



People's Perceptions of Virtual Health Care

November 2022

healthwatch
Bolton

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Introduction

Virtual health care means you can have a consultation with your health care professional either over the phone or by video. NHS organisations are committed to increasing the amount of virtual appointments they offer patients. Some of the benefits include: reduction in costs for travel and car parking, the implications of childcare arrangements and time off work to attend, and reducing carbon emissions due to less travel.

Though virtual appointments are not right for everyone, many people may find them more convenient and have greater satisfaction by accessing health services this way. We have worked with Bolton NHS Foundation Trust, (the organisation that runs the Royal Bolton Hospital and a number of services in the community), to find out what people think about virtual health care consultations so they can take people's experiences into account when implementing virtual consultation systems.

Summary of Findings

Demographics

- ✚ We received 247 responses to the survey. It is important to note that not all respondents answered all the questions. The number of responses to individual questions are quoted in the main body of this report.
- ✚ The majority of respondents were women. Respondents came from all postcode areas of Bolton with the highest response from the BL1 postcode.
- ✚ Respondents were mainly White British (83%), with 4% Asian British Indian, 3% Asian British Pakistani.
- ✚ There were 26% of respondents in the 25-49 age group, 33% in the 50-64 age group, 34% in the 64-79 age group and 4% over the age of 80.
- ✚ Respondents also had long-term conditions, with asthma, COPD or a respiratory condition being the most common. Cardiovascular, Hypertension and musculoskeletal conditions also scored highly.
- ✚ 26% of respondents described themselves as carers.

Survey Summaries

Q.2 Have you ever had a consultation appointment with a health-care professional that was not face to face?

N=245

82% of respondents had experience of a **telephone** consultation with a health professional

7% of respondents had experience of a **video** consultation

10% of respondents had had **both telephone and video** consultations

8% of respondents had **never** had either a **telephone or video** consultation.

Q.3 If you had a telephone consultation appointment, how did you find it in comparison to face to face?

N=229

For respondents who said they had had a **telephone** consultation, **49%** said they found it **somewhat helpful**, some parts worked well whilst others didn't

19% of respondents said it was **as helpful** and met their needs entirely.

32% of respondents said it was **not helpful** and didn't resolve the issue.

Q.4 If you had a video consultation appointment, how did you find it?

N=56

For respondents who had had a video consultation, respondents equally scored somewhat helpful and not helpful (**45%**). A small minority said they found a video consultation as helpful and met their needs entirely (**11%**).

Methodology

We co-produced a simple survey with Bolton Hospitals NHS Foundation Trust (see appendix). The survey ran from August to the end of October 2022. An equalities impact assessment was carried out before the survey went live to ensure the survey is as inclusive as it could be. The survey was shared with groups in paper format to enable people to participate in the survey who did not have access to digital means. We also encouraged people to take part by telephone if they wished to.

The survey was promoted on our social media channels, our newsletter, our website and via community engagement sessions. Bolton Hospitals NHS Trust staff also encouraged patients to complete the survey. Healthwatch Bolton engagement officers attended various events and meetings in the community to ensure a broad range of voices were included in the feedback. The survey was shared with the following:

Solidarity Group – Rumworth

Flowhesion Foundation – Halliwell area (Cervical project event)

Bolton GP Federation

Social Prescribers

All Souls Community Centre

BAND – World Mental Health day event

MHIST – Macmillan Coffee Morning

Transforming Lives – Great Lever

African and Caribbean Network

Precious Gems

The Well - Farnworth

Bolton Health Information Partnership

Bolton CVS

Bolton Community College

Deane and Derby Learning Centre

University of Bolton – Health and social care dept

Bolton Pulmonary support Group

Bolton Over 50's Group

Bolton at Home

Bolton Prostrate Cancer group

What People told us

Q.5 Please tell us your thoughts on your experiences of telephone or video consultations, what worked well? n=207 respondents to this question

This survey did not specifically ask who people had had a consultation with. From the majority of comments, it appears that these are with general practice. However, the comments are valuable in that they present some of the issues people face with using virtual appointments with any health professional.

