How to Use Video Consultations: Secondary Care Services

1 Set Up — Prepare yourself

Have the VC toolkit on hand:
digitalhealth.wales/tec-cymru

Watch the VC videos:
bit.ly/wales-vc-service

Set Up — Prepare patient

Send URL link & information sheet to patient

New Tab
nhs.attendanywhere.com
Bookmarks

2 Connect — Make video link

Check video & audio
Can you hear/see me?

Confirm patients identity
- ✅ Name
- ✅ Date of birth
- ✅ Address

Check where patient is
Where are you right now?

Take patients telephone number

Check patients privacy

3 Get Started — Initial assessment of patient

Check in on patient
How are you today?

Confirm what the patients appointment is for today?
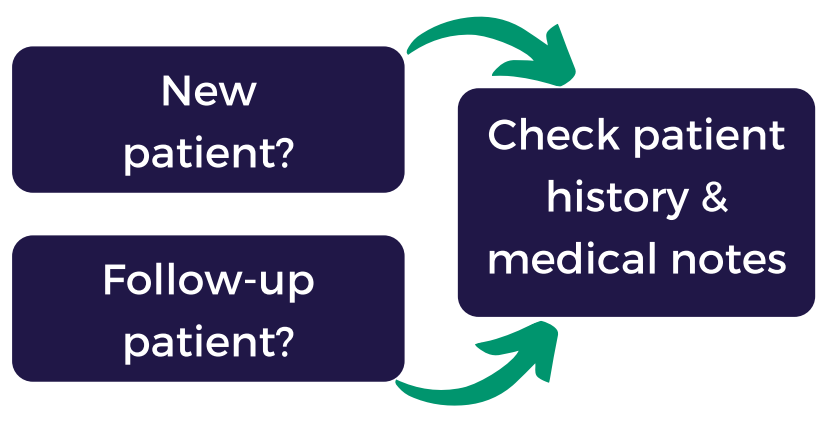- Assessment
- Advice
- Prescription
- Review
- Other

Check the patient is ready to start VC
Are you happy to proceed with the VC?

4 History — Patient history and risk factors

- New patient?
- Follow-up patient?

→ Check patient history & medical notes

Always be Mindful & Observe
- ✅ Are there any risks?
- ✅ Safeguarding issues?
- ✅ Consent & Capacity?
- ✅ Confidentiality?

5 Video Consultation (VC) — Conduct VC in the best possible way you can

Over VC, look out for signs relevant to speciality & condition

Over VC, look out for functions relevant to speciality & condition

Patients may be able to take their own measurements if they have instruments at home
- Temperature
- Blood Pressure
- Pulse
- Weight & Height
- Other

ALWAYS REMEMBER:

MAKE your own clinical judgements and **ACT** in your own professional codes as you would do in-person.

VC is just a different **MEDIUM** - everything else remains the same.

Define your own clinical criteria based on VC workflow.

6 Decision & Action — Provide clinical advice/support, advise next steps & documents outcomes

Document patient notes in usual way

- Clinical Outcomes
- Referrals/follow-up appointment
- Actions Taken

And remember, to document patient preference on future VC use

WWW.DIGITALHEALTH.WALES/TEC-CYMRU

This infographic is an adapted version of the BMJ COVID-19 VC graphics at:
www.bmj.com/infographics
www.bit.ly/BMJremcon

Appropriateness & Suitability

VC may be suitable for:
- Chronic disease reviews
- Medication-related consultations
- Counselling & similar services
- Dietic advice, speech therapy & some physiotherapy
- 'Duty Doctor' or 'Duty Nurse' triage

Any condition in which the 'trade off between attending in-person & staying at home' favours the latter.

For example, frail, older, multi-morbidity or terminally ill patients

VC should not be generally used for:
- Potentially serious, high-risk conditions
- When a physical examination cannot be deferred
- Co-morbidities affecting patients ability to use technology e.g. confusion or serious anxieties
- Deaf or hard of hearing unless can lip-read or use chat function

Red Flags — Does the patient...

Present with any high-risk concerns that may be worsened by VC?

Have any safeguarding issues that may be worsened by VC?

Lack capability to provide participation consent?

NEED to be physically assessed?

VC Workflow

Develop:
- VC clinical triage
- VC codes & templates
- VC contingency plans
- In-person arrangements (e.g. prescriptions)

Identify:
- How VCs will be booked
- How VCs will be documented
- How patient links will be sent