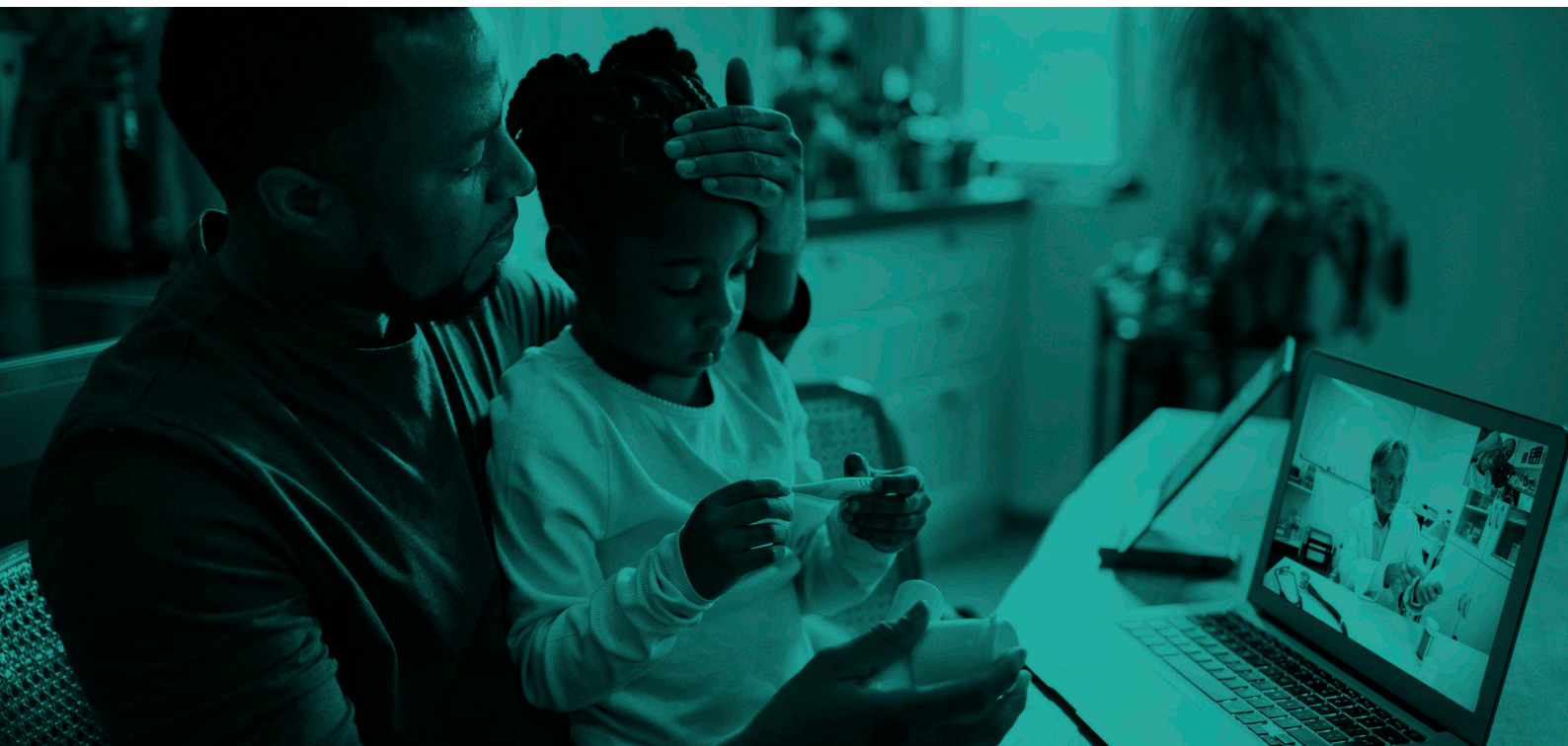


Communications technology in healthcare – the impact of Covid-19 on public perceptions



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The changing view of communications technology in UK healthcare – a pre and post Covid-19 snapshot

As the world changed in the wake of the coronavirus pandemic, so too did the way healthcare services are delivered.

Suddenly faced with a need to urgently reconfigure in order to manage an unprecedented public health crisis, healthcare providers in the NHS were also abruptly left with little option but to find alternative ways to consult with each other and their patients when face to face contact in many cases became impractical.

Just before the Covid-19 outbreak hit the UK, Visionable commissioned research to gain an understanding of both clinical and public perceptions around the communications technologies available in healthcare.

