



NHS Wales Video Consulting Service



Using Video Consultations in Primary Care: A Toolkit for Clinicians

The NHS Wales Video Consulting Service is brought to you by:



GIG
CYMRU
NHS
WALES | Gwasanaeth
Gwybodeg
Informatics
Service



Table of Contents

Section 1: Introduction	3
What is the NHS Wales Video Consulting (VC) Service?.....	3
What is Attend Anywhere?.....	3
Section 2: Using the NHS Wales Video Consulting (VC) Service	6
Process for using video consultations	6
Information Governance and GMC Guidance	7
GMC advice on remote consulting	8
Section 3: Setting up the NHS Wales Video Consulting (VC) Service.....	8
Service Set up	8
Technical Set up.....	9
Clinical Set up	10
APPENDIX.....	12
Patient User Guide.....	12
Clinician User Guide.....	13
Types of Appointments and Clinics	28
Attend Anywhere – Call Screen Guide.....	29
Attend Anywhere – Troubleshooting Guide.....	29
Example of the Patient Information Sheet.....	29
Poster - What is NHS Wales Video Consulting Service	29
Poster - How do Primary Care Video Appointments Work for Patients?.....	29
Poster - How do Video Appointments Work in Primary Care?	29
Poster - Receptionist & Front Line Staff Information for Video Consultations	29
Suggested Scripting for Primary Care Clinicians Using Video Consultations.....	29
Frequently Asked Questions and Answers	29
Authors and Additional Resources.....	30

The NHS Wales Video Consulting (VC) Service offers video appointments to primary care practices in Wales via a communication platform called 'Attend Anywhere'. This toolkit explains how the VC Service and Attend Anywhere can be used in primary care to its best ability.

Terminology Used in Toolkit:

- **VC Service** will be the named used throughout to refer to the National Video Consultation Service being offered by Welsh Government to primary care practices in Wales.
- **Attend Anywhere** will be the name used throughout to refer to the communication platform to deliver the video appointment.
- **Primary care** will be the term used to refer to all types of primary care practices, as well as 111 and the out of hours services.
- **Patients and clinicians** will be the terms used to refer to all types of patients, and all types of primary care practice staff.

Section 1: Introduction

What is the NHS Wales Video Consulting (VC) Service?

The NHS Wales Video Consulting (VC) Service will be rolled out to offer healthcare services in a safe and secure way to see patients via a video appointment, rather than seeing them in-person. The VC Service is delivered via a communication platform called 'Attend Anywhere'.

What is Attend Anywhere?

- Attend Anywhere is a web-based communication platform that allows video appointments to take place between patients and clinicians.
- These appointments can take place anywhere, such as at work, school or home.
- Attend Anywhere is accessible via any type of device that has Internet access e.g., smart phone, tablet, Laptop or computer with a webcam running Chrome or Safari browsers to use it.

What are the Key Features of Using Attend Anywhere in Primary Care?

- No installation or downloads needed – the service is web-based, so easy to use.
- It is free for patients to use (except if using mobile data).
- No recording of the video appointment is possible.
- Safe and secure virtual 'Waiting Rooms' and 'Meeting Rooms'.
- Confidential and anonymised.
- Automatically tests the call for video and audio, to check the device is suitable.
- Automatically asks the patient to accept the camera and microphone for easy access.
- Comparable treatment, care and support as an in-person appointment in many ways.
- Ability to send the patient appointment directly from the waiting area.

Using the VC Service in Primary Care

The overarching goal of the VC Service in primary care is to mimic as close as possible the way appointments are delivered in practice, without the need to physically attend an in-person appointment. It also allows practices to respond effectively to outbreaks of disease and adverse weather conditions where face to face appointments may be impossible or inadvisable.

Video appointments are one type of healthcare delivery method used to connect clinicians with their patients, alongside a range of other methods such as in-person, telephone and other computer-based approaches. Compared to other healthcare delivery methods, video appointments enable patients to attend appointments without the need to attend in-person yet allow the patient and clinician to communicate face-to-face (virtually). Video appointments are comparable to in-person appointments in that they can deliver safe, secure and patient-centred care, but are generally more superior to a simple phone call appointment or other computer-based methods. Video appointments can offer patients the convenience of a home, school or work appointment, but at the same time offer virtual interaction, build rapport and can see visual cues which are all very important components of healthcare.

Video appointments are beneficial to the patient for a wide range of reasons. For example, they can:

- Improve accessibility,
- Improve patient choice,
- Reduce transport or travel difficulties,
- Produce savings on time, travel and carbon footprint,
- Reduce time off work, school and other responsibilities,
- Reduce additional harm or risk to physical or mental health e.g., by leaving home, or excessive travel.

Video appointments can also support the work of primary care clinicians in many ways. For example, they can:

- Save clinicians time and travel attending home or other residential visits.
- Enable clinicians to work from their own home when needed, improving work-life balance
- Allow clinicians to link up with other professionals and run multidisciplinary meetings and appointments if needed.

What Primary Care Clinicians Say About Using Video Consultations:

“Attend Anywhere is really simple to use. The quality of the call is excellent, and it is great to know that I will be able to use when I need to” (GP Practitioner).

“This has great applications for routine appointments... as keeps face to face component whilst keeping patients safe” (GP Practitioner).

“Attend anywhere is intuitively easy to use by clinician & patient” (GP Practitioner).

What Primary Care Patients Say About Using Video Consultations:

“That was great! Very beneficial and helpful. Would happily do it again” (Parent of a patient).

“Both picture and sound quality were great on my end” (Patient).

“It was new for the doctor and myself so there were a few hiccups but once up and running it was great. It was good to see the doctor you’re speaking to which obviously you don’t get with a telephone consultation. It won’t be suitable for all patients and conditions” (Patient).

“It was really helpful for the call and the doctors time, thank you” (Patient).

Welsh Government Plan in Primary Care (COVID-19)

The Welsh Government strategic aim is that platforms like the National video consultation service will eventually be accessible across Social Care, Primary Care and Secondary Care settings across Wales. The platform will offer a consistent and agile solution for both professionals and patients.

TEC Cymru, a Welsh Government sponsored programme hosted within Aneurin Bevan University Health Board, has piloted the video consultation solution called Attend Anywhere. The pilot has received good feedback and the platform was identified as suitable to be scaled nationally. Welsh Government has asked TEC Cymru to start rapidly upscaling the project to deliver a national video consultation service for all GP practices in Wales.

There are two purposes of the rollout:

- 1) To offer face-to-face video access with GPs for people who are self-isolating from Covid-19. This will help to protect front line staff from infection alongside the 111 online symptom checker, PPE for GPs and telephone consultations. Having more remote consultations will also reduce potential contamination between patients who attend GP practices in person.
- 2) A Healthier Wales sets out a commitment to deliver health services to the citizens of Wales in new ways and closer to home. The delivery of an option to consult with GPs by video aligns with these long-term strategic aims.

National video consulting service will be used to reduce exposure to coronavirus by enabling both patients and clinicians to consult while in isolation. It can also increase organisational resilience by protecting the workforce and enabling support to be provided from different geographical locations.

Scenarios where video consulting may be beneficial include:

- For those with flu like systems contacting their GP or 111 services, where a video consultation can provide additional clinical information over and above what can be achieved by phone.
- For patients with confirmed coronavirus or quarantined due to contact with an infected person to have consultations at home to negate a home visit or attendance at clinic.
- To continue services while reducing the number of people coming into healthcare premises, who may be unknowingly carrying coronavirus.
- For patients in hospital with coronavirus, in situations where non hands-on care could be given by video to reduce the number of clinical staff being exposed to infection risk.
- For staff quarantined due to exposure but who are fit to be able to continue working.
- To enable additional health care support to be provided remotely to an area with a significant outbreak of coronavirus (including out of hours, acute and primary care).

