

Digital Tools Case Study

Quick intro to yourself and any contact details you're happy to share ...

My name is Christina Sothinathan, I am a Clinical Lead Physiotherapist at King's College Hospital NHS Foundation Trust.

What physio services do you provide? (e.g. specialty, conditions, location, patient demographics)

I provide musculoskeletal assessment and triage (MCATS) as well as physiotherapy across the Demark Hill and Tessa Jowell Health Center sites at King's College Hospital.

What tools are you using to deliver your physio services digitally?

I started a project in December 2019 to implement the video platform Attend Anywhere across a small team within the MCATS and physiotherapy service. COVID-19 led to large scaling across the entire service including all services within the Therapies and across the Trust.

How have these services replaced face to face contact?

Video replaced face-to-face contact for all patients during the 1st wave of COVID-19. Patients are sent their management plan including exercises via a general musculoskeletal email on the day of their appointment.

Telephone consultations are used instead of video for patients with no access to internet or equipment.

Face-to-face appointments have been re-introduced where there is a clinical need. All initial consultations remain virtual as a method of enhanced triage and assessment as well as risk assessment for COVID-19. Initial virtual appointments determine the clinical need for each patient such as referral to another service, further virtual follow up or arranging a face-to-face follow up.

What is the clinician's experience of using the digital tools?

There is a varied level of confidence in using technology across clinicians within the department. Virtual appointments are new to staff therefore adapting assessment style has been challenging for some.

Prolonged screen time has been reported as one of the main disadvantages of virtual appointments. In order to address this, we encourage small bursts of physical activity such as 10-minute yoga or 7-minute HIIT.

A staff satisfaction survey reported benefits such as improved DNAs, increased flexibility during clinical sessions with complex patients and offered an opportunity to work remotely. 90% of clinicians want to continue virtual appointments alongside face-to-face in the future to ensure we are offering a blend of appointment types.

Clinicians requested further training, which was delivered in September including an interview with a patient about her experience of virtual msk appointments. A 16-page guide has been written on 'optimising a virtual msk appointment'. This guide is provided as part of staff and student inductions. Further watched assessments of virtual appointments have been arranged to provide further support.

Do you have any patient feedback on digital physio service offer?

A patient experience survey was sent to every patient following their virtual appointment. The patient experience team approved this survey. 328 responses were received over a 6-week period of time.

When asked 'overall, how was your experience of your virtual appointment?' 96% of responders stated 'very good' or 'good'.

When asked 'how involved in your care did you feel as part of your virtual appointment?' 88% stated 'Yes, completely'.

When asked 'How does a virtual appointment compare to meeting face-to-face?' 43% stated 'Much better for me' or 'Better for me'. Only 18% stated 'Worse for me' or 'much worse for me'.

When asked 'How likely are you to want to have a video appointment in the future?' 80% stated 'Extremely likely' or 'Likely'. This feedback was more positive compared to the same question asked about telephone appointments whereby 38% stated 'Extremely likely' or 'likely'.

Patients stated a number of benefits in relation to their virtual appointment such as saving time and money on commuting, convenience and feeling safer during Covid-19.

Any top tips to others exploring using digital tools in physio services?

- Both staff and patients have reported that video is more optimal than telephone with regard to quality of assessment.
- Be aware of healthcare inequalities when providing digital solutions. The demographic feedback from the patient satisfaction survey does not appear to be fully representational of the patient population
- Ensure staff risk assessments are carried out in order to optimise ergonomics e.g. standing/sitting platforms and regularly movement
- Training for staff on how to optimise a virtual appointment including case studies and watched assessments is useful
- Addressing patient expectation of physiotherapy and "hands on approach" early on is beneficial
- Consider use of virtual receptionist to monitor video platform waiting area