More than 1,500 patients and a select group of healthcare professionals were questioned to give their views on the current state of communication

systems in the NHS, challenges with communication, how communication technologies should be improved, and the appetite for the future of communication technologies.

Responses revealed a strong willingness for embracing technologies, including those that enable services to be delivered remotely.

But just as our findings were ready to be published, the world suddenly changed, and healthcare technology witnessed an extraordinary pace of adoption, the likes of which has never been seen.

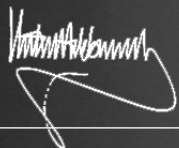
To avoid our findings becoming a historical reflection on a world gone by, we commissioned a second wave to the research in May 2020. This second wave asked similar questions of a very similar demographic of citizens, with 1,520 respondents, and of a selection of extremely busy healthcare professionals.

The results show that what had already been a largely positive appetite for communications technology in healthcare has been significantly amplified by Covid-19.

Importantly, it also shows that concerns do exist still around the role of remote technology – concerns that must be addressed by technology providers if clinicians and patients are to retain confidence in new ways of working and of delivering care remotely, for which coronavirus has acted as a catalyst in accelerating.

And more than just remote consultation between patient and clinician, the research shows that there is new appetite for the use of video platforms in ways that might never before have been envisioned. For example, virtual visiting is now something that many patients strongly feel should be enabled by hospitals.

This report brings to the fore important views from clinicians and perhaps most importantly from citizens – the people the NHS was set up to serve. It replaces some assumptions around the current perceptions of technology with evidence. And, in my view, it is a useful tool on which healthcare providers and their technology partners can reflect.



Victor Adebowale, June 2020



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In February 2020, ahead of the escalation of Covid-19 cases in the UK, Visionable commissioned a piece of research questioning more than 1,500 members of the public in the UK to understand what they want from their healthcare and their attitudes towards communications technology within healthcare.

A second wave of patient research was commissioned in May with a near identical sample – both in size and demographics – in order to measure any shifts in perceptions and experience of communications technology within healthcare following the national lockdown in March that followed the spread of Covid-19.

A small-scale qualitative piece with healthcare professionals was also commissioned to provide context for the patient learnings.

Specifically, the objectives of this second wave of research were to understand the impact of the pandemic on:

- Attitudes towards communications technology within healthcare in general
- Experience of and attitudes towards virtual consultations in particular
- Awareness and usage of existing healthcare apps
- Usage of video-based technologies more broadly.

Carried out on behalf of healthcare video collaboration provider Visionable by research specialist JMT Consult, the research has revealed new insights.

Growing importance placed on communications technology

There has been a notable growth in support for the role of communications technology in healthcare amongst UK citizens since Covid-19 has hit, even though support was already strong, according to our research:

- 73% now agree that you don't always need to see a doctor in person to receive appropriate care
- Four out of five people see communications tech as vital to the future of the NHS
- Affluence affects attitudes

A rise in remote consultations and appetite for the future

Our research found a noticeable rise in patients having experienced virtual consultations since the beginning of the Covid-19 crisis in the UK:

- Nearly two thirds of people questioned have now had a remote consultation
- Video usage has risen – especially for patients with chronic conditions
- Openness to remote consultation for the future has also risen.

Where patients feel tech has the biggest impact

Citizens are now placing stronger value on patient facing technology and have better perceptions of the role of healthcare professional facing technologies. However, uptake of apps has barely increased:

- More respondents now cite technology as an important way to improve access to doctors
- Communications technologies still seen as a way to enable faster treatment/diagnoses
- App awareness has increased but uptake remains similar.

New demand for virtual visiting

The vast majority of people are no longer comfortable visiting someone in hospital and want their hospital to enable virtual visiting:

- 82% urge hospitals to enable video virtual visiting
- Fewer than three in 10 comfortable visiting a hospital
- Video a means to say goodbye to loved ones

Patient concerns – from security to showing body parts

New communications technologies have not been met without concerns – some cultural, some technological. Our research has shown:

- Data security is seen as a risk by more than half of patients
- Women more concerned about showing body parts
- Some patients concerned about making mistakes with technology.

