

Near Far Wherever You Are: The Role of Video Consulting in Palliative Care

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The covid-19 outbreak has been a source of undeniable hardship for many healthcare systems globally, including the UK's National Health Service (NHS). For clinicians, maintaining the safety of vulnerable patients became a more complex endeavor due to the added risk of virus transmission. Thus, the government adopted strict social distancing and shielding measures to facilitate infection control and ensure those who were vulnerable due to a high morbidity and mortality risk were protected. Consequentially, many patients and their families were left feeling isolated. With physical safety taking priority, the traditional methods used to conduct consultations were no longer considered safe. To ensure healthcare continuity, clinicians from all specialties began developing novel ways to communicate with patients via video conferencing platforms. These methods reflected an increasingly widespread reliance on telecommunication among the public as a result of the pandemic. Thus, from the rubble rose an influx of innovation, which helped shape a new era of digital healthcare.

In partnership with the CWTCH project and Welsh Government, TEC Cymru helped introduce the NHS Wales Video Consulting Service using an approved communication platform (Attend Anywhere) within all seven Health Boards and trusts across Wales. Among the services utilizing video consultation was palliative care. Much like other specialties, the covid-19 outbreak led to a vast acceleration in uptake and implementation. The NICE guidelines stipulate that end of life and dying patients have the right to supportive and palliative care, regardless of circumstances [4] and video consultations helped provide this populations with access to healthcare during the pandemic. However, video consultations have also been used to aid communication between hospitalized patients and their families.

Severe illness and life challenges are understood to have an enormous impact on the family unit; influencing each family member's health and well-being [5]. With 100% of palliative care family members rating the video consultation quality as excellent [1], it is important that Palliative Care clinicians are encouraged to use alternative means of communication, like video consultation, to maintain interaction between clinicians, sick relatives and family members throughout periods of hospitalization. The argument for the importance of communication continuity was reinforced in the qualitative responses, which inferred that family members greatly valued the opportunity to see their loved ones via digital means:

"This is a really good alternative for appointments which helps me to feel safe at this time"

(Palliative Care, family member)

"[An] excellent alternative [to a face-to-face conversation]"
(Palliative Care, family member)

What place does Video Consultation have beyond COVID-19?

Other specialties have demonstrated a wealth of benefits related to video consultations which will remain applicable within a post-social distancing landscape. Namely, promoting patient and clinician

convenience, reducing travel emissions and facilitating remote working, among many others. A conversation with a Clinical Director and Consultant in Palliative Medicine, Aofie Gleeson (Aneurin Bevan University Health Board) indicate that further investigation would portray a similar message within community care and outpatient palliative care services:

"I am a big advocate of Attend Anywhere...From community/outpatient point of view it has helped us to support patients in a very timely fashion...where there is a huge geographical area to cover, it's very helpful to be able to set up an attend anywhere link."

Although these findings were representative of the communication between clinician and patient, many of these benefits are applicable for family and patient communication also. For example, in other settings such as care homes, video consultation provided residents with the ability to speak and visually connect with family members living locally and abroad, celebrate birthdays and attend virtual funerals [2]. There had even been reports of residents meeting their great-grandchildren for the first time via video consultation. In synthesis, these examples begin to build a picture of the prospective advantages of using video consultation within palliative care and ITU services whose purpose could extend to linking up families and their loved ones irrespective of logistic and pandemic-related barriers.

But what is wrong with using a telephone?

Nothing. An in-house evaluation by TEC Cymru recommends a blended approach [3]. Video consultations are often thought of as a "tool in the toolbox" (Clinician Quote), meaning that the collaborative decision to utilize video consultation is one made with the needs of the patient, clinician and service in mind. However, video consultation can often provide an opportunity to engage and communicate via non-verbal cues, enhancing the quality of the interaction.

In conclusion, video consultation is an adaptable, versatile tool suitable not only to provide healthcare from afar but also to bridge the gap between families and vulnerable patients. With such promising preliminary outcomes, palliative care clinicians and families must become aware of video consultation's potential benefits so that it can be used to their advantage and improve the patient experience.

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The guarantor affirms that this manuscript is an honest, accurate and transparent account.

Ethical Approval

TEC Cymru use a Quality Improvement (QI) methodology to evaluate NHS Wales services, in that typically no ethical approval is required. However, TEC Cymru did obtain full ethical approval and risk assessments from Aneurin Bevan University Health Board Research & Development combined permissions and risk committee (R&D Reference Number: SA/1114/20).

Contribution Statement

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