



Snapshot Report

Report Title

Patient Views on Telehealth

Organisation

Healthwatch Wigan and Leigh

Dates:

November 2016 - January 2017

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Acknowledgements

Healthwatch Wigan and Leigh would like to thank service users across the Wigan Borough for sharing their views and experiences.

Disclaimer

This report relates to findings observed on the specific dates set out above. Our report is not a representative portrayal of the views of all patients, only an account of what was observed and contributed at the time.

Background

This report is part of a wider project to explore what patients think of local 'GP Services' and to gather views of telehealth and how such services 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 Wigan 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, Healthwatch Wigan and Leigh embarked on public engagement work that would:

- a) Allow a broad spectrum of the population to have a view about an aspect of health and social care that is relevant to everyone.
- b) Provide an opportunity to model our engagement /social research process to both the people of Wigan and Leigh and people who work within the health and care economy in the Borough.

- c) Produce some meaningful evidence that will help to bridge the knowledge gap between people and the system

These deliberations led Healthwatch Wigan and Leigh to choose a large sample size (in qualitative research terms) and to define research questions that aimed to (1) understand how people felt about their experiences of GP appointments, 2) explore people's knowledge and understanding of NHS complaints system, 3) get a baseline position on peoples understanding of telehealth. The first two aims have now been achieved and documented in two published reports. This report aims to bring to light the third and final aim of this engagement work-patient views of telehealth.

Topics/Themes

***Telehealth: Communication: IT: Primary care: Access:
Appointments: Consultations***

Who we spoke to

We spoke to **167** people at **(16)** venues in Wigan and Leigh from November 2016 to January 2017.

The Venues were: Carers Rights Day (4 people), Deane Court Sheltered Housing (13), Healthwatch Forum (47), Individual questionnaires collected at 7 sites (44), Leigh Infirmary (11), Pensioners' Link (12), RAEI (18), Sunshine house (3), The Brick (8), and Wigan and Leigh homes (7).

This fieldwork produced **1, 241** comments. **60** comments are used in this analysis.

Method

Field researchers facilitated group conversations with people of Wigan and Leigh in community settings. 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 'telehealth'.

Comments were analysed as follows;

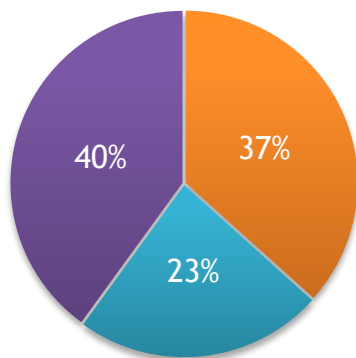
- Where the participants are positive or negative, with regards to any tele-health technologies – this gives us an 'overall disposition towards tele-health' reading.
- Which specific technologies did people mention (both positive, negative and mixed views recorded) – this gives us a snapshot of views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

The Comments

- Overall disposition towards telehealth services was quite strong with 77% of the comments suggested telehealth 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.

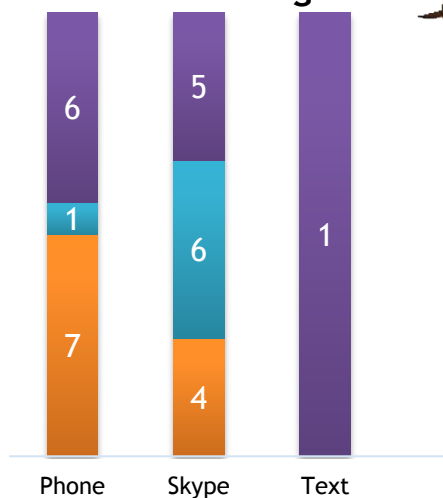
- Overall, 32% of the comments suggested people prefer face-to-face interactions.
- Face-to-face contacts was valued most by 'older' people.

Overall disposition towards telehealth



■ Positive ■ Negative ■ Mixed

Views on Telehealth Technologies



■ Positive ■ Negative ■ Mixed



Positive

- Telephone - experience from elsewhere says this is effective.
- It would be fine by phone though.
- I think telephone would be good. It would be difficult if I had to 'show' something though.
- Telephone best in some cases where appropriate.

Mixed

- Some like telephone consultations-gives patient choice.
- An appointment App or telephone would be ok but it depends what's wrong with you.

Negative

- Large numbers of deaf people are not accessing any consultations because they cannot use the telephone.

PHONE SKYPE

Positive

- It [Skype] would be good for some - extra options is good.
- Skype - excellent from the point of view of a deaf person because the technology is there for interpreters.
- For follow up consultations it (skype) would be ok
- (skype) Got to be the way forward to maximise consultations available in shorter timeframe.

Mixed

- Other ways [telephone] should be made available but not replace face to face.
- Depends on need - face to face for complex needs, possible skype.

