

POLICY: It is the policy of NARBHA to establish priorities for the use of the Telemedicine network.

PROCEDURES:

- A. NARBHA's telemedicine network use is prioritized to accommodate the clinical, administrative, and training needs of NARBHA and its provider network.
 - 1. Clinical applications, including psychiatry, medication management, psychiatric evaluation, counseling, clinical staffings, member/client consultations, Title 36 hearings, and other direct clinical activities have priority over other telemedicine uses.
 - a. Other previously scheduled activities that conflict with clinical applications are cancelled if necessary to accommodate a clinical activity.
 - b. NARBHA Telemedicine staff are responsible for notifying the meeting requestor/chair and telemedicine site coordinators of such cancellations.
 - c. The meeting requestor is responsible for notifying conference participants of such cancellations.
 - 2. If scheduling conflicts occur involving non-clinical videoconferencing applications, including training and administrative meetings, NARBHA Telemedicine staff notifies the parties involved so that the parties can work out the conflict.
 - a. If the meeting requesters are not able to work out which activity has priority for use of the system, the Department Directors of these staff are notified and attempt to work out the conflict. Conflicts that remain unresolved at this level are forwarded to the CEO.

MONITORING:

NARBHA Telemedicine staff maintain a log of events that are cancelled or re-scheduled to accommodate a clinical priority. The report is reviewed by the Telemedicine Program Manager and Telemedicine Director on an annual basis.