General Comments about Access

Not very good for the **elderly** – not being able to use computers

Being **deaf**, it is a struggle

Find it very difficult with **ADHD** to keep up then reply, everything is rushed

Not everyone has a **smart phone**, not good for **older** patients

In comparison to Face to Face

There were over 50 comments that mentioned face to face appointments. Overall people said they would prefer this to a telephone or video appointment with a health professional. A small minority of people said they would prefer remote consultations as these fitted with their work and child-care commitments. People said face to face is necessary depending on the issue/condition. Some people had virtual appointments but still ended up having to have a face to face. A selection of comments follow:

“Doesn't compare to face to face, didn't resolve the issue”

“Impersonal, difficult to communicate symptoms when out of breath, professionals are unable to see physical symptoms of heart failure for example”

“Didn't resolve the issues – had to have face to face follow-up”

“Face to face is a must in certain situations”

“For new issues or problems, face to face appointments are better to avoid things being missed”

General Satisfaction Comments

+ positive

- “Worked Ok because it was for blood test results”*
- “Easy to talk and not have to sit in waiting rooms”*
- “No waiting in waiting rooms, especially with children”*
- “Did not have to leave work to attend my appointment”*
- “Excellent, prescription sent to pharmacy”*
- “No need for childcare”*
- “Having the flexibility of virtual appointments really works for me”*
- “Less stressful, more comfortable explaining things”*

- negative

- “Felt rushed, didn't answer my concern”*
- “Didn't get the help needed – diagnosed things wrong”*

Telephone

Whilst some people found a telephone call worked well for them, many encountered problems such as **timings of calls** – people not really knowing when they would be called and having to try and make themselves available. Some people found this difficult when they were at work. People with **deafness or hearing** problems struggled with calls. **Phone signals and background noise** could also be problematic.

+ positive

- “Worked well”*
- “Telephone works Ok in certain circumstances”*
- “Yes, worked but took time to ring”*
- “It was Ok”*
- “Works well when no examination is required”*
- “Discussed results of a scan, was brief but served the purpose”*

-negative

"Difficult to communicate symptoms when out of breath"

"Didn't phone on time and got cut off"

"Telephone calls are Ok for less serious problems"

"Telephone call no good to check a skin lesion"

"Could not hear all the conversation well"

"Being deaf I find it a struggle, signal never good"

"Saved time but the only problem is you do miss the calls as times are not specific"

"Don't always receive a call at all"

"Background noise"

"Too hurried, GP was flustered leaving me to hang up"

"Can't examine you by phone call"

"How do you have an asthma review by phone or get treatment for a deep skin infection?"

"Difficult to explain symptoms over the phone – had to go in the surgery the next day"

"Too impersonal"

"Call back numbers are sometimes withheld so not sure who is ringing"

Travel

Over 30 respondents mentioned the convenience of not having to travel and saving on costs to get to an appointment.

Video

Only a small minority of people had experienced a video consultation

+positive

"Video is better for someone who wears hearing aids"

"Video is better as you can see responses"

"My video and telephone calls were great, they were convenient- easy being at home"

“Video consultation was to discuss a care package and went very well”

“I think video may be better for me as I remember faces better”

“Video would have been nice to picture who I was talking to for the first appointment”

- negative

“Video call very poor quality – couldn’t show where it hurt”

“Was very hard to show the doctor where the injury was using mobile phone”

“Pressure to ensure the technology works”

“Both video calls ended up requiring a face to face appointment which resulted in another 3 week wait”

General

“Didn’t resolve the issue and had to arrange face to face consultation at a later date”

“Very useful – quick response from doctor but this was for a recurring problem”

Summary

The majority of respondents had some experience of having telephone consultations with a small minority who experienced video. The results show that people prefer to be seen face to face in certain circumstances which are dependent on the issue they have. For issues which a health professional would need to either- examine the patient, or physically see the patient then a telephone consultation would be of little use.

Some respondents found telephone consultations worked very well for them, but again dependent on the issue being discussed. People had issues with timings of calls, not knowing when to expect a call so therefore missing it, call quality issues and people who have disabilities such as deafness/hard of hearing and ADHD was very problematic. Respondents also found telephone consultations worked very well in eliminating the need to physically attend an appointment, saving on travel and child-care costs.