Section 2: Using the NHS Wales Video Consulting (VC) Service

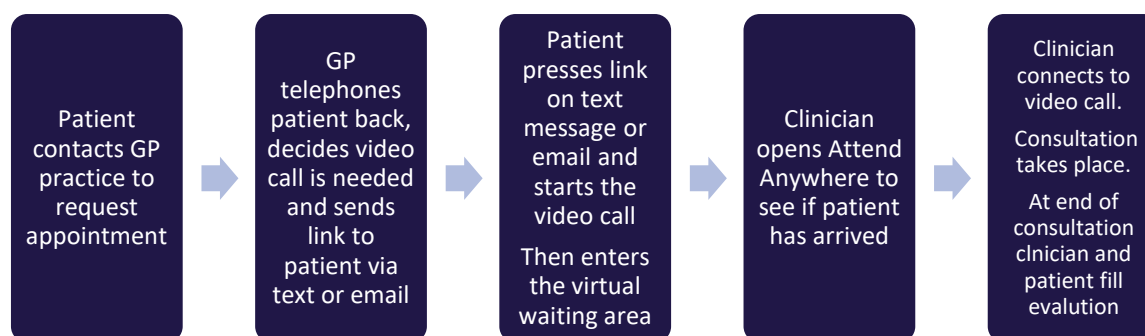
The service may be used in a number of different ways depending on operational and clinical needs. It should be adapted to fit each practice's existing systems

Process for using video consultations

Options include:

Adjunct to telephone appointments of patients

Patients will make appointments using their usual GP surgery process (e.g. phoning the practice reception). After providing some information to receptionists they will then be telephoned back by the GP. If the GP feels additional information is needed that can be gained by a video consultation, the patient will be given a VC appointment link sent by text, email or verbally. Each GP practice will have its own virtual waiting room. Patients will enter the individual GP practice's virtual waiting room directly via their link to continue the consultation. Patients will be held in the virtual waiting room until a clinician connects the video call.



Replacement for planned face to face appointments of patients

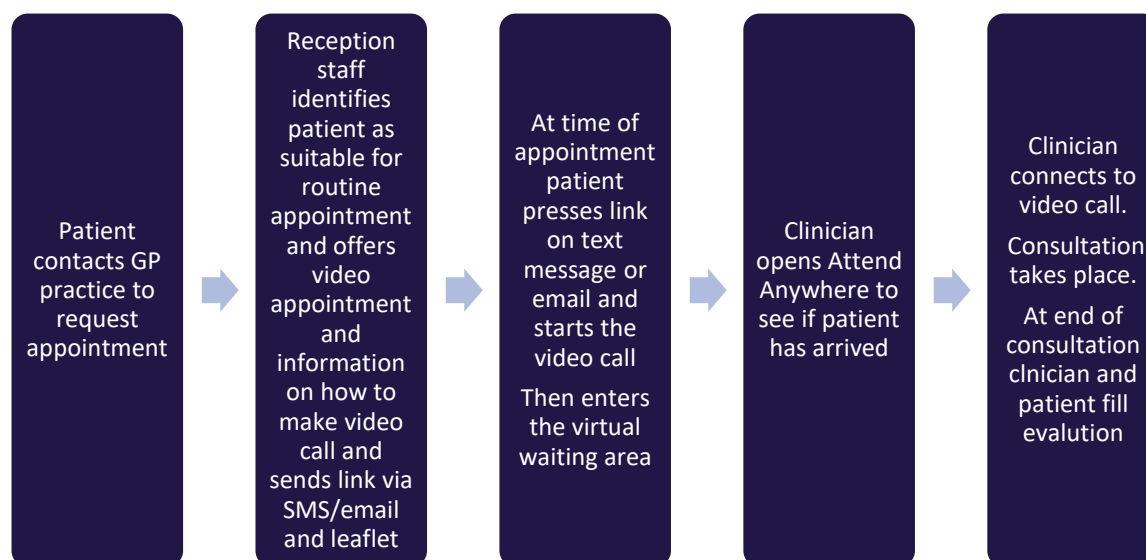
Planned review e.g. chronic disease management, medication review, follow up of patients etc.

Patients will make appointments using their usual GP surgery process (e.g. phoning the practice reception). The GP practice will retain control over the number of appointment slots offered, and the times of appointments.

If a video appointment is considered appropriate, the patient will be given a VC appointment link sent by text, email or verbally along with a patient information sheet. Each GP practice will have its own virtual waiting room. Patients will enter the individual GP practice's virtual waiting room directly via their link at the time of their appointment.

Patients will be held in the virtual waiting room until a clinician connects the video call. This means that if a patient did call into Attend Anywhere in the hope of being seen without an appointment, the call is not answered unless the practice chooses to answer.

Multiple clinicians can consult simultaneously from the same Attend Anywhere waiting room at any one time: patients are listed by patient name and date of birth, so the clinician would select the correct patient from the list.



Examples of Attend Anywhere Consultations

Typically, clinical staff will be using Attend Anywhere in one of two ways:

- (1) To work from their clinical base to consult with patients remotely or
- (2) To enable remote working themselves.

If professionals are to consult remotely, arrangements will need to be made for appropriate access to clinical information.

Information Governance and GMC Guidance

Attend Anywhere has been procured nationally by the Welsh Government.

NHS Wales has undertaken and signed off the Data Protection Impact Assessment (DPIA) documentation for Attend Anywhere. The Attend Anywhere platform does not record the content of a video consultation. The personal details (name, date of birth and phone number) entered into the login page by patients to gain access to the virtual waiting room are used by clinicians to select the correct patient for consultation, and these details are deleted from the Attend Anywhere platform following the consultation.

Video consultations are captured by the GMPI Scheme provided that the General Medical Practice (GP practice) staff are undertaking NHS 'primary medical services' as defined in The National Health Service (Clinical Negligence Scheme) (Wales) Regulations 2019 (defined below). Locum GPs need to apply to NWSSP to be included in the All Wales Locum Register (AWLR) if they want to access the scheme for GMPI.

Primary medical services: health services provided under a contract, arrangement or agreement made under or by virtue of the following sections of the NHS (Wales) Act 2006:

- (a) Section 41(2) (primary medical services);
- (b) Section 42(1) (general medical services contracts);
- (c) Section 50 (arrangements by Local Health Boards for the provision of primary medical services).

Please follow the link to the [General Medical Practice Indemnity FAQs](#) for more information.

GMC advice on remote consulting

The General Medical Council provides guidance upon when remote consultations (via telephone, video or online) may be appropriate [Remote Consultations- General Medical Council](#)

Section 3: Setting up the NHS Wales Video Consulting (VC) Service

Service Set up

Managing the VC Service

- Within your service you will need to identify a lead clinician who will decide how best to set-up, use and manage the VC Service and this person will be the 'point of call' for your service and its use of video appointments.

Setting a Clinical Criteria

- Your service will need to define and agree to a clinical criteria for video appointments and the suitability of appointment types.
- Following this agreement, a template for triage/suitability would need to be developed and provided to the person(s) in charge of making video appointments e.g., a receptionist.

Making Appointments

- Your service will need to identify how video appointments will be made, and who will make and deliver these appointments?
- You will need to identify how appointment links and an information sheet will be sent to patients? e.g., verbally or via text or email.
- You will need to identify how appointment slots will be offered, documented and given to the delivering clinician.

Managing Appointments

- Your service will need to decide how the video appointments will be managed?
- Your service would need to have a contingency plan for possible scenarios such as, if appointments are running late, how will patients be notified? Or what is the process for patients who turn up in the waiting room without a scheduled appointment? and so on.

Clinical Space/Location

- Your service will need to identify how video appointments will be set-up. For example, you will need to think about factors such as the room lay-out (e.g., well-lit, well-positioned), confidentiality issues and its clinical appropriateness.
- Your service will need to consider how clinical information is later documented.

Additional considerations

- If the picture definition is not good enough to allow accurate visualisation and identification of skin lesions your service needs to decide how to obtain this additional information.

- It is important that patients are able to receive patient information leaflets as they would in a standard consultation. Your service needs to decide the best mechanism for communicating this with them. For example, you could email them.

Technical Set up

What is needed to use video appointments in primary care?

