

## **Additional information regarding Telehealth evaluation Background**

### 1. Telehealth questionnaire response summary

*Unfortunately the questionnaire circulated to patients had a number of flaws in gathering patient satisfaction with regard to telehealth. It asks some questions that have no direct bearing on the telehealth service and additionally the manner in which the questions were asked meant a confused patient response and in a number of cases meant that the question had to be disregarded in terms of this summary.*

*In hindsight and given more time, the questionnaire should have been designed and implemented at the start of the service, with points over the length of the contract when patients could have been contacted to judge their satisfaction.*

*Questions should have been better constructed and their exact response judged for best results, before circulating.*

*In order to capture the data regarding patient usage of services outside of the scope of telehealth (eg out of hours, doctors, 999 and A&E) we should have put in place measuring and data capture for patients at the point they accepted telehealth monitoring. This would have been a much better way at judging the performance of telehealth with regard to cost saving and demand, rather than trying to gather impact data in retrospect.*

#### **Question? Do you have an up-to-date self-management plan?**

66% of the patients responded that they had an up-to-date self-management plan  
29% of the patients responded that they did not have an up-to-date self-management plan  
3% did not respond to the question

#### **Question? Why did you decide to try the telemedicine system?**

52% of patients were advised to try telehealth by their GP  
21% of patients were advised to try telehealth by CREADO

#### **Question? Have you had any equipment problems?**

35% of patients suggested they had some equipment problems  
65% of patients suggested that they had no equipment problems  
Of those that had technical problems with their equipment the vast majority were due to battery issues. (easily solved, although some call-outs were needed)

**Question? Have you had a call each time your results varied outside you normal range?**

71% of patients said they had been contacted when their results varied  
22% of patients said they had not been contacted

**Question? Have the call staff..**

of 58 questionnaires the numbers that responded to each possible answer were....

Been helpful 46

Good advice 40

Been reassuring 37

Called when you needed a call 22

Prompted you to check your self-management plan 13

Provided advice so that you have been able to look after yourself better that day 22

Prompted you to use your rescue medication 19

**Question? Is there a pattern to when you will have a crisis/ exacerbation and need help?**

The vast majority of patients said they were unable to see any pattern to their crisis and exacerbations.

**Question? Over the last year how has your health and care changed?**

The majority of patients that responded to this question indicated that their confidence levels had either remained the same or had increased in relation to their ability at managing their own health and also in their ability to predict a crisis/exacerbation.

Their need to contact their GP and their need to phone 999 or attend hospital seems to have remained largely the same with some patients suggesting that these had reduced.

**Question? What has been the effect of having..**

Simple daily readings? And A call centre giving advice..

The themes that came up from this question were that patients felt 'reassured', 'more confident' and 'helped' in the monitoring of their condition.

**Question? Would you recommend telemedicine to a friend or family member who had COPD?**

85% said they would recommend the service

10% said that they would not recommend it

**2. Alternative Provision**

If the Board were to decide not to re-commission the current service alternative service provision for current telehealth patients would need to be explored by commissioners.

We would also need to look at the alternatives for a long term solution to telehealth and also at assisting COPD patients, an area where there is a constant and increasing demand on secondary care.

In the short term, we could make Pulse Oximeters available to those patients whose equipment would have to be returned, with a plan for some provision to increase the number/scope of the equipment in the future. There are a huge range of pulse oximeters available varying in price from £10 - £100. Is there a possibility of buying in bulk for a reduced cost?

The most important aspects of this direction would be in the support that the patients receive in using, monitoring levels and understanding what those readings mean regarding their care and when to contact and who to contact, if it looks like those readings differ from the norm. We would therefore need to put an emphasis on the GPs and practices that look after those patients and perhaps an education session, offering advice and support around what the readings mean and what they should do. The CCG could be responsible for developing a format for patients to record their levels on a daily basis. We could also explore the possibility of using a wide variety of apps and online tools where patients who feel comfortable using that level of technology, could monitor and get advice in managing their condition.

The questionnaire does suggest some interesting aspects of self-management that might be being missed for COPD patients and when considering that these patients have clearly qualified for telehealth, they would be the patients most likely to benefit from these. Any change in service would need to support

**a) All COPD patients** to have a self-management plan (in particular those who are currently receiving telehealth who claim not to have a self-management plan)

**b) All COPD patients** to have rescue medication available to them (again in particular relation to those patients already covered by this service)

The current Telehealth service currently does not offer a 24/7 service and assists in managing and monitoring levels and advising. In many ways, some patients are currently managing their condition in this way with advice and structure from their GP surgery. In the case that we need to offer emotional support to those patients who are currently receiving the service, we need to consider carefully a solution to manage the transition from the current service to whatever we decide to adopt in the longer term. We need to clearly state where COPD patients can get good advice and reassurance from if not from the current provider.

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