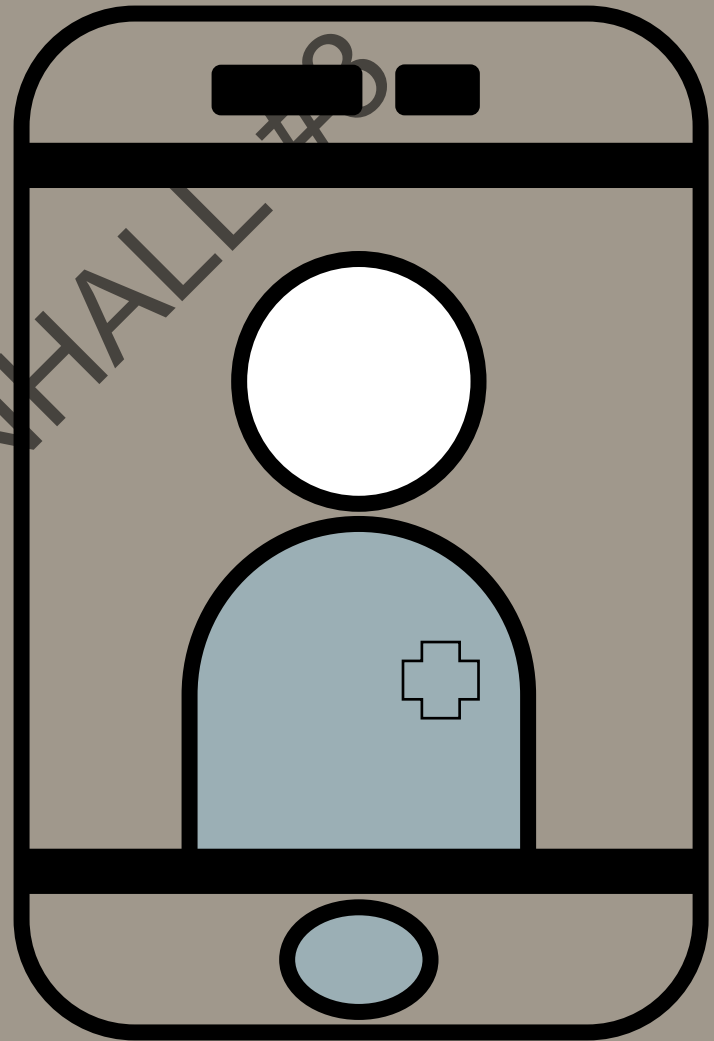


VIRTUAL (VIDEO) CLINICS

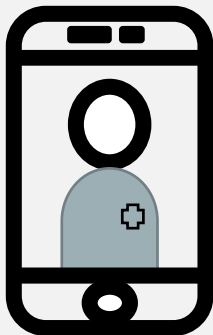
Athinyaa Thiraviaraj
Consultant Physician in
Diabetes & Endo



TODAY'S SHARE

- What can you use a video clinic for?
- How does a typical video clinic look/ feel?
 - For the clinician
 - For the person
- What are the advantages of a virtual consult?
- Questions

* Own experience informed by continuous feedback and user driven design



VIRTUAL CONSULTS



Letter/Email

- easy to use
- Already embedded in services
- limited as usually one way conversation
- Email not standard
- Challenges to manage volume and scheduling



Phone

- easy to use
- already embedded in use
- two way conversation
- Limited as non-verbal communication missed
- Not suitable for healthcare conversations



Video

- Enhanced communication; as good as Face-to-face
- Not currently embedded in service.
- requires a change in practice
- access to technology



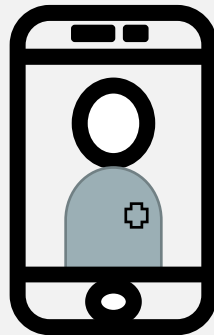
Face-to-face

- Gold standard in clinical interaction
- For when Video is insufficient
- physical examination required

WHY VIDEO CLINIC ??