Negative

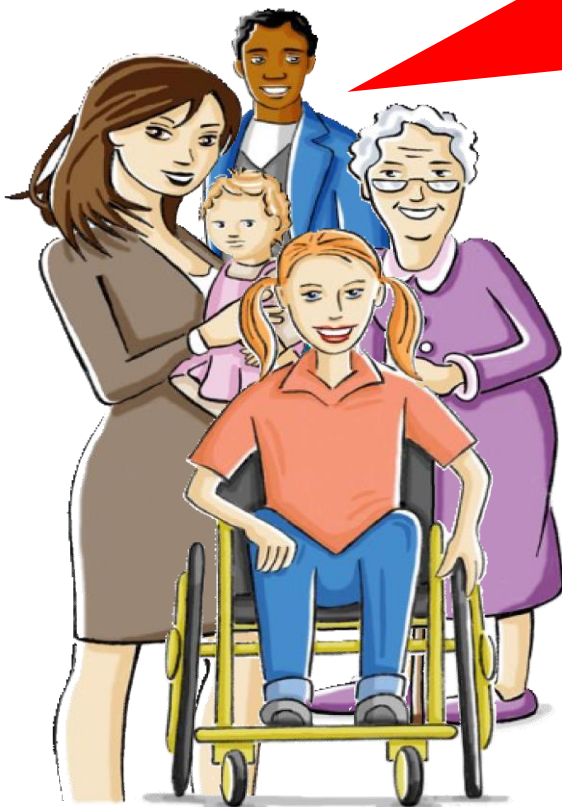
- No, it would be negative to have skype.
- I think Skype is a stupid idea.
- I wouldn't want to talk to a doctor on Skype.
- The deaf community are concerned they will be forced to use video technology when they do not want to.

Only one 'mixed' comment about 'text' was shared:

"Texts received are useful. I'm open to trying other ways but as long it is explained properly."

Perceived Barriers

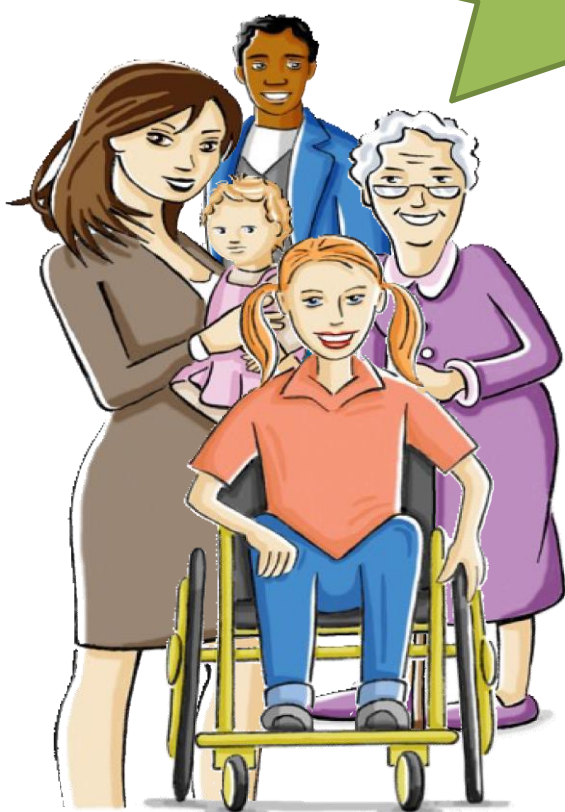
I might experience some barriers in accessing/using telehealth services



- *When we use computers we have to go to the library - although this isn't always practical (you can't show you bits in public!).*
- *Skype has technical hitches - it doesn't work all the time. Loses connection and can cut out, especially if on a phone.*
- *Needs excellent technology to work effectively.*
- *Technology is more frightening than seeing the doctor.*
- *Age related problem.*

Looking into the Future

We would explore telehealth services...



- *I skype my family abroad - that's ok. I don't know about the doctor though.*
- *I'm open to trying other ways but as long as I have the technology and as long as it's explained properly.*
- *I'm ok any way, as long as I get to speak to someone.*
- *Texts received - they are useful I'm open to trying other ways but as long as I have the technology and as long as it's explained properly.*

Conclusions, Recommendations, Future Engagement Work

Conclusions

- Some people showed strong preferences for routine visits to the doctor's surgery, clinic or hospital rather than exploring telehealth services.
- People identified lack of information and access as major barriers to exploring telehealth services.
- Many people expressed willingness to 'explore' telehealth but only if it explained to them 'properly'.

Recommendations

To commissioners

- A redoubling of effort by all parts of the system to promote and utilise local champions (citizens and professionals) to inspire others to test and adopt telehealth services.
- Many people showed reservations towards telehealth services consideration should be given to mainstreaming telehealth services in the community - exploring people's perceptions at the implementation and delivery phase.
- To embed telehealth services as key enablers within strategic plans and service design process.

To Providers

- There is a need to address people's perceptions of the 'remoteness' of telehealth services, and make them more engaging and interactive.
- Particular emphasis should be given to simplicity, usability and responsiveness of telehealth devices as a means to countering perceived 'difficulties' associated with remotely functionalising telehealth devices.

Future Engagement Work

Further engagement work should utilise the views and experiences of telehealth service users to bring to light some of the benefits associated with telehealth services (e.g. how telehealth services can help sustain an independent life at home), and use these as a means to dispel some of the 'fears' and reservations people express about telehealth services more generally.