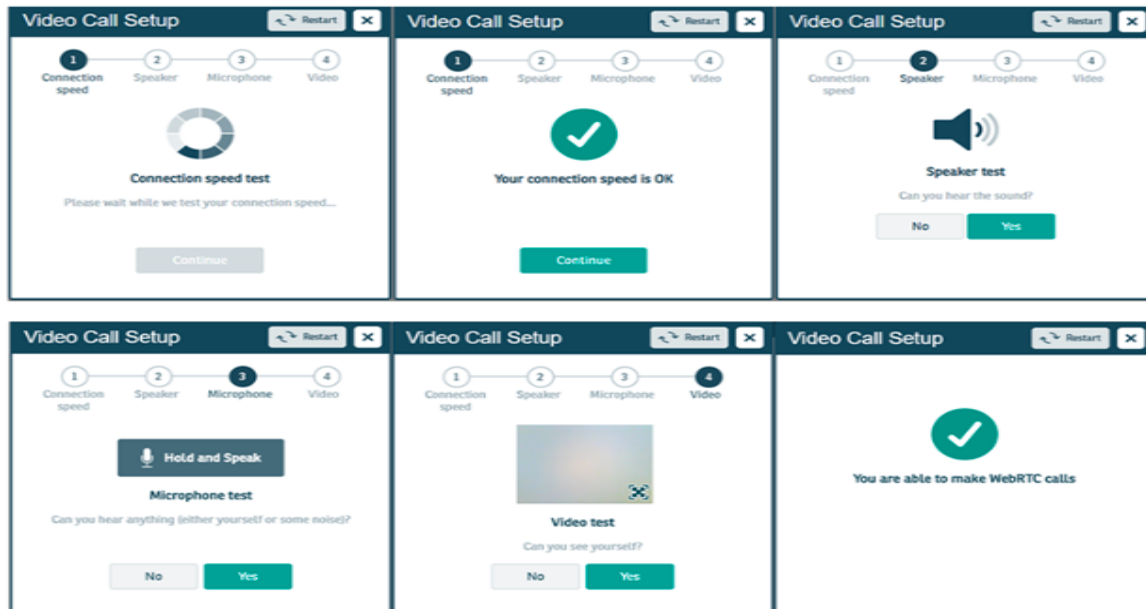
For both clinicians and patients, the following FOUR steps needed:

1. A reliable internet connection (broadband, WIFI or mobile data)
2. A device for making a video call (smartphone, tablet, laptop, computer with webcam)
3. A Chrome browser or a Safari browser on the device (depending on device type) which is updated to its most recent settings (see diagram below)
4. A private, and well-lit room or space.



Test the Call

There is a 'video call set-up test' that checks your web browser, speed of internet connection and your device (to check your camera and microphone are working). To run this test, you will need to press the button 'test call' button from your Attend Anywhere Management page, or any web page. Depending on the device you are using, you may see this test conducted in 4-stages: connection, speakers, microphone and video. Some devices may be less.



Once tested, and if successful, then you should be able to proceed to making a video call. If the test indicates any problems, please refer to the [Attend Anywhere troubleshoot document](#), if you are joining from a practice in Aneurin Bevan UHB.

or visit: <https://wales.nhs.attendanywhere.com/makingcalls> if you are joining from a practice in any other Health board

Clinical Set up

Setting up the Appointment: Signing in

The video appointment is a simple set-up, although this differs slightly for the clinician and for the patient.

For the Clinician

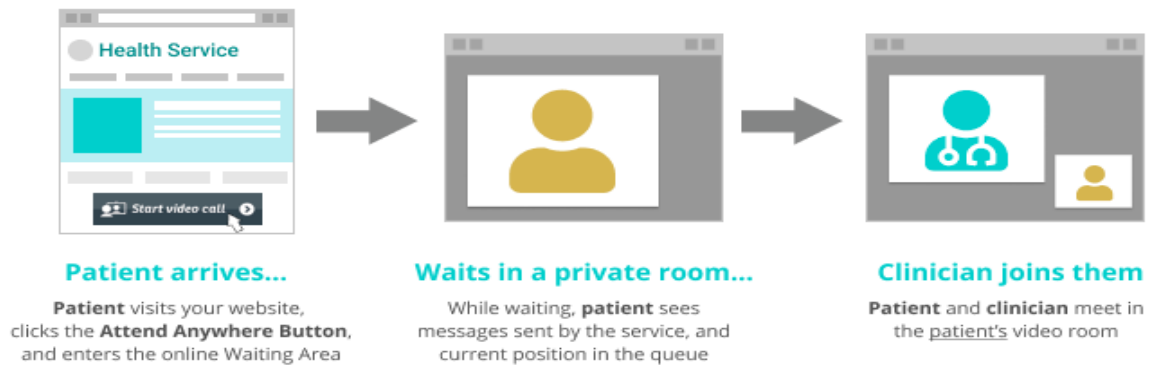
The clinician will be issued their own log-in details when signing up to Attend Anywhere and will be asked to develop a password. These log-in details will be used every time the clinician conducts a video appointment. This will not change.

For the Patient

The patient will be sent a unique Internet browser link (URL) from their primary care provider when they are offered a video appointment. This can only be used for a scheduled appointment.

The 'Joining the Call' Process

The patient link will allow the patient to enter a virtual waiting room on a scheduled date and time. When the patient enters the virtual waiting room (using the link) the clinician will be alerted to say they have a patient waiting. Once the clinician is ready, they can enter the waiting area and can join the call, and the appointment between the patient and clinician can begin.



The Video Appointment Interaction

- The clinician is to introduce themselves to the patient.
- To ask the patient if they can adequately see and hear.
- Ask the patient to confirm their name, date of birth and address.
- The clinician is to explain what is going to happen during the video appointment.
- Confirm patient's left and right side on VC to support physical assessment*.
- Start the video appointment, conduct the appointment as usual.
- Document the appointment details and outcomes in the patient record as usual.

* Prior to starting the consultation make sure of the correct identification of left and right on the person. You can do this by asking the patient to hold up anything with writing on that you can read. If you can read the writing normally, they are orientated to you as if facing you in real life. If not, their camera may have reversed them.

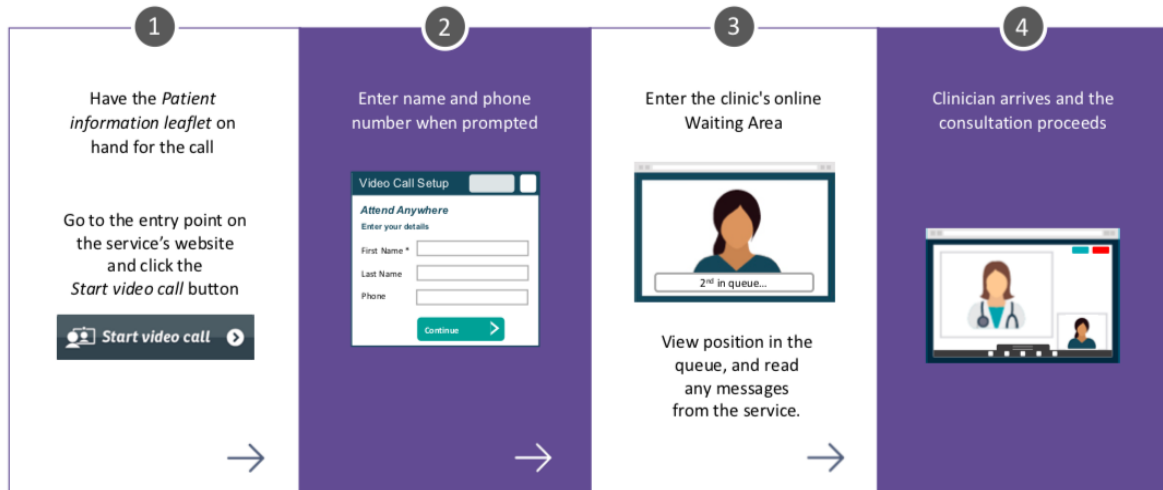
APPENDIX

Patient User Guide

Follow this link to a video on [How to use Attend Anywhere for patients \(Welsh subtitles\)](#)

Follow this link to a video on [How to Use the NHS Wales Video Consulting Service – for Patients](#)

You will be asked to enter a few details (name, date of birth and a contact telephone number) before you can join the call. These details are only used to allow the clinician to identify the right person is joining the call. After the video call, these details will be deleted.



Before the call begins, you will see information similar to the list below, however, this may alter depending on your GP practice service.