Q.6 If you have not had one already, would you have concerns about having either a telephone or video consultation appointment, and if so, why? N= 85

"Prefer to meet face to face"

"Can't read body language"

"Pure guesswork on the part of the doctor"

"People must be able to get 'hands on' in many cases"

"The elderly are less likely to shape with technology people end up going to A & E just to get face to face with someone – clogging up facilities"

"People having virtual appointments should be given information how to prepare for them"

"I may be cancelling my Broadband at home so can't do video"

"I expect gold standard care and face to face, I don't want telephone or video"

"Health professional can't see what the issue is"

"Things look different over video"

"I forget things on the phone"

"No concerns"

"Internet connection problems"

"Waiting around and nobody rings"

"Face to face is better if someone is hiding/exaggerating symptoms"

"Concern if the matter was more serious and gets missed"

"Not good for showing problems in an embarrassing place (on body)"

"Not getting the right diagnosis"

"Impossible for elderly people to do video call or send photos as no access to computer or smartphone, plus dad is deaf and mum has mental health issues"

"Not technically minded, feel awkward"

"Some personal issues and missing bits"

"I am 77 years old, mobile and active, doctors who can't remember ever seeing me take one look at my records, see my age and talk to me like I am some dodderly, slow, decrepid old lady, it's insulting, they aren't treating me, they are talking to a stereotypical old person, it is dehumanising"

Q.7 Do you have access to a reliable internet connection at home and/or at work? N=245

76% of people answered YES to this question. 7% answered NO, 16% answered SOMETIMES

Q.8 Do you have access to a smartphone or a computer at home and/or at work? N=244

83% of people answered YES, 8% answered NO, 9% answered SOMETIMES

Q.9 Do you have any additional comments you would like to share with us? N=132

+Positive

"It works in most cases and saves time when ill and your prescription gets sent to the pharmacy"

"Initially a virtual appointment is good to tell the doctor the problem, but will need to be followed up by a physical appointment"

"It may provide some benefits"

"Make sure what is being offered is appropriate for the service user"

"I prefer virtual but that's because of the nature of my issue"

"Yes, but give everyone the choice to have a face to face"

"Good way for GP to triage patients"

"Having GP consultations has helped me and my daughter enormously saving time and the doctor has made time if we needed to go in"

"Online is great when everything is straightforward"

"Digital conversations are very efficient for both patient and NHS, but not everyone is comfortable with them and I think they should be an option decided by the patient"

"Works well, means GPs are able to see more patients"

"For carers, not having to get a loved one up and rushed and maybe reluctant to attend, makes things a lot easier"

-Negative

"Don't feel there is any continuity of care, things get missed".

"When you reach a certain age over 70 you should be able to see a doctor face to face"

"Remember that people of any age may not have internet or may not be savvy with IT"

"I would find accessing video calls stressful"

"If you ask for an in-patient appointment it should be granted, there is no excuse not to offer that now"

"I think Covid has provided what may be a useful tool for the surgery, but a poor one for me"

"Not suitable for people who have no access to WIFI. Also limited access to the person due to telephone restrictions"

"Nothing can put people's minds at rest like actually being face to face with a person"

"There should be equal opportunities for virtual and face to face appointments"

Recommendations

1. It is important to understand the individual needs of the patient when determining the type of appointment. Particularly people who may have disabilities, hearing issues and older people unfamiliar with modern communication devices.
2. When consultations are being arranged – either telephone or video, ensure that a reasonable appointment time is given to the patient, so patients have more idea when to expect the call. Ensure that patients are actually called back on the day they expect to be.
3. Ensure that consultations are not rushed, that people are given time to talk and listen and discuss their issue.
4. When offering virtual appointments, ensure the patient has an efficient internet or phone service. If not, then offer an alternative appointment method.
5. Ensure the needs of older people are fully considered when offering virtual appointments.
6. Take into account the cost of living and that some people may no longer have an internet connection, landline or mobile phone.
7. Ensure that virtual appointments do not become the 'default' method of consultations with patients
8. Consider providing some useful communication materials for patients about what to expect from a virtual appointment and what is needed from the patient. Also provide some information as to why a virtual appointment is being offered and not face to face.



