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Conference Abstract

Ensuring the clinical value of telehealth

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Abstract

Introduction: The evolution of 'Simple Telehealth' and its mobile phone texting service 'Florence' developed in Stoke-on-Trent and owned by the NHS has grown from basic reminders and self reported information gathering (eg medication, vital signs), to enabling the provision of sophisticated clinical care underpinned by dual management plans agreed by clinician and patient. The evolution was driven by trials of clinical applications, most notably a SHINE project focused on improving clinical management of hypertension in general practice, funded by the Health Foundation.

Aim: To demonstrate that the key to adoption of simple remote technology in the NHS (eg Florence mobile phone texting) is ensuring that the clinical application is integral to best practice in clinical management.

Objectives:

1. Upskill delegates in a vast range of clinical applications of simple telehealth.
2. Present tried and tested evaluation template for gauging improvement in clinical, organisational and patient centred outcomes.
3. Share learning from national rollout of Florence, simple telehealth, across England.
4. Enhance delegates' understanding of costs of telehealth: clinical input, technology and equipment, messaging.

Results: NHS clinicians have developed over 150 varied clinical protocols for the 'simple' telehealth Florence service, of which ten tasters (long term conditions hypertension, asthma, COPD; adverse lifestyle habits – smoking cessation; medication reminders) are being taken up in a national rollout to around 1000 general practices. The Florence mobile phone texting service is being snapped up by clinicians in secondary care (eg heart failure, child asthma, interstitial lung disease, cancer, pain, female urinary stress incontinence, follow up to prostate cancer), community care (eg COPD, heart failure) and mental health settings (eg alcohol misuse,

prevascular dementia); and applied across the interfaces along patient pathways. We will present our preliminary results from the national rollout; and clinical applications across the primary-secondary care interface.

In our initial evaluation of the innovative clinical application for hypertension, we found that simple telehealth is an acceptable and effective tool in reducing patients' blood pressure in general practice settings (Cottrell E, Chambers R, O'Connell P. Using simple telehealth in primary care to reduce blood pressure: a service evaluation. *BMJ Open*, November 2012. <http://bmjopen.bmj.com/cgi/content/full/bmjopen-2012-001391>) and patients love the personal support from Florence (Cottrell E, McMillan K, Chambers R. A cross-sectional survey and service evaluation of simple telehealth in primary care: what do patients think? *BMJ Open*, November 2012. <http://bmjopen.bmj.com/cgi/content/full/bmjopen-2012-001392>). We will present in depth results of the patient perspective from our national rollout.

This NHS innovation has received national and international recognition from health and industry bodies, including awards, accolades and inclusion in national clinical & NHS guidance and peer reviewed journals.

Conclusions: If simple telehealth approaches are used with evidence based clinical applications, then clinicians from all healthcare sectors are likely to adopt services such as Florence mobile phone texting, as a preferred method of delivery of clinical care for long term conditions and reversal of adverse lifestyle habits.

Keywords:

clinical, texting, dual management

Presentation available at: <http://www.kingsfund.org.uk/events/third-annual-international-congress-telehealth-and-telecare>