Example of information presented to callers before they enter a call to the Waiting Rooms:

ONLY PROCEED WITH YOUR VIDEO CONSULTATION IF IT HAS BEEN ARRANGED WITH YOUR DOCTOR OR CLINIC/SURGERY.

- This is NOT an emergency service. In an emergency phone 999.
- This call is not being recorded.
- Everyone attending the consultation with you will be introduced.
- Your video will open in a new window
- If you experience any issues, click the Refresh button.

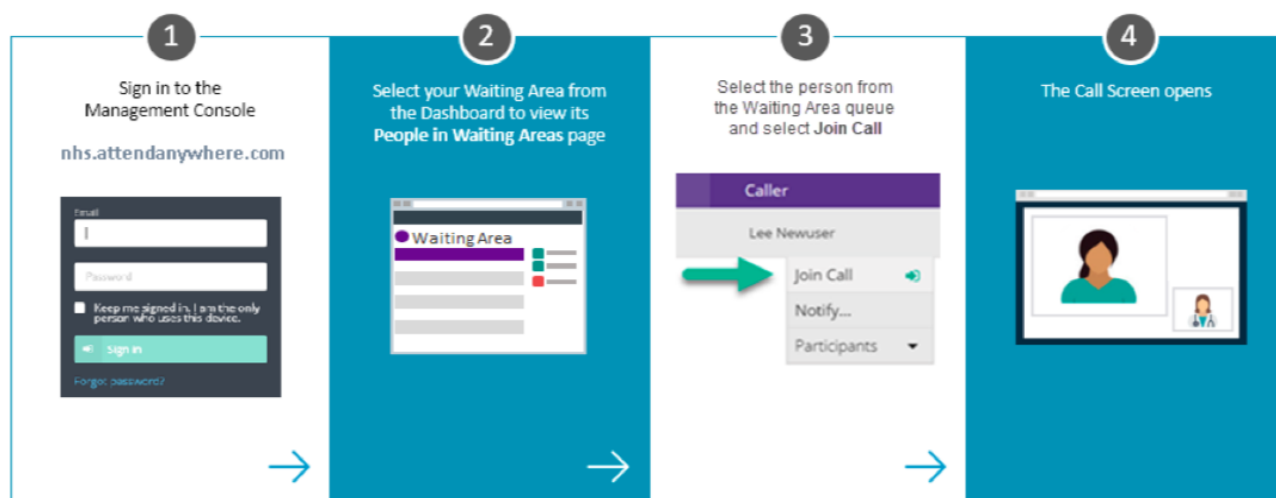
During your call:

- If you experience any issues, click the green Refresh button (top right-hand corner).
- Avoid pointing the camera towards a window or bright light.
- To select a different camera or microphone, click the camera icon in the top-right of the browser window select the relevant devices, and then click the Refresh button.

Clinician User Guide

Follow this link to a video on [How to use Attend Anywhere for Clinicians \(Welsh subtitles\)](#)

Follow this link to a video on [How to Use the NHS Wales Video Consulting Service for Clinicians](#)



Step 1: Open the web browser Chrome (Attend Anywhere only works in Chrome)

Please sign in to Attend Anywhere at: <https://wales.nhs.attendanywhere.com/login>

The screenshot shows the Attend Anywhere login interface. At the top left is the GIG CYMRU NHS WALES logo. The title 'Attend Anywhere' is displayed. Below the title is a login form with the following elements:

- An 'Email' input field with a red exclamation mark icon on the right.
- A 'Password' input field.
- A checkbox labeled 'Keep me signed in for today'.
- A green 'Sign in' button with a right-pointing arrow.
- Links for 'Forgot password?' and 'Don't have an account?' in teal text.
- At the bottom, it says 'Powered by Attend Anywhere' with a logo.

If you are using two screens (one for the clinical screen, and one for video call), move the video call or the clinical system window into the second screen.

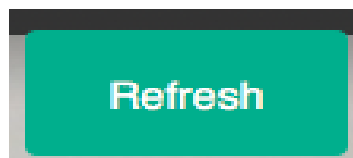
The GP can use the same computer that they use in their practice to conduct a video appointment and look at patient notes.



During your call:

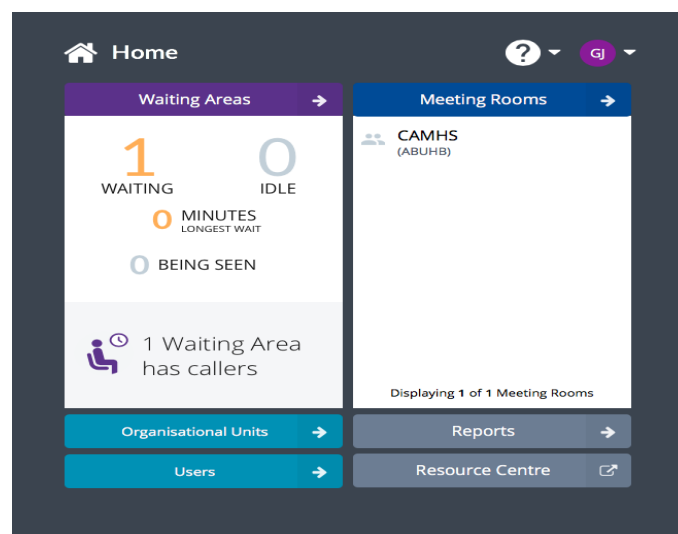
- If you experience any issues, click the Refresh button.
- Avoid pointing the camera towards a window or bright light.

To select a different camera or microphone, click the camera icon in the top-right of the browser window select the relevant devices, and then click the 'Refresh' button.

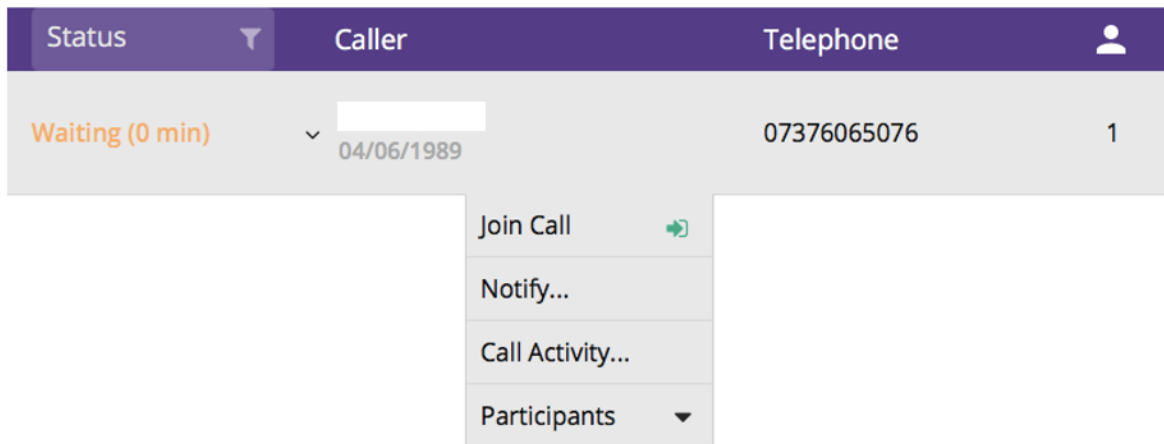


Step 2: This takes you into your waiting area where you will see a list of patients waiting. It shows the name of the patient, their date of birth, and how long they have been waiting for:

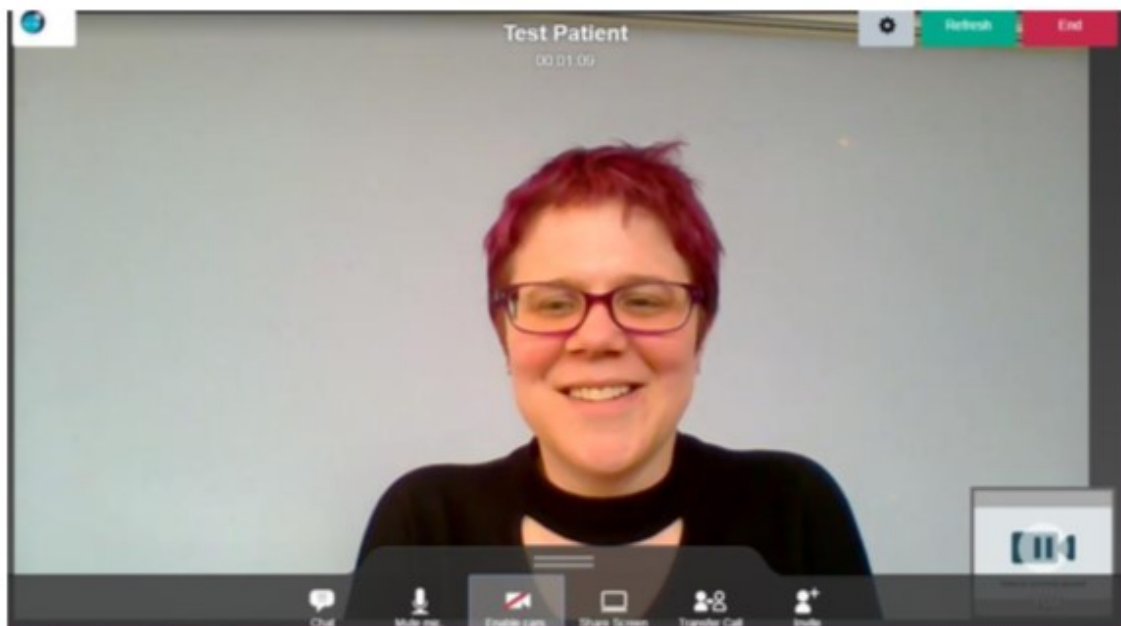
Status	Caller	Telephone	
Waiting (0 min)	04/06/1989	07376065076	1



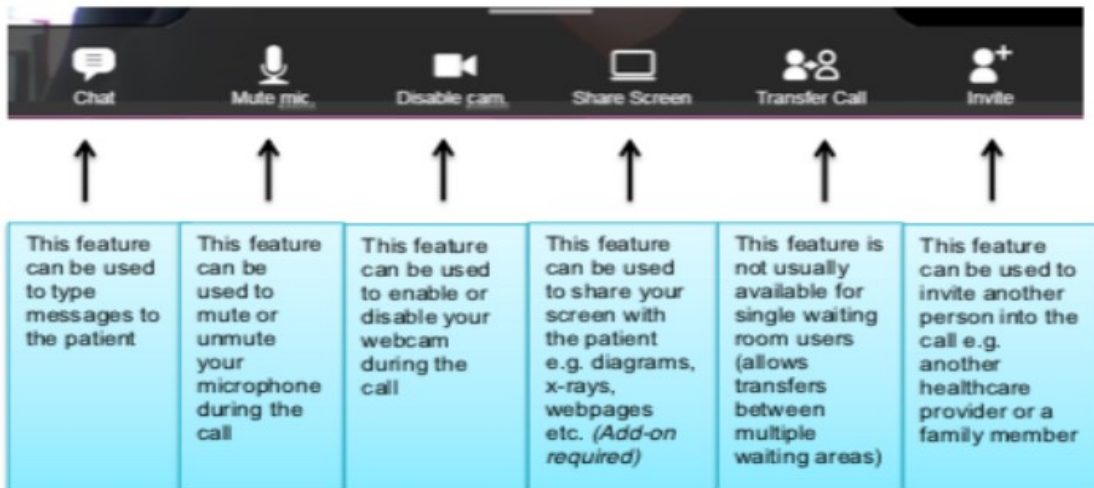
Step 3: Click on the line of the patient you want to connect a call with. This brings up options to join the call or notify (send a message) to the patient. Click on the “Join Call” button



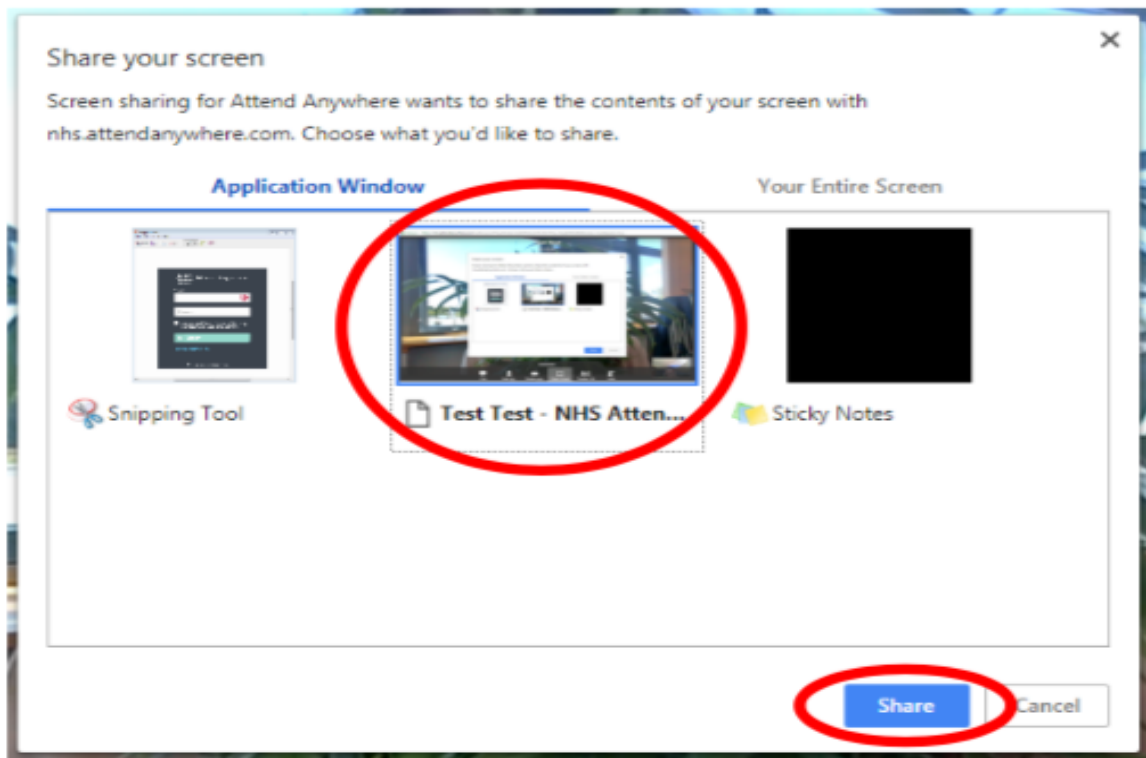
Step 4: It then takes up to 10 seconds to connect the video call between you and the patient. A video screen is automatically loaded; the patient will be displayed in the main screen and you in the bottom right corner. You can now consult with the patient.



Additional functions: During the call, hover over the bottom of the screen to bring up the menu shown below.



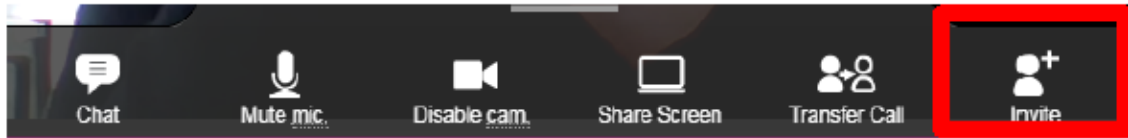
After clicking 'Share Screen' you will see the following pop up where you can decide whether to show your entire screen or just one application. The easiest way to use this is to open the document/website you want to share, then click on "share screen" then click on the application window you want to share (so it becomes highlighted) and click "share". The patient will then see the application that you have selected to share, plus a small image of you



Three-way calls: This can be used for a remote family member, interpreter or clinician to join the call. There are two ways to add third participants to a call:

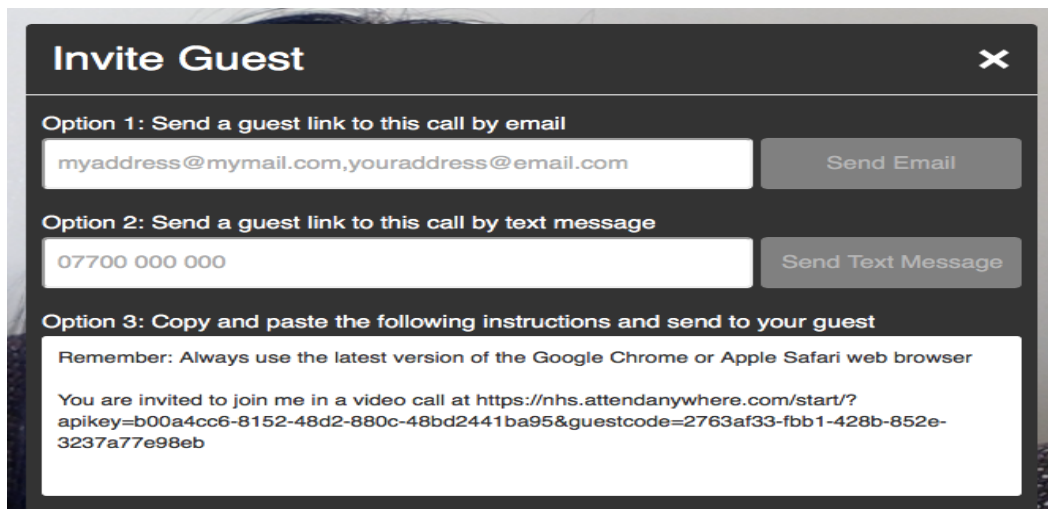
(1) Inviting other participants while in a call with a patient

Select the Invite button on the menu on the bottom of the screen (see above)



Select the Invite button on the menu on the bottom of the screen (see above)

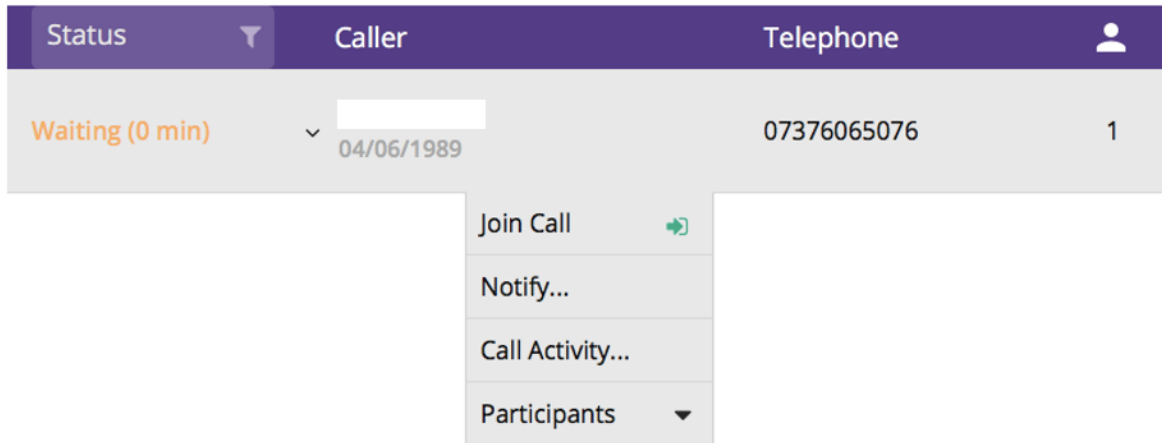
This enables the Clinician to send a link to the consultation via email or text message



(2) Adding multiple participants from a waiting room to the same call.

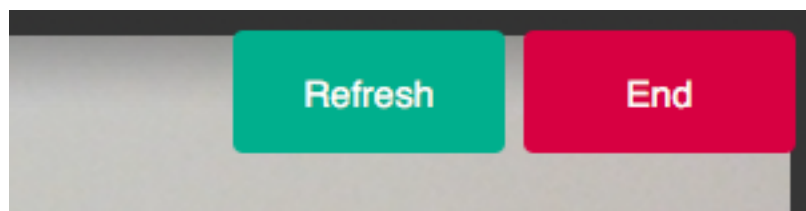
This is for when all participants have been provided the link for the waiting room in advance and asked to enter as a patient.

Select the initial patient from the waiting room and join the video call. Then return to the waiting room and select the additional participant, from the action menu that opens, select "Add to call", a confirmation message displays, click Yes, the selected caller is moved from the waiting area into the consulting room.

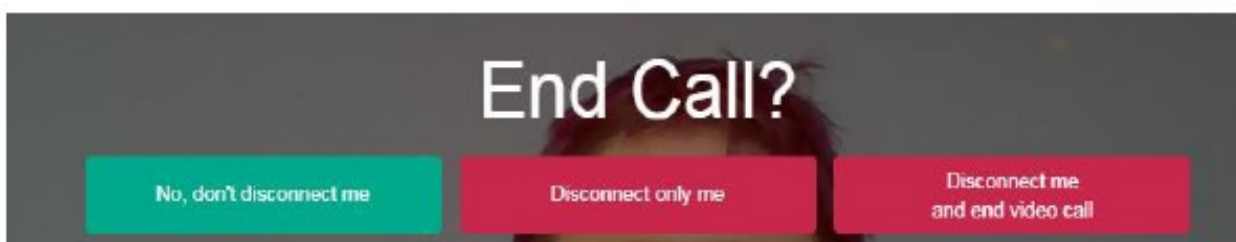


Practices should consider which option works best: option 1 is more flexible during an appointment, but option 2 may be easier for scheduled appointments with planned multiple participants.

Ending the call: When you are finished with the call and would like to end it, hover on the screen and in the top right corner click “end”.



You will then be given three options. If you are in a three-way call and want to leave the patient with the other participant click “**Disconnect only me**” (middle option). If you want to end the call completely, click “**Disconnect me and end video call**”.



Evaluation Surveys

At the end of your call you will be presented with a short survey. We would appreciate you taking the time to feedback your experience to help us improve the service.

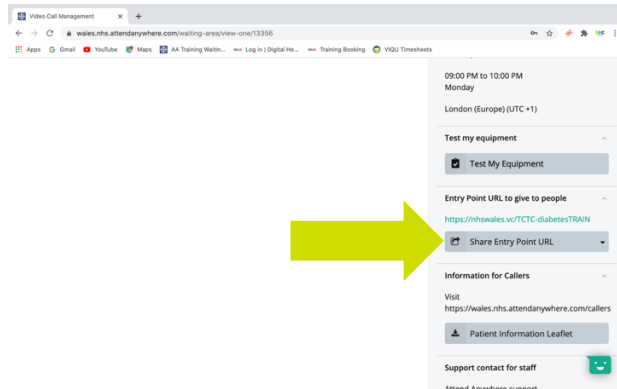
Additional Resource

Guides, training material and information leaflets and webinars can be found on the [TEC Cymru NHS Wales Video Consulting Service resources page](#).

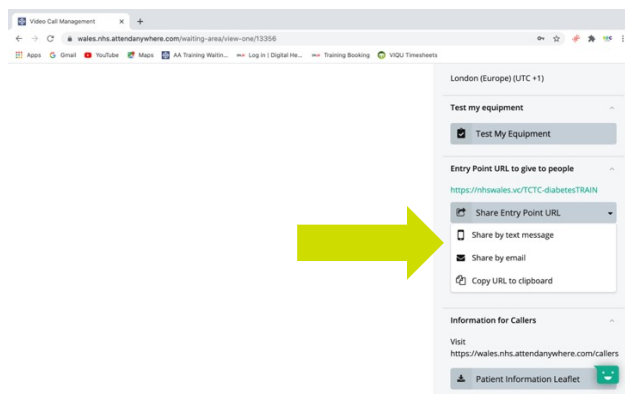
[Sending the waiting area link by anonymised text or email from Attend Anywhere](#)

You can now send a text or email with the URL address of your waiting area direct to a patient or client from Attend Anywhere without revealing your own mobile number or email.

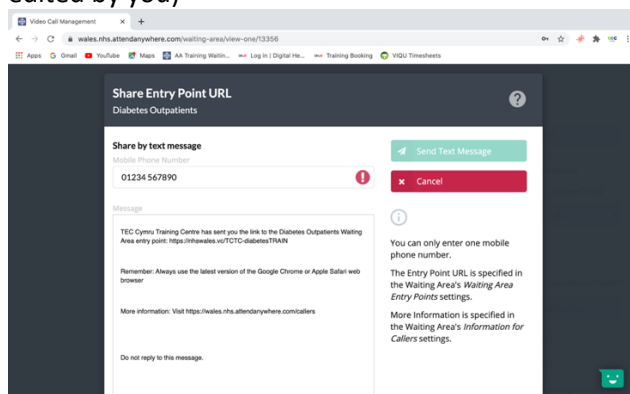
Simply click the Share Entry Point URL button within the waiting area.