Scan the code to take the survey!

What Do You Think About 'Virtual' Health Care?

Virtual health care means you can have a consultation with your health care professional either over the phone or by video. NHS organisations are committed to increasing the amount of virtual appointments they offer patients. Some of the benefits include: reduction in costs for travel and car parking, the implications of childcare arrangements and time off work to attend, and reducing carbon emissions due to less travel.

Though virtual appointments are not right for everyone, many people may find them more convenient and have greater satisfaction by accessing health services this way.

Bolton NHS Foundation Trust, the organisation that runs the Royal Bolton Hospital and a number of services in the community, would like to hear your views on virtual health care. We hope you can take a few minutes to complete our survey and share your thoughts. Thank you.

1.	Please tell us your postcode (first 3 character)
2.	Have you ever had a consultation appointment with a health care professional that was not face to face? Yes – Video <input type="checkbox"/> Yes- telephone <input type="checkbox"/> Yes – both telephone and video <input type="checkbox"/> No, I have never had a telephone or video consultation <input type="checkbox"/>
3.	If you have had a telephone consultation appointment, how did you find it in comparison to face to face? As helpful – met my needs entirely <input type="checkbox"/> Somewhat helpful – some parts worked well, some parts didn't <input type="checkbox"/> Not helpful- didn't resolve my issue/further follow-up/other issue <input type="checkbox"/>

4.	<p data-bbox="167 107 1197 145">If you had a video consultation appointment, how did you find it?</p> <p data-bbox="167 190 702 228">As helpful – met my needs entirely <input data-bbox="1329 190 1390 235" type="checkbox"/></p> <p data-bbox="167 309 1136 347">Somewhat helpful – some parts worked well, some parts didn't <input data-bbox="1329 297 1390 342" type="checkbox"/></p> <p data-bbox="167 427 1157 465">Not helpful- didn't resolve my issue/further follow-up/other issue <input data-bbox="1329 416 1390 461" type="checkbox"/></p>
5.	<p data-bbox="167 506 1460 582">Please tell us your thoughts on your experiences of telephone or video consultation that worked well (eg. time taken, less travel costs, no work issues, no waiting)</p>
6.	<p data-bbox="167 1014 1396 1090">If you've not had one already, would you have concerns about having either a telephone or video consultation appointment, and if so, why?</p>
7.	<p data-bbox="167 1368 1353 1406">Do you have access to a reliable internet connection at home and/or work?</p> <p data-bbox="167 1447 678 1485">Yes <input data-bbox="619 1435 679 1480" type="checkbox"/></p> <p data-bbox="167 1525 678 1563">No <input data-bbox="619 1514 679 1559" type="checkbox"/></p> <p data-bbox="167 1603 678 1641">Sometimes <input data-bbox="619 1592 679 1637" type="checkbox"/></p> <p data-bbox="167 1682 678 1720">Not sure <input data-bbox="619 1671 679 1715" type="checkbox"/></p>
8.	<p data-bbox="167 1760 1380 1798">Do you have access to a smartphone or a computer at home and/or at work?</p> <p data-bbox="167 1839 678 1877">Yes <input data-bbox="619 1827 679 1872" type="checkbox"/></p> <p data-bbox="167 1917 678 1955">No <input data-bbox="619 1906 679 1951" type="checkbox"/></p> <p data-bbox="167 1995 678 2033">Sometimes <input data-bbox="619 1984 679 2029" type="checkbox"/></p> <p data-bbox="167 2074 678 2112">Not sure <input data-bbox="619 2063 679 2107" type="checkbox"/></p>

9.	Do you have any additional comments you'd like to share with us?
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Equality and Diversity Monitoring

We seek to involve all our community in the work we do. We monitor this so we can identify significant trends and differences between groups to help us be more inclusive and to remove any unfair barriers. To ensure equal opportunities, please help us by answering the following questions. All responses in this survey are anonymous. Thank you for your help in this.