Clinical views of video in a post Covid-19 world

We conducted hour long interviews with seven busy clinicians in our May research. Though this sample was small, it provided useful anecdotal insights from the frontline as to the value of video and virtual meetings in maintaining and supporting clinical services, and the challenges that still need to be overcome in an NHS that will undoubtedly be more reliant on remote technologies into the future:

- Remote consultations ‘the only way to clear the backlog’
- Multidisciplinary Team (MDT) meetings are effective and easy when conducted virtually
- Challenges to overcome include trust, confidentiality, physical reassurance, technology (hardware).

**Four out of five
people (80%)
now agree that
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February research.**

1. Growing importance placed on communications technology

Strong buy-in before and after Covid-19, but support has grown since February

There has been a notable growth in support for the role of communications technology in healthcare amongst UK citizens since Covid-19 has hit, even though support was already strong, according to our research. However concerns still exist, particularly for people who are less affluent.

Key findings:

- 73% now agree that you don't always need to see a doctor in person to receive appropriate care
- Four out of five people see communications tech as vital to the future of the NHS
- Income affects attitudes

A growing appetite for communications technology

In both the February and May waves of our research, we asked an extremely similar demographic of more than 1,500 respondents a series of questions around the value they placed on communications technology and how it supports the NHS.

Responses show that there has been a significant growth in the importance placed on communications technology since the escalation of Covid-19 cases in 2020, even though attitudes were already generally very positive.

Asked if they agreed with a series of statements that claimed communications technology to be important in different aspects of healthcare, a higher number of respondents in our second wave of research supported each statement.

Four out of five people (80%) now agree that communications technology is vital to the future of the NHS, compared to 72% in our February research.

Some 79% of people now agree that communications technology could really help to make healthcare processes more efficient, compared to 71% previously.

And nearly three quarters of people – 73% now agree that you don't always need to see a doctor in person to receive appropriate care – a rise from 62% in our first research wave.

For most of the above, although overall most people support the statements posed, it was interesting to note that people from more affluent backgrounds were most likely to agree. Particularly:

- On the communications technology being vital to future, 83% of people on high/mid income agreed, compared to 77% on low income
- On communications technology enabling more efficient processes: 82% on high/mid income agreed compared to 74% on low income
- And on not always needing to see a doctor in person: 76% of people on high/mid income agreed compared to 69% of people on low income.

Many people – 63% also now agree that communications technology could help to solve the NHS staffing crisis. This was particularly the case for those aged under 55.

Those aged over 55 were the most likely to agree however that “communications technology is the future, but it needs to be joined up to work efficiently”. A total of 82% of all respondents agreed with this statement, compared to 78% in our first wave.

Visionable commentary

A substantial acceleration in healthcare digitisation has been witnessed since the onset of the coronavirus pandemic. In part, this has forced virtual and remote means of delivering healthcare into the fore, with huge potential for delivering care in more convenient and accessible ways for patients.

The fact that such a large proportion of patients believe they do not always need to see a doctor physically is likely to be at least partly reflective of the fact that the quality of care provision can in many cases be just as high through a remote consultation. This medium offers significant potential to triage patients appropriately, and to ensure we prioritise patients in a timely way when they may need further investigations or important procedures.

Our research here has also shown some interesting observations around affluence. Though a high level of confidence and appetite for virtual is apparent throughout society, the fact that this is slightly higher in more affluent groups, demonstrates that we need to be continually vigilant of ensuring new ways of delivering healthcare are designed with the needs of all patients in mind. It is nevertheless reassuring that the potential is such that we can make healthcare more accessible to less wealthy parts of society – especially when it is difficult to travel to a physical meeting.

“communications technology is the future, but it needs to be joined up to work efficiently”

Four in 10 chronic sufferers we spoke to had experienced a video consultation – more than double than during our February research.

2. A rise in remote consultations and appetite for the future

Our research found a noticeable rise in patients having experienced virtual consultations since the beginning of the Covid-19 crisis in the UK.

Key findings:

- Nearly two thirds of people questioned have now had a remote consultation
- Video usage has risen by 50% – with patients with chronic conditions being the biggest
- Openness to remote consultation for the future has also risen

On the rise in practice

Nearly two thirds of respondents (63%) have now experienced some form of remote consultation, an increase from 51% in our February wave of research.

As of May, 59% of people we spoke to had experienced a telephone consultation, and for video there had been a 50% rise – from 8% of respondents to 12%.

Video sees substantial rise especially for patients with chronic conditions

The largest group to use such services were patients with chronic conditions. Four in 10 people with chronic conditions we spoke to had experienced a video consultation – more than double than during our February research. 88% of chronic patients have now experienced a remote consultation of some sort.

