

Volume 13, 20 November 2013

Publisher: Igitur publishing

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2013; T&T Conf Suppl; URN: [URN:NBN:NL:UI:10-1-115664](https://nbn-resolving.org/urn:nbn:nl:ui:10-1-115664)

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Conference Abstract

The results of 24 hr teleconsultation with people at home and in residential care settings

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Abstract

Introduction: Use of video links (teleconsultation) to deliver clinical care has most often been used in a professional:professional context. We describe the results of providing 24 hr access to immediate clinical support using teleconsultation in both domestic and residential care settings.

Aims - To deliver a reliable, safe and effective means of providing clinical support to patients with a wide range of Long Term Conditions (LTCs), on a 24/7 basis.

Methods: A dedicated 24/7 Hub, staffed by experienced nurses, supported by a consultant general physician, can receive and make calls to patients over domestic broadband links. Patients may be at their home or in a residential care (Nursing and Care home) setting. Consultations are viewed either on a domestic TV via set top box technology (Red Embedded) or on a dedicated mobile video system (Involve Visual). Consultations are documented using a shared EHR (TPP SystemOne) which is used for communication and audit purposes. Patient feedback is captured using post call questionnaires.

Results: As exemplars, 2 groups are reported here. Firstly, a cohort of 25 people with COPD, managed at home. In these individuals, study of their admissions to hospital over the year before and after introduction of teleconsultation showed a 29.5% reduction in hospital admissions and a 36% reduction in length of stay for those admissions that occurred. Patient satisfaction with the approach scored 8-9/10 across a range of measures. Secondly a cohort of 14 nursing and care homes were supported using mobile teleconsultation equipment. For each home, comparison of a six month period post introduction of service and the same six months one year previously, showed a 50% relative reduction in admissions compared with similar homes that had no access to teleconsultation (actual reduction 27% vs 18%) and a 74% relative reduction in Emergency Department attendances (47% vs 27%) from the homes. Over the study period there were no clinical governance issues. For care homes, financial modelling of the benefits this approach may

offer to a whole health economy suggests that an average 20% admission reduction will deliver cost savings of between £0.31M to

£1.06M per year, depending on whether the homes in the study area in question have, respectively, generally low or high hospital admission rates.

Conclusions - Use of 24/7 teleconsultation is a safe, highly valued and effective means of delivering clinical support to people with COPD and care home residents, which leads to a substantial reduction in the need for both hospital admissions and Emergency Department attendances. Modelling suggests the approach offers net financial benefits to the local health economy.

Keywords:

teleconsultation, video, transformation

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