

POSTER ABSTRACT

Acceptance of and intent to adopt video consultations for addressing mental health disorders in primary care: A cross-sectional mixed methods study in general practitioners

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Background: The implementation of telemedicine in mental health care advances rapidly. While web-based interventions such as online education materials or self-assessments demonstrate acceptable feasibility, little is known on implementation outcomes for web-based real-time interactions. However, particularly in thinly populated areas where the ageing population is faced with long distances to specialized care, telemedical services such as video consultations embedded in primary care constitute a promising alternative mode of treatment delivery to face-to-face consultation in specialized mental health care.

Aim: The aim of this study was to identify the acceptance of and intent to adopt video consultations conducted by mental health specialists in a sample of general practitioners in Germany who generally were still unfamiliar with applying telemedicine.

Design and setting: We conducted a mixed methods study, namely a cross-sectional sequential exploratory design, in one urban and four rural counties in Southern Germany.

Method: We sent a mail survey comprising a simple 10-item questionnaire to all general practitioners licensed under the German statutory health insurance system in the five counties. Survey data were analysed by generating descriptive statistics. To gain a deeper understanding of the acceptance of and intent to adopt video consultations, we subsequently conducted semi-structured focus groups and interviews with 19 responding general practitioners which were then evaluated in a thematic analysis.

Results: The mail survey response rate amounted to 22% 176 of 788 general practitioners. Approximately half of the respondents 49.4% indicated that they would generally support the office-embedded treatment of patients with mental disorders through video consultations carried out by mental health specialists. However, only 35.2% of all responding general practitioners would consider implementation in their own practice. The qualitative data analysis yielded heterogeneous findings: On the one hand, some general practitioners outlined the benefits of a rapid and easy accessible supply of mental health care and b much needed

collaborative information exchange between general practitioners and their colleagues in mental health care. On the other hand, in the light of anticipated implementation efforts and potential demand on their resources, some interviewees could not identify any benefit from this integrated approach.

Conclusion: General practitioners are generally open-minded towards video consultations embedded in primary care for treating mental health disorders, although a significant proportion of them were sceptical about implementing it in their own practice. Our results refer to a potential gap between acceptance and intent to adopt the suggested mode of treatment delivery. Given the potential benefits of video consultations for patients as indicated by results from initial interventional studies, at this point, we would recommend further pilot studies with a specific focus on raising the intent to adopt in general practitioners.

Keywords: video consultation; integrated care; general practice; health services research; mental health care; mixed methods