10.	Please tell us your age:	
	0-12 years	
	13-15 years	
	16-17 years	
	18-24 years	
	25-49 years	
	50 to 64 years	
	65 to 79 years	
	80+ years	

11.	Please tell us which gender you identify with?	
	Woman	
	Man	
	Non-binary	
	Intersex	
	Prefer not to say	
	Prefer to self-describe (please state):	

12.	Please tell us which sexual orientation you identify with:	
	Straight/heterosexual	
	Gay Man	
	Gay woman (lesbian)	
	Bi-sexual	
	Asexual	
	Pansexual	
	Prefer not to say	
	Prefer to self-describe, (please state):	

13.	What is your ethnic background?	
	Arab	
	Asian/Asian British: Bangladeshi	
	Asian/Asian British: Chinese	
	Asian/Asian British: Indian	
	Asian/Asian British: Pakistani	
	Any other Asian/Asian British background	
	Black/Black British: African	
	Black/Black British: Caribbean	
	Any other Black/Black British background	
	Mixed/Multiple ethnic groups: Asian and White	
	Mixed/Multiple ethnic groups: Black African and White	
	Mixed/Multiple ethnic groups: Black Caribbean and White	
	Any other Mixed/Multiple ethnic group	
	White: British, English, Northern Irish, Scottish, Welsh	
	White: Irish	
	White: Gypsy, Traveller or Irish Traveller	
	White: Roma	
	Any other White background	
	Any other ethnic group (please specify):	

14.	What is your religion or belief?	
	Buddhist	
	Christian	
	Hindu	
	Jewish	
	Muslim	
	No religion	
	Sikh	
	Prefer not to say	
	Other religion (please specify):	
15.	Do you have a disability?	
	Physical or mobility impairment	
	Sensory impairment	
	Learning disability or difficulties	
	Mental health condition	
	Long term condition	
	Prefer not to say	
	Other (please specify):	

16.	Do you have a long-term condition?	
	Asthma, COPD or respiratory condition	
	Blindness or severe visual impairment	
	Cancer	
	Cardiovascular condition (including stroke)	
	Chronic kidney disease	
	Deafness or severe hearing impairment	
	Dementia	
	Diabetes	
	Epilepsy	
	Hypertension	
	Learning disability	
	Mental health condition	
	Musculoskeletal condition	
	Other (please specify):	

17.	Are you a carer?	
	Yes	
	No	
	Not sure	

Thank you for sharing your feedback. Your views are important to help health and care services understand your health and social care needs

Newsletter Sign-up

If you would like to sign up to receive our newsletter, to receive information about our work, then please leave your name and email address here. Alternatively you can do this via our website at [newsletter sign-up](#)

Name:.....

Email:.....

We will always make sure that your information is protected and treated securely. Any information that you give will be held in accordance with the data protection legislation introduced on May 25th 2018, under the General Data Protection Regulation (GDPR) and Data Protection Bill. For further information, please see our privacy statement here: <https://www.healthwatchbolton.co.uk/privacy>

Responses from Greater Manchester Integrated Care and Bolton Hospitals NHS Foundation Trust

Our Bolton practices are busier than ever with online, video and face-to-face appointments (recent collated data demonstrated that approximately 49 per cent of all GP appointments in Bolton are face-to-face). The type of appointment is always guided by both the patient's clinical need and individual circumstances, and where appropriate each practice has access to translation and interpretation services including BSL.

*The move towards more telephone and on-line appointments, which many people find more convenient, began before the Covid-19 pandemic to help meet increasing demand. These understandably increased during the pandemic in order to keep both staff and patients safe. In this time, it was realised that many issues could be effectively treated with these types of appointments and whilst **face-to-face appointments are still available, are taking place and can be requested by patients**, online and telephone consultations will continue to be on offer within Bolton's GP Practices - that said these are certainly not a default option.*

Much like many other appointments a telephone or video consultation does have an allocated time slot that is comparable with face-to-face appointments, so there is no disadvantage to patients when given a virtual appointment. In addition, all practices should promote their online consultation tool and guidance on their practice website.

On a final note we are committed to ensuring that our patients and public do continue to see the benefits to a virtual consultation. A video is due to be commissioned that will include some of this detail.