Then select either share by text message or share by email



Then add the mobile number or email address and send (please note these messages cannot be edited by you)



Remember though these are sent from anonymised no-reply accounts. Patients or clients may be wary of opening these links. It's usually better to use this option when they are expecting to receive it, for example when converting a telephone consultation to video. Otherwise, you can still copy the URL and send it from a recognised source.

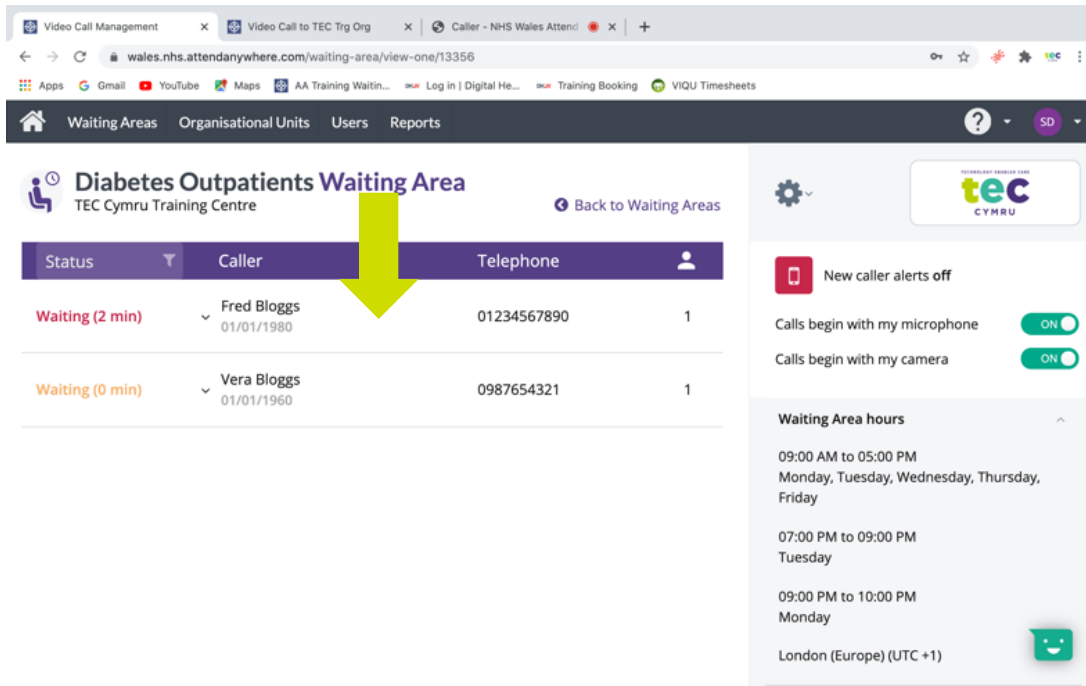
[Adding another person](#)

There are two ways to add another person or persons to the call.

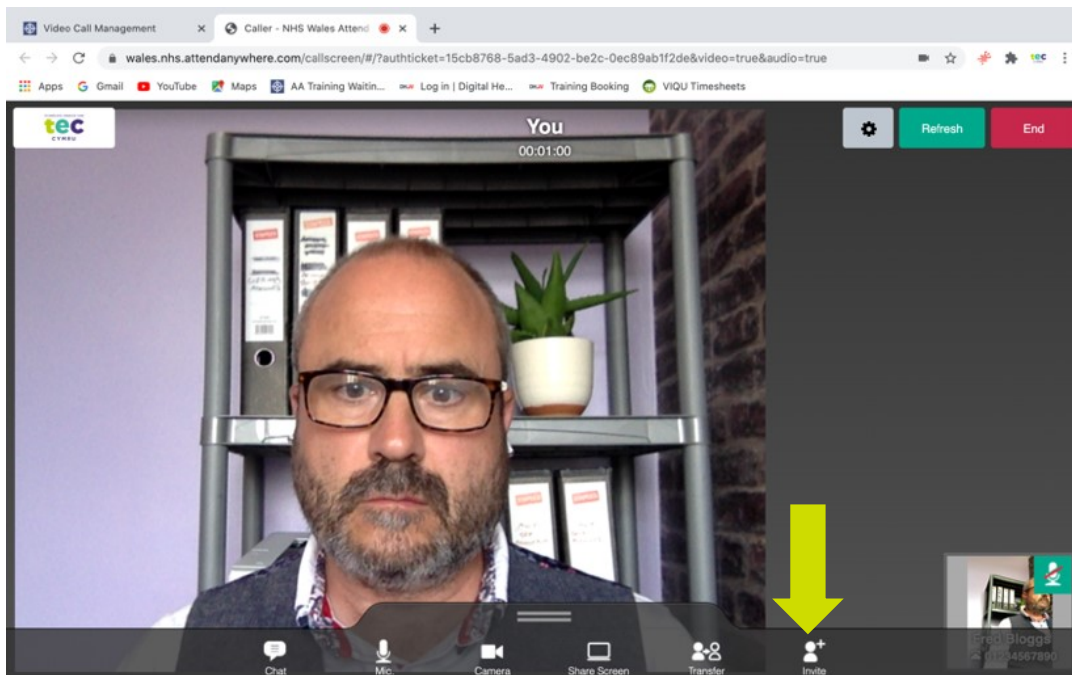
1) [Via the invite button](#)

This is a good option when you are requested to do this last minute.

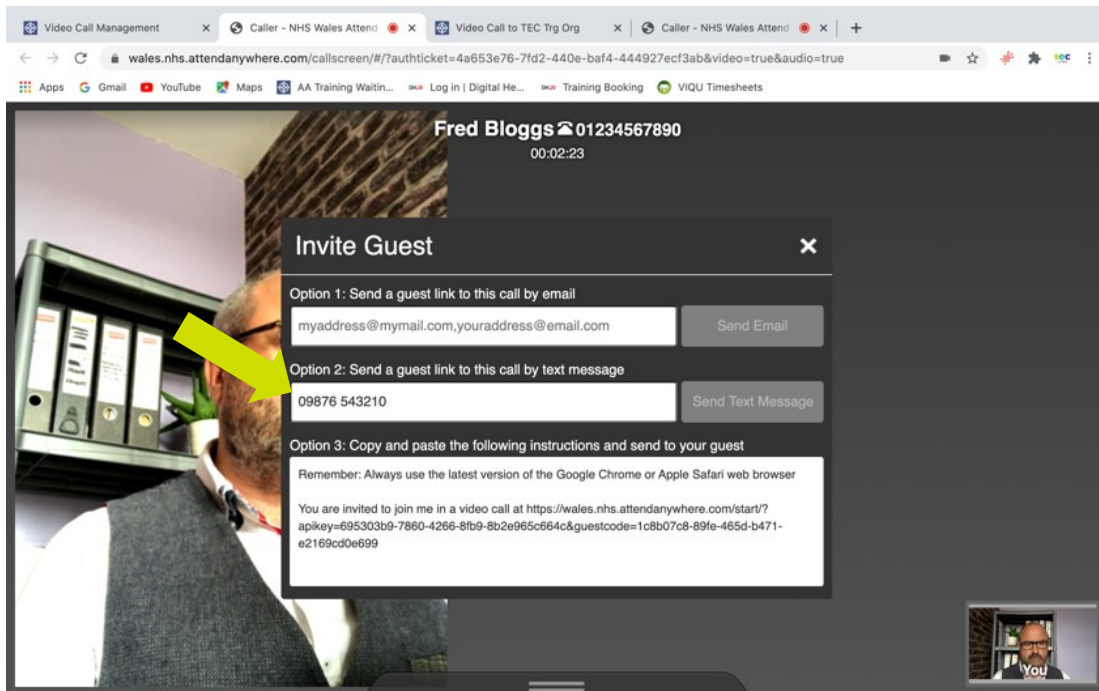
Start the call with your patient or client as usual