TELEPHONE <<<<< VIDEO ~ FACE-TO-FACE

- Comparable to a face-to-face if you don't have to examine
- Comparable for communication
- Listening to a history; sharing advice
- Simple inspection (speech, swallow, gait, physiotherapy movement)
- The end-of-the-bed test
- Sharing results
- With telehealth devices- some biometric data like BP, glucose, weight



FOR A HEALTHCARE USER

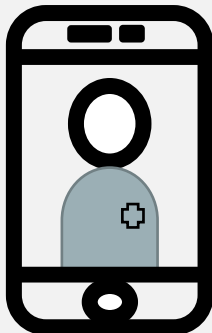
- Care at a distance (home/place of own choice)
- Less travel
- Less waiting
- Productivity (carers' time)
- Own 'turf'; therapeutic relationship and power balance

* Based on 448 virtual visits in first year

324 hours
drive time

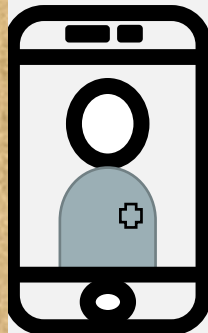
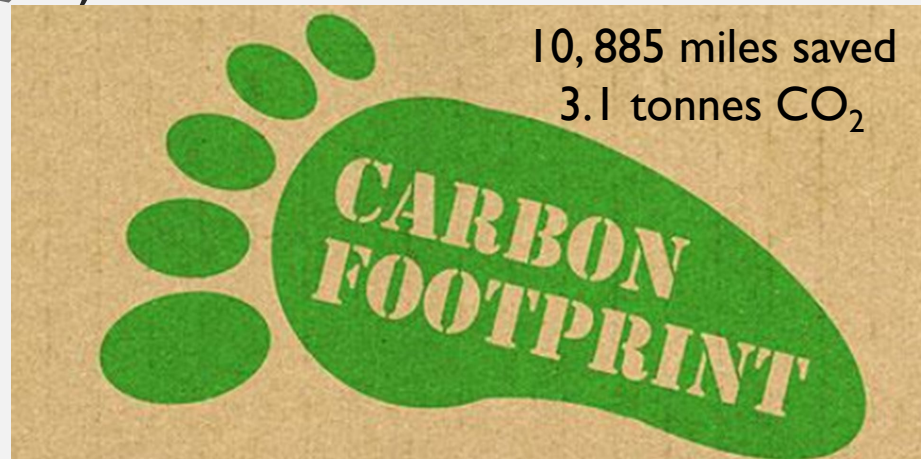
690 hours in
waiting time

1.7 fewer visits
per pregnancy
episode



FOR A HEALTHCARE PROFESSIONAL

- Focused Consultation
- Enhances communication (esp non-verbal)
- Fosters effective therapeutic relationship
- Recognise and respond to emotional distress
- Productivity (better than a socially distanced face-to-face clinic session)
- Ecofriendly

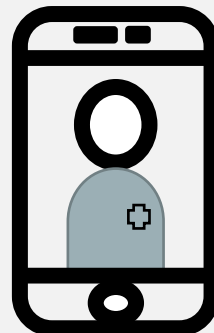


FOR THE HEALTHCARE ORGANISATION

- Care at a distance; Reduced footfall
- Effective resource utilisation
 - Outpatient space
 - Staffing
 - Consumables
- Opportunity to engage in health care fit for future

1.7 fewer visits per pregnancy episode for a woman with diabetes in pregnancy
Saving £474 per pregnancy

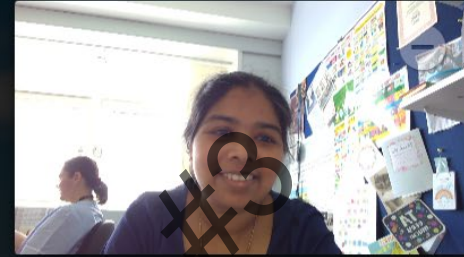
Annual Saving
for single
clinician/
single clinic
£112,812*



TYPICAL CLINIC

Lots of screens!!!



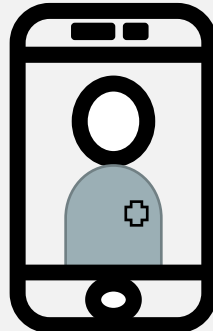






SOME HOME TRUTHS

- Redistributes work, does not reduce work for professional
- Takes as much time as a face-to-face clinic
- Less DNA (so beware of booking over)
- Patients seldom turn up late
- Some extra time taken in tech check and person check.
- Highly rewarding
- Ecofriendly













23/06/2020



Video Consultations

Patients in view : 7

Status	UP	Clinic ID	App Time	Arrival Time	Hosp	
Received			AENDATA	09:20	09:11	AH 2
Received			AENDATA	09:40	09:35	AH 3
Received			AENDATA	10:00	09:55	AH 2
Received			AENDATA	10:20	10:11	AH 3
DNA			AENDATA	11:00		AH 2
Late			AENDATA	11:20		AH 3
Arriving			AENDATA	11:40	11:33	AH 3

Min

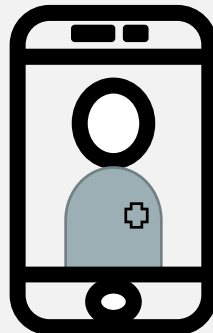
-9

-5

-5

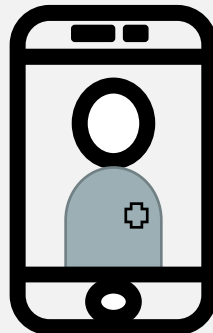
-9

-7



UNINTENDED CONSEQUENCES

- Work-life balance
 - Remote working
 - Reduced travel
 - Home working
- Renewed and revitalise a service
- Information governance (!!)



TYPES

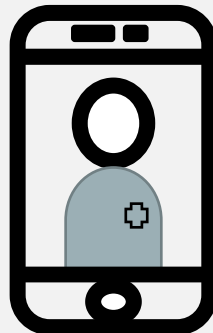
#3

FLEXIBLE

- Flexibly arranged by HCP
- Limited by time capacity
- Higher admin burden
- Activity not always easily captured

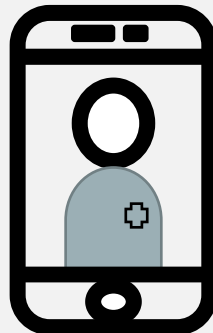
INTEGRATED

- Scheduled clinic sessions
- Limited by pace & rigour of process
- Mimics booked clinics
- Activity accurately captured
- Indemnity

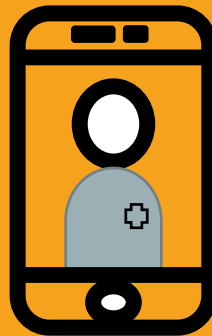


HOW DID WE DO IT?

- Proof of concept in 2015
- Opportunity to test and refine Oct 2018
- Qi methodology
- 1st virtual video consultation clinic Jan 2019.
- >600 appts
- Now expanding to an integrated system
- BMJ awards 2020

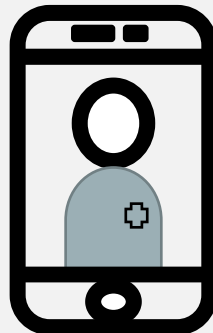


QUESTIONS



BACK UP SLIDES

BGS NI TOWNHALL #3



From: Athinyaa.Thiraviaraj@westerntrust.hscni.net

To: ☐ Oldcroft Ronnie

Subject: Your diabetes clinic appointment details

Location: Video clinic Rooms...

Start time: Fri 24/04/2020 14:15 ☐ All day event

End time: Fri 24/04/2020 14:30

[Send Update](#)

Dear Ronnie

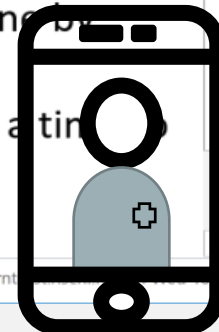
Your appoint time is 14:15 on 22/04/2020

Make sure you are on time for your appointment (or no more than 5 mins early)

You have been invited to join a virtual clinic. You can join from your smart phone or tablet.

1. Download and Open the Pexip Infinity Connect APP
2. Once opened, add your name
3. Press the green Video button
4. In the box that says Search to call enter DiabetesWest@hscni.net
5. When prompted for the pin, enter – 884430 and join

If you would like to test in advance of your appointment, please use our automated test line by entering in the Search to call box - dial [6111999@hscni.net](tel:6111999)
 Still having problems? Then please email help@hsl.co.uk or call 028 9531 3515 to arrange a tin test.



MIN SPECS

TECHNOLOGY

- **User interface**

- AV capable smart device
- Internet
- Email address

- **Provider interface**

- Virtual room
- Trust device with Pexip
- PAS capturing capacity
- Headsets, soft touch keyboards

- **Governance**

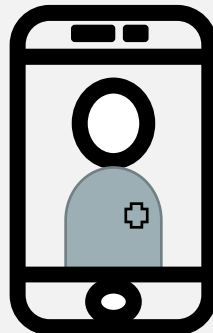
- DAA

- **ICT**

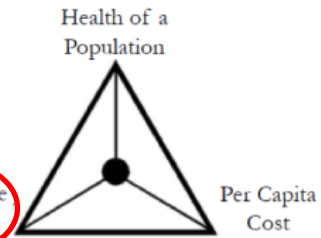
- Training
- ICT security clearance and DAA for any wearables

- **Communications**

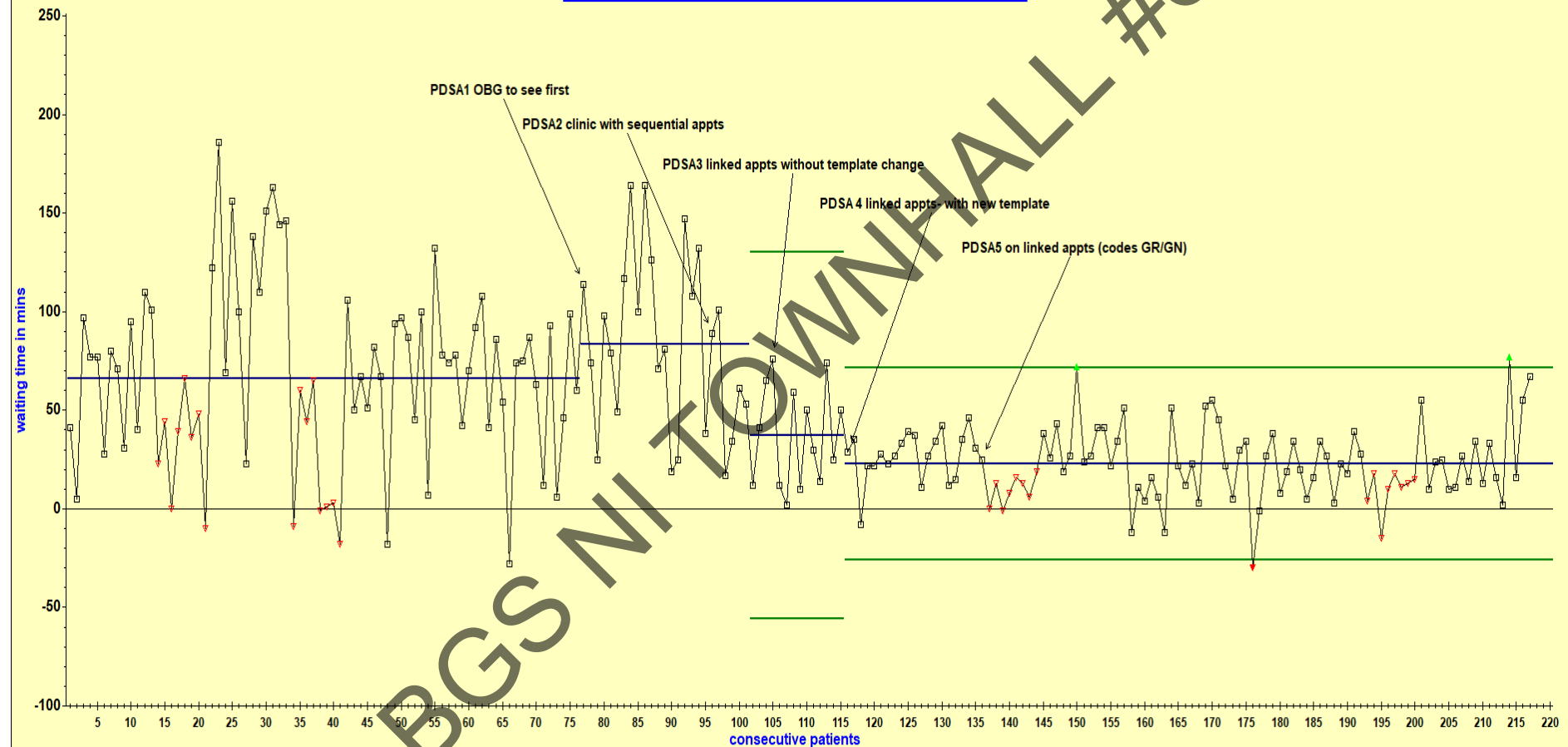
- To promote and increase uptake



65% reduction in waiting time at outpatient clinic (from 66.2 minutes to 23 minutes)



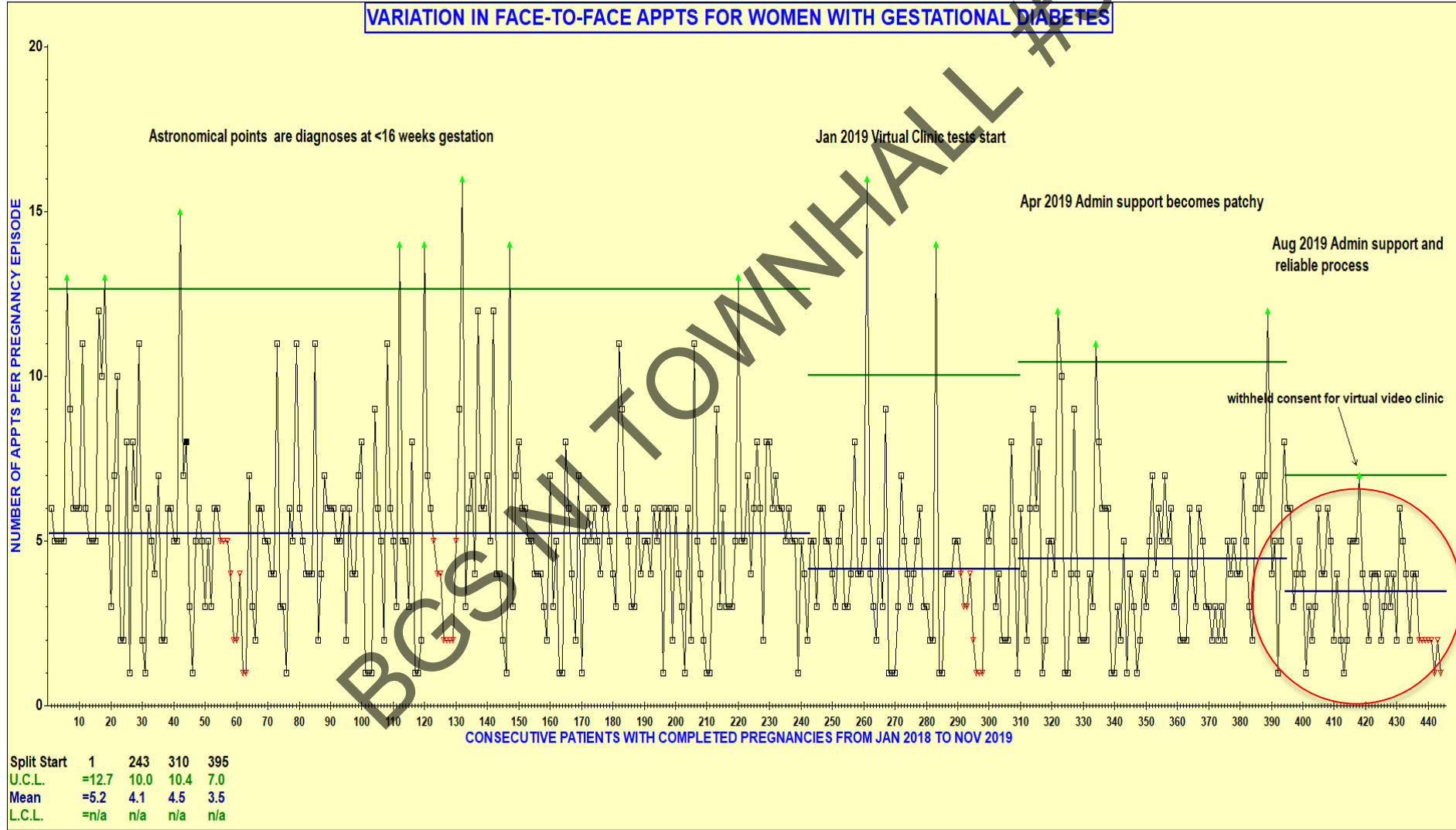
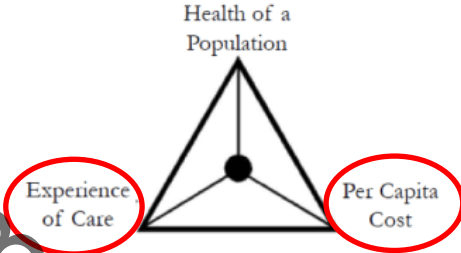
Waiting times for joint diabetes antenatal clinics



Split Start	1	77	102	116
U.C.L.	=	130.0	71.7	
Mean	=	66.2	83.4	37.1
L.C.L.	=	-55.8	-25.8	



32.7% reduction in face-to-face appointments for women attending diabetes clinic (from 5.2 visits per pregnancy to 3.5 visits)



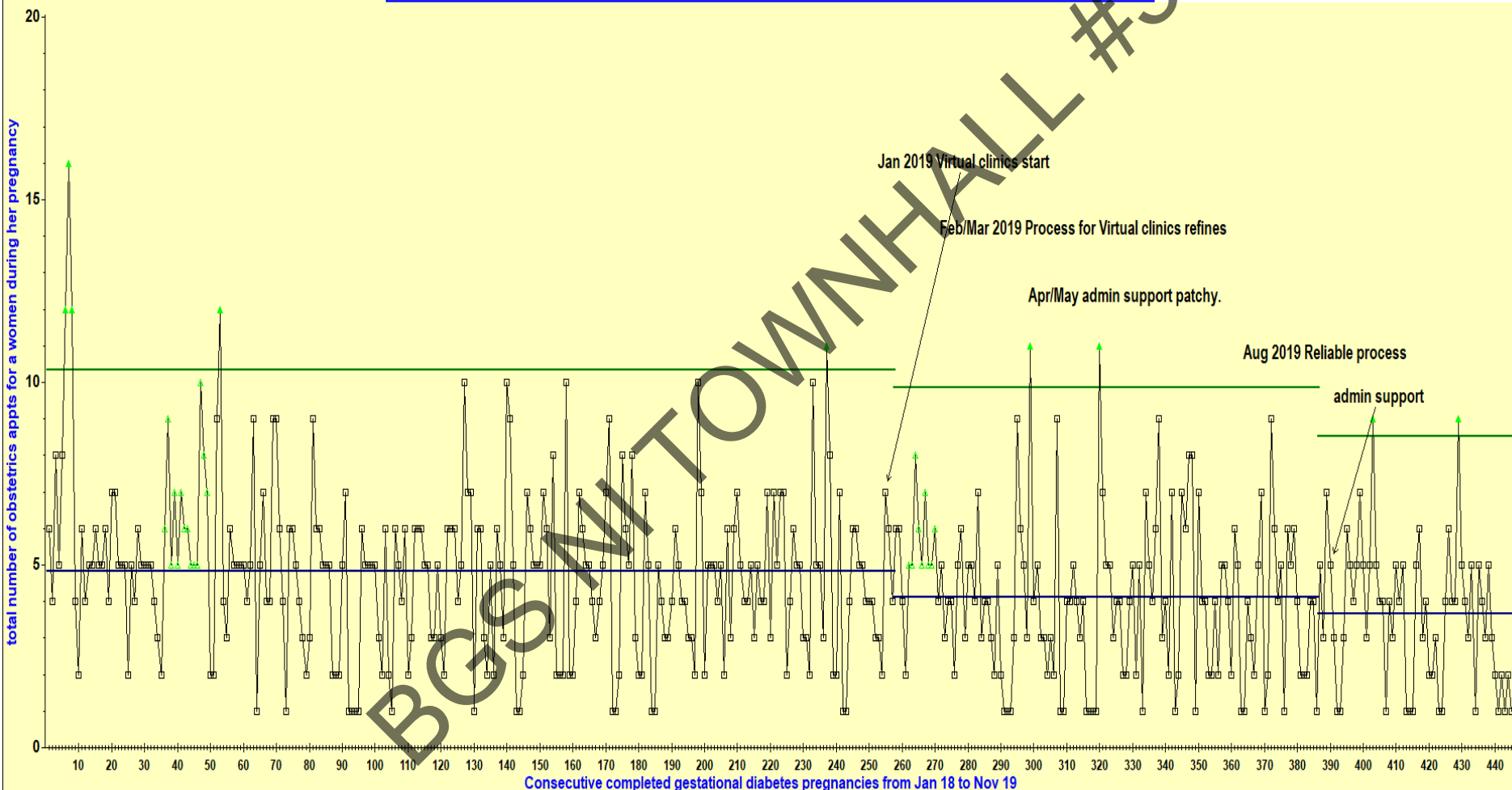
25% reduction in face-to-face appointments for women attending obstetrics clinic (from 4.8 visits per pregnancy to 3.7 visits)

Health of a Population

Experience of Care

Per Capita Cost

Variation in obstetric antenatal appointments for women with gestational diabetes



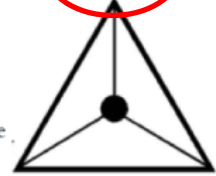
Split Start	1	258	387
U.C.L.	=10.3	9.9	8.5
Mean	=4.8	4.1	3.7
L.C.L.	=n/a	n/a	n/a

Clinical Outcomes (balance measure)

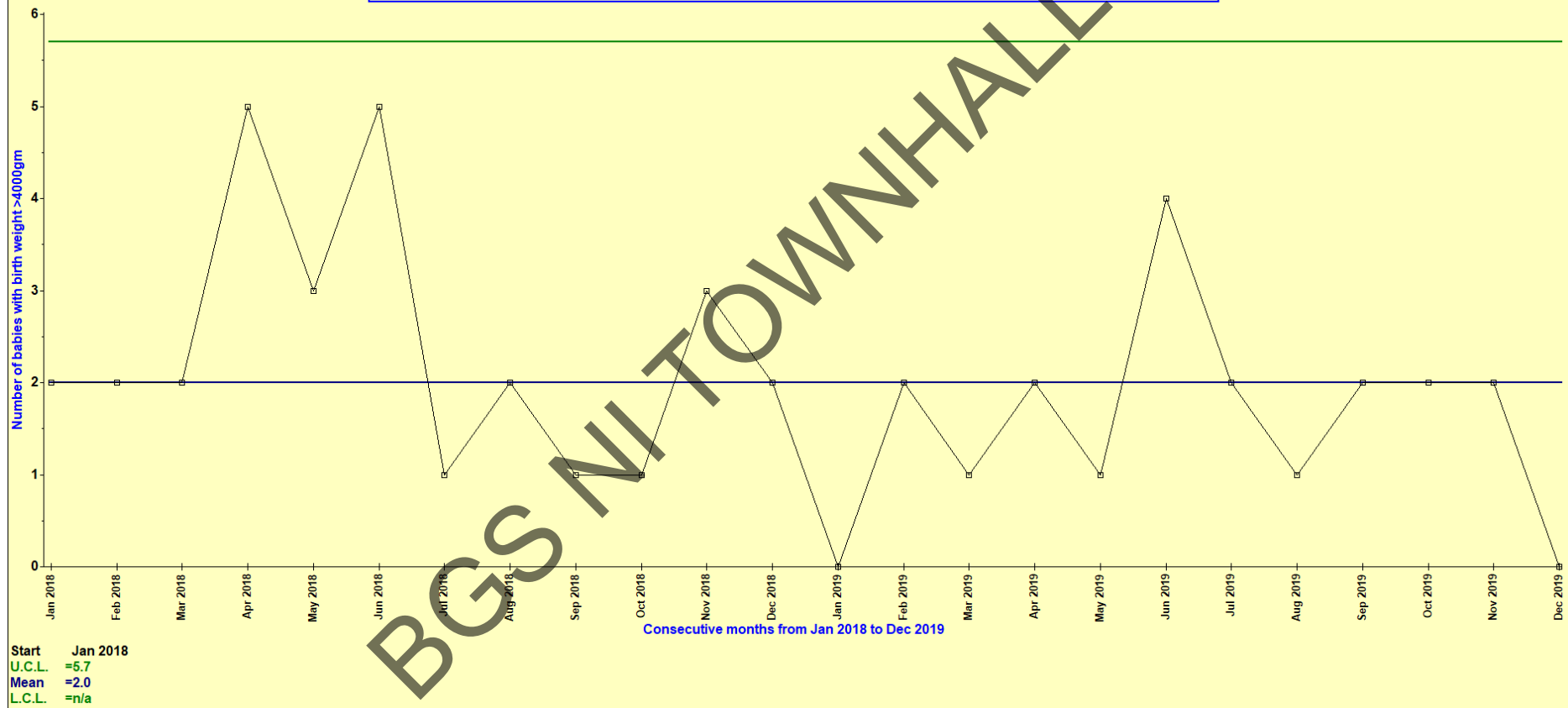
Health of a
Population

Experience
of Care

Per Capita
Cost



Incidence of Large for gestational age babies born to women with diabetes in pregnancy



No change in incidence of large for gestational age babies