Report Title	WHERE PEOPLE ARE AT WITH TELE-HEALTH
Organisation	This report is part of a project commissioned from Healthwatch Bolton by Bolton GP Federation. The work took place at various sites in Farnworth.
Dates: Research Team	December 2016 Field researchers; Gail Gregory and Karen Wilson (Healthwatch Bolton). Report; Alice Tligui (Healthwatch Bolton)
Contact details:	Healthwatch Bolton, 20-22 Bowkers Row, Bolton BL1 2JL

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Disclaimer

This report relates verbatim comments gathered during the time of our visit. All comments recorded are added to Healthwatch Bolton's databank of patient comment.

Background

This report is part of a wider project to explore what patients think of 'neighbourhood hubs' and to gather views and ideas about what aspects of such a service would improve their experience of accessing health and wellbeing services.

Strategic drivers

One of the new delivery models expected by GMHSCP and reflected in the Bolton Locality Plan is the development of a "Local Care Organisation" (LCO). Primary Care activity is expected to be delivered within the framework of the LCO, as are certain aspects of community based health care. In this context the Bolton GP Federation approached Healthwatch Bolton to develop and deliver a small scale piece of public engagement that would open up this discussion with the public.

Topics/Themes

Tele-health: Communication: IT: Primary care: Access: Appointments: Consultations

Who we spoke to

We spoke to **59** people at **five** venues in Farnworth over four days In December 2016.

The Venues were: Farnworth Health Centre (16 people), Kearsley Medical Centre (20 people), Farnworth food bank (6 people), Age UK (13 people) Farnworth UCAN Centre (4 people).

This fieldwork produced **615** comments. **41** comments are used in this analysis.

Method

Field researchers used a semi-structured questionnaire and conducted informal interviews with individuals on a one to one basis. All comments were recorded verbatim against the relevant question prompts.

Questions around tele-health were asked in the context of waiting times and appointments arrangements and people were asked if they thought technology could be part of the solution. Prompts were given to help people place text, phone, skype, email etc. in the category of 'tele-health'.

Comments were analysed as follows;
- Where the participants are positive or negative, with regards to any tele-health technologies – this gives us an 'overall disposition towards tele-health' reading.
- Which specific technologies did people mention (both positive, negative and mixed views recorded) – this gives us a snapshot of views re the different basic technologies in use in tele-health.

The Comments

Overall disposition towards tele-health was quite strong with 61% of people feeling tele-health options either were, or could be helpful.

Phone and Skype were the most valued – principally for the direct (and embodied) communication they provide between patient and professional.
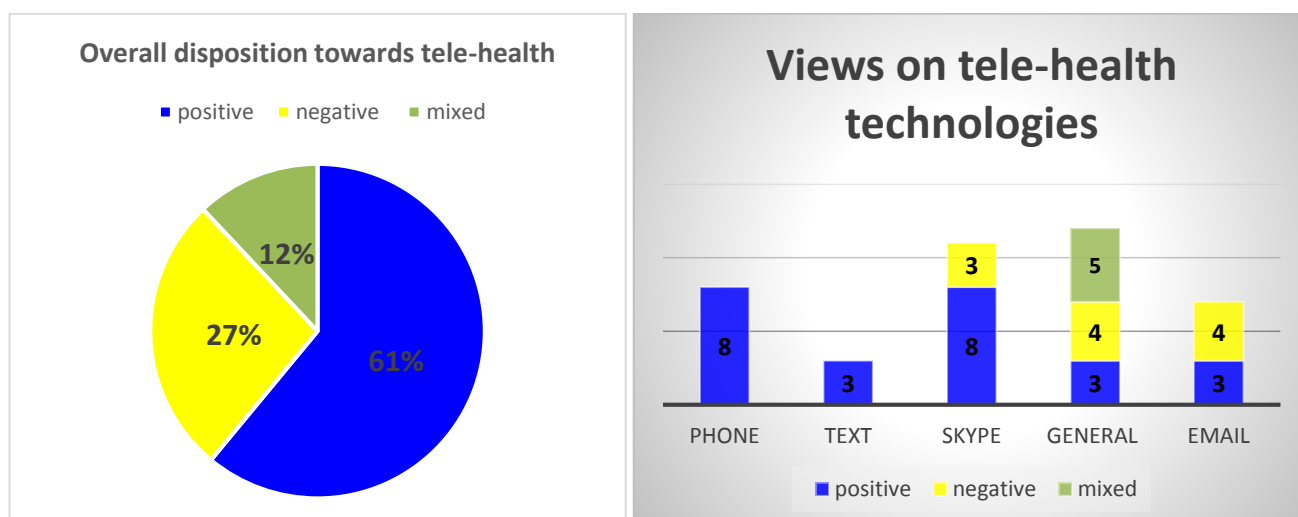
Phone (positive) – 8