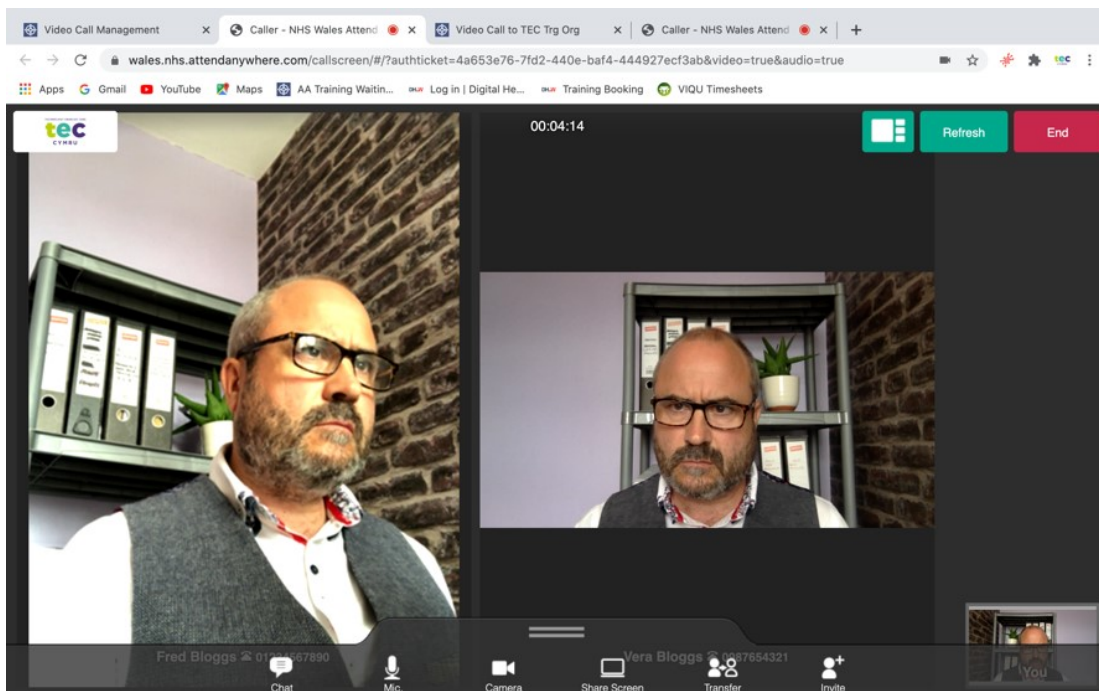
Once the call has commenced click the invite button seen here below



Add either a mobile number or email address and click send.

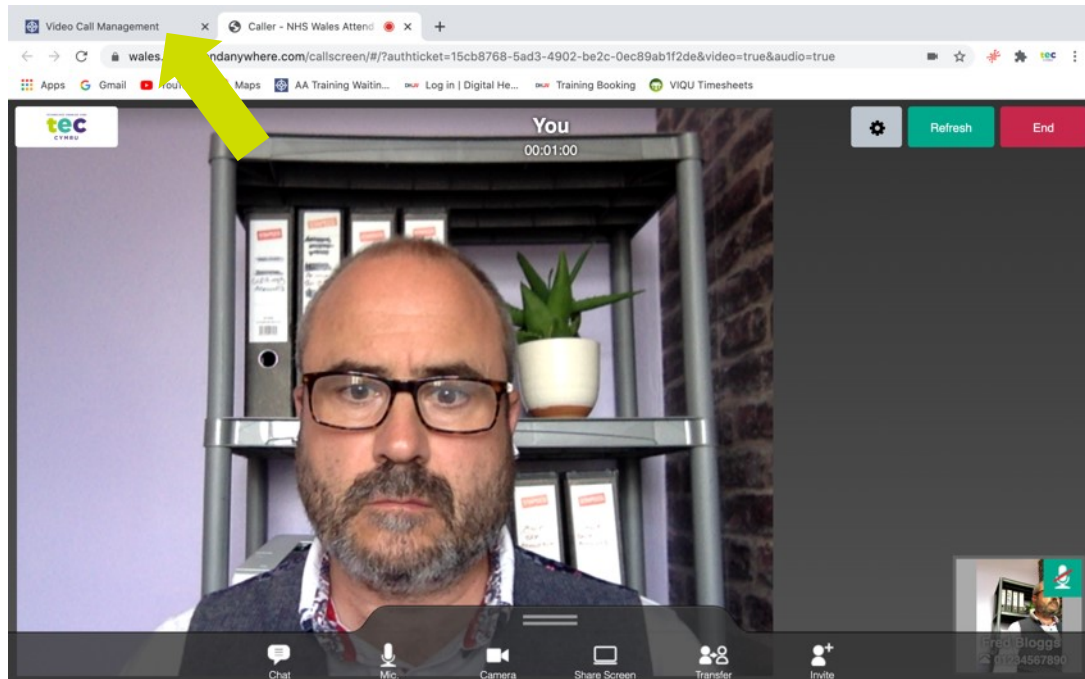


The other person will receive a unique code to join straight into the patient consultation. They will not be able to join any other consultations.

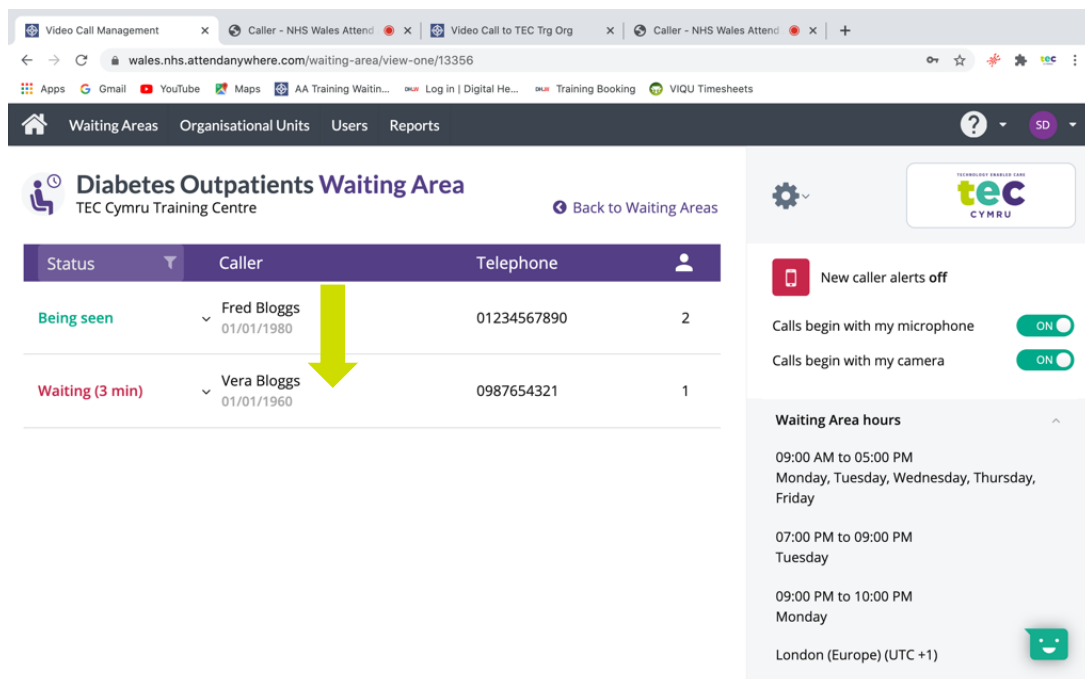


2) [Via asking them to log into the waiting area as well](#)

If you know in advance someone will be joining the call i.e. a friend or relative or another professional like a translator. Simply ask them to log into the waiting area at the same time as your patient or client. Then when you have answered the call to the patient in the usual way, without ending the call, click on the chrome tab labelled “Video Call Management”, see below.



This will take you back to the waiting area leaving the call open in another tab. When you answer the call to the second person....contd



Contd....it will say “add to call” click on this.

The screenshot shows the 'Diabetes Outpatients Waiting Area' interface. At the top, there are navigation tabs: 'Waiting Areas', 'Organisational Units', 'