The stakeholders views on telemedicine in palliative care

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Background

- Changes in demography
  - More elderly and old people > multi-morbidity, frailty
  - Most people want to die at home…
  - Increasing need for specialized palliative care at home
    - rural areas!
  - Telemedicine could provide access to regular care by specialized palliative care teams (SPCTs) for a higher number of patients
  - Lack of the patients and relatives views on the use of telemedicine in palliative care
“Palliative care is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.”

World Health Organization (WHO)
Total Pain model

Physical

Psychological

Spiritual

Social
Definition: telemedicine

“The delivery of health care services, where distance is a critical factor, by all health care professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation, and for the continuing education of health care providers, all in the interests of advancing the health of individuals and their communities”.

adopted by the World Health Organization (WHO)
Part of a bigger project in South Jutland:

”To make it easier to reach each other”

Cooperation between the regional Hospitals and the four communities of South Jutland
To explore the perspectives of all involved stakeholders on the use of telemedicine in palliative care

This will form an important knowledge base for the future implementation of telemedicine with respect for the stakeholder’s needs and views
Study design: Mixed-methods

1. **A qualitative pilot-study** with telephone interviews of patients and relatives about their views on the use of telemedicine and video communication in palliative care (baseline)

2. **An interventional study part** with the use of telemedicine to improve communication between a SPCT/hospital palliative care ward, patients, their relatives and primary health-care-professionals (including quantitative data from the Danish palliative care database)

3. **A qualitative inquiry with in-depth interviews and focus-group discussions** about the experiences of different stakeholders (patients, relatives, health-personnel from primary care and members from SPCTs) with the use of telemedicine within the field of palliative care

Bollig G, Brink A, Skjøt-Arkil H, Ungermann Fredskild T, Bachmann KH, Sørensen TL. The stakeholders' views on and experiences with the use of telemedicine to improve palliative care in rural areas – a study protocol for a mixed methods study. Research 2017;4:2409
Inclusion criteria intervention part

1. Patients and relatives who want to try telemedicine
2. Patients with an ”open admission”
3. Patients who are capable to participate
   * Physically
   * mentally
4. Internet connection in the patients home

Implementation via a “bring your own device” (BYOD) approach

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Three different types of telecommunication approaches used in the project

1. Patient at home
   Nurse home care
   Video consultation (scheduled)
   Palliative Care Team
   South Jutland Hospital

2. Patient at home
   Nurse home care
   Video consultation (acute problems and emergencies)
   Palliative Care Team
   Nurse - Palliative Care ward
   South Jutland Hospital
   or
   Palliative Care Team
   South Jutland Hospital

3. Nurses and physicians primary care
   Video meeting and education
   Palliative Care Team
   South Jutland Hospital

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Telemedical consultation with the SPCT (scheduled)
Telemedical consultation with the SPCT or the palliative care ward (acute)
Tele-education for health care professionals
telephone interviews of patients and relatives about their views on the use of telemedicine and video communication in palliative care (baseline)
Experiences so far
patients view - Pros

If you don’t remember to
god it could be an advantage to
see people

Would be easier for
all parts. Saves some
time for me to
come to you or the
other way round.

More personal
contact. You can
see the other
person and the
facial
expressions/mimic.

You can see the pills, that I
am talking about.
Experiences patients view - Cons

Not for me because I can’t see and have to concentrate too much

Some days I’m so tired that I ain’t sure if I could concentrate enough for telemedicine.

He normally walks around in the house or garden, when he talks to you. He wouldn’t be able to do that.

For me it is important to be able to reach somebody and not to wait for consultations.

For me it is important to be able to reach somebody and not to wait for a consultations.
Not knowing which equipment to use
Technical problems (sound/picture)
Technical support vs. Nurses – different cultures
Internet connection
Cognitive challenges
Thank You very much for your attention!

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