

Telemedicine in Addictions Feasibility RCT – Staff and Patient Qualitative Satisfaction

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Aims and hypothesis

That telemedicine in an addiction service is acceptable to staff and users, can reduce travel, and improve attendance.

Background

Opioid dependence has high risks. Opioid substitution therapy (OST) improves outcomes, but requires specialist prescribers and safety monitoring. Non-attendance may worsen outcomes.

Methods

Prior to COVID-19, we obtained Health Research Authority approval for feasibility randomized controlled trial of Telemedicine versus Face-to-Face (control) consultations in a semirural community addictions service (2500km²) using a modified Hub-and-Spoke (outreach) model. Adult opioid dependent patients prescribed OST and attending outreach were recruited. Prescribers were located at hub for reviews. Telemedicine patients attending outreach, saw keyworker for drug testing, and then telemedicine via keyworker's laptop. We interviewed post-treatment, assessing patient and staff experience of consultations. Data transcribed, was free-text analysed using qualitative thematic analysis.

Results

Of 59 patients recruited, 58 completed research interview, reporting similar levels of satisfaction between the Telemedicine and Face-to-Face groups. Face-to-Face generated themes of no difference, easy, kind staff and liking being part of research. **Telemedicine generated themes of less travel, good experience, easier to access, good communication, saves time and saves money.** One patient stated *'Clear, easy to access, less travel'*. 19 (8 Face-to-Face) staff completed interviews with both groups reporting a Good/Very-Good experience of consultations (no difference). **Similar themes were reported across groups, with telemedicine leading to less travel, beneficial to patient care, improved attendance, and innovative technology.** One staff member reported *'Time, travel and money reduction'*. On telemedicine's downsides, staff identified technological issues.

Conclusions

In the first known RCT comparing Telemedicine with Face-to-Face consultations for opioid dependant patients attending prescriber reviews, both patients and staff found telemedicine consultations satisfactory. Overall themes were reduced travel, and more convenience. This will be important following the impact of COVID-19.