Jennie Partington

Campaigns and Communications Manager (Bolton)

NHS Greater Manchester Integrated Care

No	Healthwatch Recommendation	Bolton FT Response
1	It is important to understand the individual needs of the patient when determining the type of appointment. Particularly people who may have disabilities, hearing issues and older people unfamiliar with modern communication devices.	<p>1st Appts:</p> <ul style="list-style-type: none"> Decision guided by clinical picture & guidance / narrative provided in GP referral letter <p>Follow Up Appts:</p> <ul style="list-style-type: none"> During a face to face consultation a clinical judgment is made regarding follow up appt, taking into account the holistic needs of the patient. The patient will be informed & asked if they are happy to have a virtual appointment. NHS England guidance to assist clinical decision making has been shared with Clinical Governance Boards across all Divisions at Bolton FT to support decision making.
2	When consultations are being arranged – either telephone or video, ensure that a reasonable appointment time is given to the patient, so patients have more idea when to expect the call. Ensure that patients are actually called back on the day they expect to be.	<p>Tel appointments:</p> <ul style="list-style-type: none"> Patients are provided with an appt timeslot but advised to be available for a 30 min window either side. <p>Video appointments:</p> <ul style="list-style-type: none"> Patients are given a specific time slot
3	Ensure that consultations are not rushed, that people are given time to talk and listen and discuss their issue.	Virtual Clinics (telephone or video) have official time slots that are comparable with face to face appointments, so there is no disadvantage to patients when given a virtual appt
4	When offering virtual appointments, ensure the patient has an efficient internet or phone service. If not, then offer an alternative appointment method.	<p>Telephone:</p> <ul style="list-style-type: none"> Bolton NHS FT documents both patients mobile and land line numbers <p>Video:</p> <ul style="list-style-type: none"> Patient's are asked if they have a suitable device, internet connection and a quiet, private space to support a consultation. Once booked, patients receive all instructions listed in No.8 below.
5	Ensure the needs of older people are fully considered when offering virtual appointments.	<p>First Appointments: In this instance an appointment type will be guided by the clinical picture & GP referral details / history to determine an appropriate method.</p> <p>Older generation can often have support around them (eg care homes) to assist with technology and this is taken into account to allow them access to virtual appointments should that be appropriate / preferred method of consultation for the patient</p>
6	Take into account the cost of living and that some people may no longer have an internet connection, landline or mobile phone.	<ul style="list-style-type: none"> When arranging a virtual consultation, it is confirmed prior that the patient has the infrastructure around them. If swapping from face to face to virtual it will be confirmed with the patient in the first instance Whilst acknowledging this recommendation and the cost of living crisis, – it is also acknowledged that virtual consultations can be financially beneficial & support patients by reducing travel & parking costs incurred with face to face visits to hospital.

7	Ensure that virtual appointments do not become the 'default' method of consultations with patients	<p><u>1st Appts:</u></p> <ul style="list-style-type: none"> • Decision guided by clinical picture & guidance / narrative provided in GP referral letter <p><u>Review Appt:</u></p> <ul style="list-style-type: none"> • During a face to face consultation a clinical judgment is made regarding follow up appt, taking into account the holistic needs of the patient. The patient will be informed & asked if they are happy to have a virtual appointment. • Video: Patients are asked if they have a suitable device, internet connection and a quiet, private space to support a consultation. Once booked, patients receive all instructions listed in No.8 below.
8	Consider providing some useful communication materials for patients about what to expect from a virtual appointment and what is needed from the patient. Also provide some information as to why a virtual appointment is being offered and not face to face	<p><u>Video Appts:</u></p> <p>Bolton FT currently provides the following:</p> <ul style="list-style-type: none"> • SMS's when the video consultation is booked • A 7 days SMS reminder • 1 hour before the appointment the patient receives a final SMS with the link to join with step by step instructions. • OP letter with confirmation of the appointment with an attached PDF with instructions of how to join the video appointment <p><u>Tel appts:</u></p> <ul style="list-style-type: none"> • A digital letter is sent to patients. <p><u>Is there anything we could potentially do better?</u></p> <ul style="list-style-type: none"> • Potentially include more pre-information into the attached pdf? • During initial consultation, clinicians could provide some pre-education about the video consultation process • Bolton FT has undertaken a patient survey to assess the effectiveness of material sent to patients to support video consultations – the survey results produced positive user feedback.

Healthwatch Bolton

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