Interest for the future

Our research also showed a significant growth in confidence in telephone and video consultation for the future.

A total of 83% of respondents were now happy with phone consultations to consult with their GP, compared with an already strong 73% in our February round of questions.

Three quarters of patients were now happy to use video to engage their GP, compared with 62% previously.

Low income women compared to affluent men

Covid-19 has also levelled willingness to use remote consultation technologies across previously contrasting demographic responses.

Women, those on low income, those living in rural areas and those who have never experienced remote consultations were previously significantly less open to video consultations in the future, even though these groups were significantly more open to the idea than are against. Men, those on mid to high income, those living in cities and those who have had previous remote consultation experience were significantly more open to video consultations in the future, when questioned in February.

By May most demographic differences flattened out although the least affluent, whilst still strongly in favour, are less ardent in their openness than the more affluent. This difference in affluence is statistically significant: The percentage of those very or fairly happy to have a video consultation with:

- A GP was found to be 90% for those on high income, 75% for those on a mid-income, and 68% for people on low income.
- A hospital specialist – 88% for those on high income, 75% for those on a mid-income, and 65% for people on low income.
- Groups/ MDTs – 85% for those on high income, 71% for those on a mid-income, 61% for people on low income.

Visionable commentary

Covid-19 has totally broken down doors in terms of people's propensity to accept virtual consultations as an appropriate means of triaging various ailments. People are accepting the fact they can have those conversations remotely.

The research has shown some particularly interesting trends around demographics that merits further research to understand why mindsets may have changed, and why affluence appears to influence appetite.

3. Where patients feel tech has the biggest impact

Citizens are now placing stronger value on patient facing technology and have better perceptions of the role of healthcare professional facing technologies. However, uptake of apps has barely increased.

Key findings:

- More respondents cite technology as a way to improve access to doctors
- Communications technologies still seen as a way to enable faster treatment/diagnoses
- App awareness has increased but uptake remains similar

The value of patient facing communications tech

In both waves of research our respondents consistently felt that faster treatment and faster diagnosis were the key benefits they would hope to gain from communications technology. In both sets of research these were the top two reasons given for patients using such technologies.

Nearly half also saw faster referral to specialists as a key reason in both sets of research.

Use of communications technology for better access to care was cited as a reason slightly more often in our May research, particularly in rural areas with 46% of respondents in agreement.

Predominant reasons for using technology for patients remained booking GP appointments and ordering repeat prescriptions, especially in May. Nearly three quarters of respondents nominated the ability to book their own GP appointments as a key benefit and 63% valued ordering prescriptions.

How citizens view communications technology helping healthcare professionals

A noticeable rise was observed in respondents seeing the value in communications technology for their healthcare professionals.

By May 63% of people said they believed creating connected ambulances – where paramedics were connected to specialist doctors either when they were at the scene of an emergency or in transit, was a key benefit both now and in the future.

More than six in ten respondents were also in favour of using communications technology to connect multiple specialists to collaborate on the care of an individual patient, to connect doctors and non-medical professionals (such as social services) to collaborate and work as a team on the care of an individual patient, and to connect care home staff to specialist doctors in order to collaborate on the care of an individual patient.

Uptake of apps has changed little

In both waves of research we asked respondents if they were aware of any healthcare app or if they had used one in the last 12 months. Despite more than two thirds of citizens being aware of at least one healthcare app in May – an increase from 57% in our previous research, usage of apps had barely changed – with 33% of respondents saying they had used a healthcare app.

A total of 39% of respondents had heard of the NHS App, which had risen from 29% in February, but only 10% said they had used it in the last 12 months.

Visionable commentary

The fact that uptake of apps appears to have changed very little is interesting, and reflective of the need that healthcare technologies should be made easy to access. Technology providers have a responsibility to make their tools simple. Visionable has done this in the communication tools space where our users don't need a laptop or a specific device, and they don't need to download an app. They just need to click on a link. Now that technologies are being increasingly used for this purpose, making them simple is more important than ever to ensuring healthcare remains accessible and equitable.

Our research has also shown there is a consistent emphasis from patients on the value of technology in supporting faster diagnosis and faster treatment. There are many opportunities for this. Why does a patient need to go to hospital for a consultation that only involves a verbal conversation, for example? Our customers are changing this dynamic, in some cases permanently moving consultations virtually where that can save time for the patient and the health service.

