

Phone, video and online appointments during the Covid- 19 pandemic

Key findings and recommendations

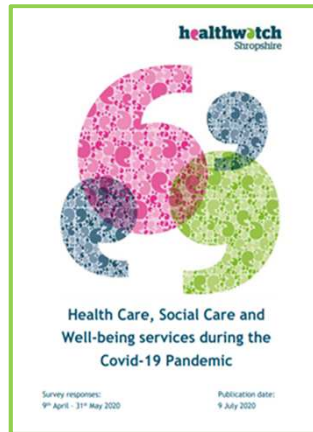
*'There seemed to be a
massive gap between
those who could use
technology and
those that could not'*

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The context

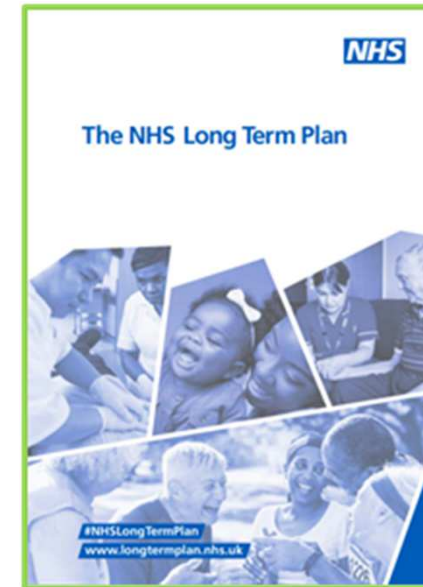


From **9th April to 31st May 2020**, we ran a public survey to find out what impact the Covid-19 pandemic and national lockdown was having on their health care, social care and general wellbeing. We received **568 responses**.

‘While many people understood why appointments had been cancelled, delayed or changed to a phone or video appointment during lockdown those people requiring check-ups, diagnostic tests or treatment were upset and worried, many reporting a deterioration in their condition or increased pain. This was made worse by the fear [of] leaving the house or going to the hospital because they were concerned about catching the virus. Some people who were offered a face-to-face appointment had refused.’

The context

‘Digitally-enabled primary and outpatient care will go mainstream across the NHS - Digital technology will provide convenient ways for patients to access advice and care. [] Then, building on progress already made on digitising appointments and prescriptions, a digital NHS ‘front door’ ... will provide advice, check symptoms and connect people with healthcare professionals - including through telephone and video consultations.



Patients will be able to access virtual services alongside face-to-face services via a computer or smart phone.

New digital-first primary care is proving convenient and popular and is bound to grow.’ (p.25-26)

Key findings - advantages

Including:

- Avoiding an **unnecessary appointment** (inc. follow-up outpatient appointments)
- Avoiding a **long or difficult journey**
- Saving **time** (more efficient)
- Being referred to the **most appropriate professional**
- **Speed** in which GPs respond to a message, e.g. if using 'e-Consult'
- Reduction in **anxiety**
- Avoiding going into an environment where you might catch Covid-19 or another disease

'It was fast and very efficient, living rurally it was good not to drive and wait days for an appointment'

Key findings - concerns

Including:

- **Difficulties getting through to GP practice** by phone and being able to speak to a GP/professional
- Receptionists being seen as **‘gatekeepers’** and not responding appropriately to patient concerns (inc. Mental health)
- Not wanting to discuss symptoms over the phone - **embarrassment, confidentiality and confidence**
- Particular difficulties for people with **hearing impairments, learning disabilities and Autism** and other ‘communication support needs’*
- Not receiving support from **carers**, e.g. to explain symptoms
- **Access to technology** (computers, tablets and smart phones) including affordability and wanting to or being able to use it

I'm over 90 and I don't like it. They wanted me to take a picture of it. I can't do that myself, no phone or camera. It's not suitable for older people like me.'

* <https://www.england.nhs.uk/ourwork/accessibleinfo/>

Recommendations to services

1. Inform the public that ‘virtual’ appointments are being used to **triage** patients and make sure people receive a face-to-face appointment if it is necessary and with the most appropriate professional
2. Fully implement the **NHS Accessible Information Standard** to make sure the communication needs and preferences of all people and their carers (if relevant) are acted upon
3. Provide the public with clear **information and instructions** about how to set up and use the software needed to access video appointments / electronic consultations (e.g. e-Consult, the NHS App)
4. Provide **training** for professionals about how to manage a phone or video consultation/meeting to make sure people have the opportunity to share any concerns and ask questions
5. Share the Healthwatch England **guidance** on ‘Getting the most out of the virtual health and care experience’ (tips for the public and professionals)