- *'Telephone conversations over the phone work for me as I work. I don't think patients are aware of alternatives that are on offer other than to see a GP.'*
- *'A simple ring and speak to the GP service would be good for me.'*
- *'GPs will phone rather than you having to go back for test results – I'm happy with that approach.'*
- *'I would be happy to use tele health but with the professional/clinician not the receptionist.'*
- *'I do everything on-line and have access to a summary of my records. I'm happy to use telephone appointments or SKYPE or tele health if I know I don't need an examination.'*
- *'I would be happy to use tele health.'*
- *'We make our appointments by phone – we wouldn't use the internet.'*
- *'Assuming it would be a doctor somewhere, I'd rather stay with a person in the practice as they know my history.'*

Text (positive) – 3

- *'Text reminders would help but they need to be nearer the time and not a week before.'*
- *'Information by texting is really helpful.'*
- *'I do everything on-line and have access to a summary of my records. I'm happy to use telephone appointments or 'Skype' or tele health if I know I don't need an examination.'*

Skype (positive) - 8

- *'For me personally I can use 'Face-time' or 'Skype' and I can see it helping with XXXX practice. It would improve communication as you wouldn't need to go through the receptionists.'*
- *'Yes – Skype.'*
- *'I would be happy to use tele health but with the professional/clinician not the receptionist.'*
- *'Skype and FaceTime if a GP could be available.'*
- *'I would be prepared to use the internet to see a healthcare person.'*
- *'I do everything on-line and have access to a summary of my records. I'm happy to use telephone appointments or SKYPE or tele health if I know I don't need an examination.'*
- *'I would be happy to use tele health.'*
- *'Assuming it would be a doctor somewhere, I'd rather stay with a person in the practice as they know my history.'*

Skype negative - 3

- *'Skype would be the last resort.'*
- *'I wouldn't like Skype.'*
- *'I'm 64 and struggle with computers. I don't have one at home so couldn't use 'Face to Face' technology. I'm not keen on Skype.'*

General (positive) - 3

- *'It would help with prescriptions.'*
- *'Technology would help – it could help shorten waiting times.'*
- *'The screen that calls you through to the doctors is a good idea.'*

General (mixed) -5

- *'Tele-health is a good idea but not for me as I'm too old.'*
- *'Maybe but there's sometimes when things go wrong. It needs to be reliable for people to use it.'*
- *'Extend the hours.'*
- *'Older people don't know how to use modern technology – I could do it.'*

- *'I think technology is another avenue to make health a business – it suits the practice. The only thing it (technology) might benefit is a minor illness. I would worry that using this type of remote contact would miss something.'*

General (negative) - 4
- *'I believe there to be a lack of knowledge often in using computer equipment. When you are ill with a long term problem often you wouldn't be able to afford resources to provide technology. Lots of people mistrust technology. People want 'face to face' reassurance.'*
- *'Older people would have a problem with technology.'*
- *'I don't like the thought of new technology.'*
- *'I'm not very confident in using technology.'*

Internet/email positive - 3
- *'We already use the system to have our prescriptions delivered and sent electronically to the chemist. Unfortunately we've been locked out on line and had to come here again to have my identity checked.'*
- *'It would help with passing on of up to date information for when referrals happen.'*
- *'I do everything on-line and have access to a summary of my records. I'm happy to use telephone appointments or SKYPE or tele health if I know I don't need an examination.'*

Internet/email negative - 4
- *'We aren't well up on using the internet.'*
- *'I wouldn't use the internet for making my appointments.'*
- *'We wouldn't use the internet to deal with health.'*
- *'We make our appointments by phone – we wouldn't use the internet.'*

Recommendations

1) Through the Bolton Engagement Alliance, Healthwatch Bolton/Bolton CVS, intend to do some more extensive work on people's views on tele-health, extending this analysis to a wider audience and eliciting more specific information about perceived benefits, preferences for particular technologies and barriers.

2) The GP Federation to run a small scale, fully evaluated pilot with one surgery a) kitting out for skype consultations, b) training clinical staff to use skype c) offering skype appointments to patients as an alternative to face-to- face appointments. The pilot evaluation should seek the views of staff and patients as well as developing a clear indication of cost-benefit in terms of set-up and running costs, time savings for clinicians, other incidental benefits.