It is also particularly interesting to see a strong demand for connected ambulances – something Visionable has supported in practice with a significant impact for stroke patients in the East of England. More details can be found at <https://visionable.com/visionable-at-work/virtual-stroke-diagnosis-and-treatment/>

4. New demand for virtual visiting

The vast majority of people are no longer comfortable visiting someone in hospital and want their hospital to enable virtual visiting.

Key findings:

- 82% urge hospitals to enable video virtual visiting
- Fewer than three in 10 comfortable visiting a hospital
- Video a means to say goodbye to loved ones

One use of technology not previously on the digital roadmap for many healthcare organisations has been applying video technologies to allow friends and family to remotely visit loved ones in hospital.

Our research questioned respondents about their comfort level with visiting friends and family in hospital in person, and around the potential for using video technology as a virtual alternative.

Fewer than three in 10 of our respondents said they were comfortable with visiting someone in hospital – many of which were only fairly comfortable,

whilst a majority of people (55%) said they were fairly uncomfortable or extremely uncomfortable.

Conversely 78% of the people who undertook the survey were either fairly or extremely comfortable with using video technology to visit their friends and family, with only a small minority – 7% not very, or not at all comfortable with this alternative method of communication.

More than four out of five respondents (82%) now thought it was fairly or extremely important for their hospital to allow video technology to enable virtual visiting.

A means to say goodbye

Healthcare professionals who took part in our research also said video now offered an important alternative. In our anecdotal discussions one professional said: “Without video contact through iPads in ICU so many people wouldn’t have been able to say goodbye. That’s pushed everyone to re-think their reluctance around using technology.”

Visionable commentary

Visionable has technology to support virtual visiting and could roll this out as across integrated care systems in the NHS. This is important in enabling patients and their loved ones to stay in contact in an easy and secure way at what could be a difficult time.

This is vital in Covid-19 restricted times, when people can't accompany their relatives in hospital when they might be going into hospital for a procedure. Parents have been unable to accompany their partners during neonatal appointments and even births. Technology could be a means to alleviate some of these challenging situations for patients.

“Without video contact through iPads in ICU so many people wouldn't have been able to say goodbye. That's pushed everyone to re-think their reluctance around using technology.”

5. Patient concerns – from security to showing body parts

New communications technologies have not been met without concerns – some cultural, some technological.

Key findings:

- Data security seen as a risk for more than half of patients
- Women more concerned about showing body parts
- Patients concerned about making mistakes

Data security

Respondents told us that data security remained a concern for new communications technologies being used in healthcare.

More than half – 54% – said that data security was a potential concern, whilst a very similar amount – 53% – were concerned about making mistakes through technology. Those aged 55 and above were particularly concerned – with nearly two thirds of respondents in this age group expressing hesitation about such risks.

Showing body parts

A large proportion – 45% of respondents – said they were less inclined to show body parts through communications technology than in person. Women were more concerned than men, with more than half of women saying they would be less inclined to show body parts, compared with four in 10 male respondents.

A higher proportion of women to men were also concerned about feeling isolated and about technologies causing additional anxiety of patients – 44% of female respondents, compared to 37% of male.

Losing human contact

However, nearly six in 10 people – a total of 59% of respondents – said they were concerned that they would “lose human contact” as a result of communications technology. This had risen from 52% of respondents in our first research wave.

People on low and mid incomes were the most likely respondents to agree with this statement, and with statements

about healthcare becoming “too technical” or using communications technology for healthcare.

In detail:

- Concern about losing human contact was expressed by 49% of people on high income, 61% on mid income, and from 60% on low income.
- Concern about healthcare becoming too technical was expressed by – 33% of people on high income, 42% of people on mid income, and from 48% of people on low income.

Concerns with video

Attitudes to some of the drawbacks specifically associated with video consultations with a GP or specialist doctor remained similar across both waves of research.

Respondents’ biggest concerns as of May were that doctors might not be able to fully examine a patient (64%), that patients could encounter difficulties using technology (54%), doctors might miss something vital (50%), and that connections could be unreliable (45%).

Visionable commentary

Having technology that is secure and certified as secure is important for sharing highly sensitive patient images. One challenge highlighted by the research is that women are concerned about showing body parts. This is a reality in a physical setting for many women. Being asked to do the same in an online world could be even more of a challenge. Healthcare providers need to have confidence in the security of their systems, and to be able to relay that to their patients.

