client’s privacy (e.g., agree on a “safe” word for the client to end the visit with or suggest the client take the visit in a safer setting such as a car, if available).<sup>2</sup>
- Ask the client if telehealth is a new experience. Normalize any discomfort with the virtual platform and answer any questions.



# Start the visit (cont.)

- As needed, communicate clearly how to navigate the telehealth platform (e.g., “Click on the box with the three dots to…”).
- Confirm the pronunciation of the client’s name and introduce yourself by name and role, (e.g., “Hi Fatima, I’m Sandra Jannah. I’m the nurse practitioner. Can you say your name for me? I want to make sure I get it right.”)
- Start with small talk to build rapport and learn about the client’s goals.
- Explain which family planning services—counseling on birth control methods and providing prescriptions, STD testing and treatment, and other services as available—can be provided and how this is done, so expectations for the visit are clear.



## During the visit



- Maintain eye contact with the client as much as possible. Use non-verbal cues to express empathy and show you are listening by nodding your head and maintaining eye contact. Use verbal cues (e.g., “I see.” or “I hear you.”) too.
- Communicate your actions to all clients (e.g., “I am looking down to take notes in your chart” or “I am looking to the right on my second screen to document notes in your chart”). Otherwise, looking away or looking down may be interpreted as not paying attention.
- Be mindful of non-verbal communication cues and distractions (e.g., eye rolling, yawning, clicking of a pen, rustling papers). Because the visit is occurring in a small screen, their impact will be magnified.
- Use empathetic language and reflective listening (e.g., “I can only imagine how frustrating or scary this may be for you” or “It sounds like you’re saying… Do I have that right?”).
- Slow down the pace and pause as necessary for any connectivity issues/delays.
- Speak clearly, deliberately, and confirm client understanding (e.g., “We have discussed many different things today. I would like to be sure I was clear. Can you tell me when you’ll change your patches?”).

## Concluding the visit

- The visit should have a clear beginning, middle, and end.
- Make sure you’ve answered their questions (e.g., “What other questions do you have?”)
- Outline any next steps (e.g., if a client needs to come into the clinic to pick up method, how to access prescriptions, etc.)
- Express gratitude and support their decision to seek health-promoting services (e.g., “I’m so glad you scheduled a telehealth visit. You’re clearly very interested in protecting yourself, and I look forward to seeing you again.”)

### Additional Resources:

- Mid-Atlantic Telehealth Resource Center: [Telehealth Resources for COVID-19 Toolkit, Best Practices for Conducting a Telehealth Visit](#)
- South Central Telehealth Resource Center: [Telehealth Etiquette Video Series](#)
- Cleveland Clinic: [Digital Health Playbook](#)

### Sources:

1. Mid-Atlantic Telehealth Resource Center: [Telehealth Resources for COVID-10 Toolkit, Best Practices for Conducting a Telehealth Visit](#)
2. Pacific Southwest Mental Health Technology Transfer Center: [Telehealth Clinical and Technical Considerations for Mental Health Providers](#)

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