

EVALUATION OF VIDEO CONSULTATIONS IN COMMUNITY

MENTAL HEALTH SETTING- Pilot Project of Service Evaluation

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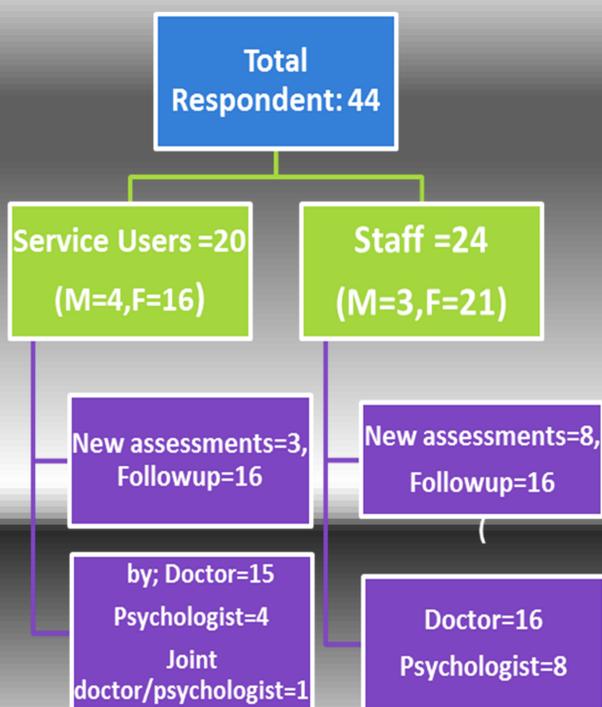
BACKGROUND

The increased use of the digital world is evident via Ofcom Tele Report 2019¹. UK Government's Five Year Forward View² and initiatives, such as 'Digital First'³, aim to reduce face-to-face consultations. Past reports have shown video consultations to be non-inferior to face-to-face consultations in systematic reviews and qualitative studies.^{4,5,6,7}

The contagious nature of the Covid-19 outbreak limited face-to-face consultations. This led to video consultations via Attend Anywhere (AA). AA is accessed anywhere via the web on Google or Safari with a good internet connection. It provides a single, consistent entry point with an online waiting area on the service's webpage

AIMS

To evaluate the overall experience and satisfaction with AA video consultations in adult CMHT.



METHODOLOGY

- Two separate questionnaires were designed, one each for service users and staff, to capture relevant information at the end of AA consultation. Additional clinical questions for staff included.
- Data were collected anonymously for 2 months from 1st April 2020.

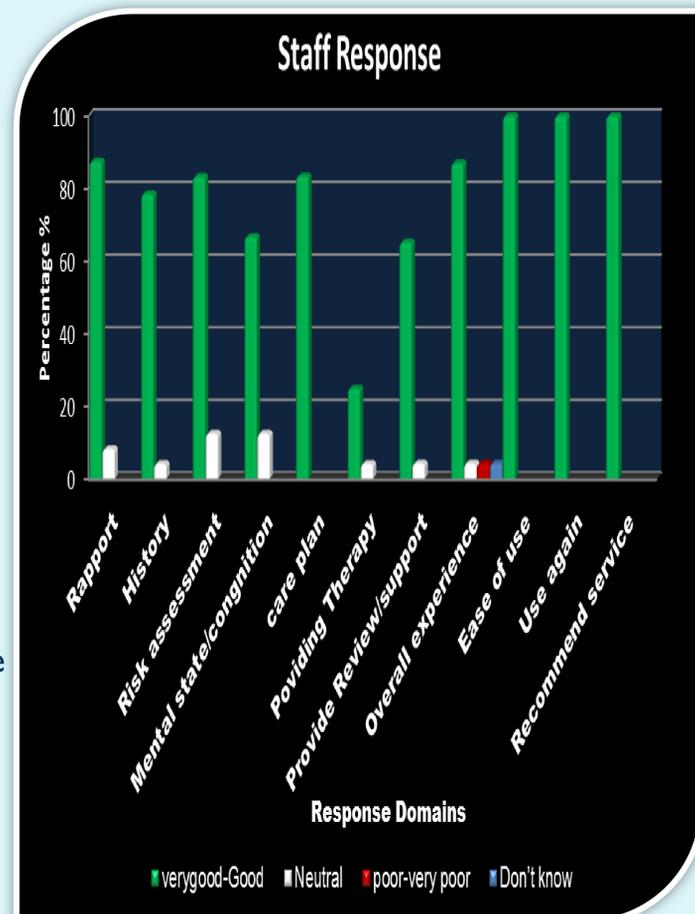
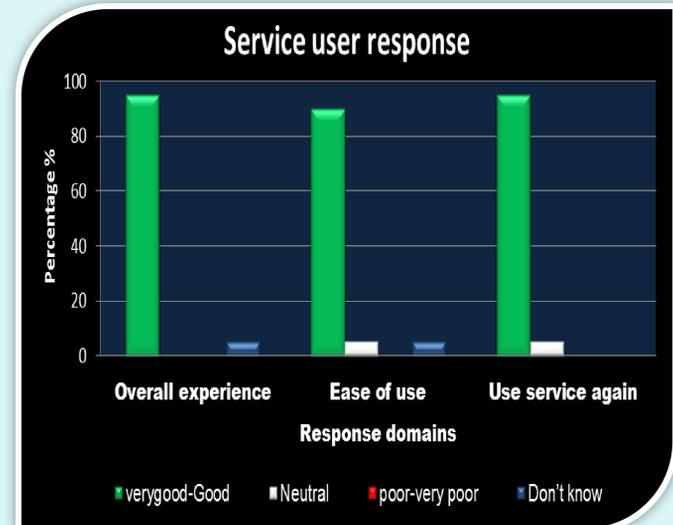
RESULTS

For Service Users:

- The respondents' age range was 19-62 years, 80% females. The majority were follow-ups with three new assessments. About half of them had previous contact with the staff. 15 consultations were carried out by the doctor, four by the psychologist, and one was a joint doctor-psychologist consultation.
- 95% reported their overall experience to be very good-good. 90% found it easy to use: 95% said they would use it again.

For Staff:

- The respondents' age range was 30-50 years, 87% females. The majority were follow-up assessments with one-third new. 16/24 respondents were doctors and eight psychologists. 58% had a previous meeting with service users.
- 83% reported the overall experience as very good to good: one third felt it's time-saving. 100% reported it's easy to use, would re-use and recommend to others.
- For clinical questions, the responses were very good-good as Rapport 87%; Risk assessment 83%; care plan 83%; History taking 78%; Mental state/Cognition 66% and providing support 65%.



CONCLUSIONS

Overall, the majority of respondents at an Adult CMHT found video consultations easy to use with readiness to use them again. Video consultations offer several advantages over telephone reviews, e.g. for developing rapport, assessing mental state, etc. This data is limited to the pilot project and a detailed review is planned for qualitative information with a larger cohort. Following this successful pilot and promising results, video consultations have been rolled out to other trust clinical areas.

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(more detail available on request)

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