In terms of other very valid concerns from patients raised in this research, for example the concern of important things being missed, it is key to stress that video does not replace the need for effective and thorough diagnostics where this is required, and there are circumstances where face to face is still the way to go. This is about using video in appropriate scenarios and as an appropriate part of the patient’s pathway to improve efficiency and speed of access to healthcare.

6. What the professionals think

As part of our research we spoke to clinicians both before and after the spring 2020 outbreak of coronavirus in the UK in a series of qualitative interviews.

Clinical views of video in a post Covid-19 world

We conducted hour long interviews with seven busy clinicians in our May research. Though this sample was small, it provided useful anecdotal insights from the frontline as to the value of video and virtual meetings in maintaining and supporting clinical services, and the challenges that still need to be overcome in an NHS that will undoubtedly be more reliant on remote technologies into the future.

Key findings:

- Remote consultations 'the only way to clear the backlog'
- MDTs effective and easy when conducted virtually
- Challenges to overcome – trust, confidentiality, physical reassurance, technology (hardware)

Multi-disciplinary team meeting and cross hospital working

We were told that MDT meetings have been surprisingly effective and easy, saving time and money that would be spent travelling. We were also told that dominant consultants remain dominant, even virtually.

Feedback from a specialist hospital also suggested staff have also found it much easier to share information and expertise with smaller hospitals.

Clearing the backlog

Telephone and virtual patient consultations will be the only way to clear the post-Covid backlog and try to catch all the 'missed' diseases, according to one clinician we spoke to.

'Better hardware or I'll go to John Lewis'

Some respondents urged their hospital to invest in better equipment, training and connectivity. One senior clinician told us: "I've told my team that the first thing we are going off to buy is a

decent, large screen, with proper mic and webcam and a decent space to put it in. If I have to go to John Lewis and buy it myself I will.”

Confidence challenges

Virtual consultations did raise concerns that still need to be overcome. One clinician told us that it was sometimes difficult to explain more complex procedures and conditions to patients. Heart problems, for example, are hard to explain remotely and especially to explain kindly.

Maintaining confidentiality could also be a challenge. One healthcare professional

told us: “I’m not convinced we could move the whole thing online. Confidentiality is key, and there’s no clear sense of who else might be in the patient space. I need to know that it’s safe to talk to someone and I can’t see their home and who’s listening in, especially with video consultation. It feels a bit public sometimes.”

Professionals also said they missed the “laying on of hands” – either for comfort or for investigation, which some said made it harder to build engagement and trust. One interviewee said: “If my patient trusts me, and believes me, the relationship we have through their surgery and treatment is more positive, even in terms of outcome.”

“I need to know that it’s safe to talk to someone and I can’t see their home and who’s listening in, especially with video consultation. It feels a bit public sometimes.”

Conclusion

Healthcare professionals: we undertook seven one-hour qualitative depth interviews with healthcare professionals who have been using online and telephone technology to communicate with patients during Covid-19.

For the public element of our research, each respondent took part in a 15 minute online survey, recruited via an online panel.

Wave 1 (W1)

Fieldwork was conducted from 14th – 21st February 2020. A total of **1,516** interviews were achieved

Wave 2 (W2)

Fieldwork was conducted from 18th - 21st May 2020. A total of **1,520** interviews were achieved.

Quotas were set during fieldwork on to ensure a nationally representative sample of UK adults was achieved.

Profiles between W1 and are W2 therefore similar and comparable.

Gender

W1: 49% | Male, 51% female
W2: 49% | Male, 51% female

Age

Under 35 yrs
W1: 29% | W2: 30%
35-54 yrs
W1: 35% | W2: 35%
55+ yrs
W1: 36% | W2: 35%

Location and setting

North
W1: 34% | W2: 34%
Midlands
W1: 30% | W2: 30%
South
W1: 36% | W2: 36%
City/suburbs
W1: 49% | W2: 50%
Town
W1: 31% | W2: 30%
Village/rural
W1: 19% | W2: 19%

National Readership Survey social grades

ABC1 W1: 54% | W2: 55%
C2DE W1: 46% | W2: 45%

Income

High income W1: 11% | W2: 12% (Av. £89k)
Mid income W1: 45% | W2: 50% (Av. £38k)
Low income W1: 38% | W2: 32% (Av. £16k)

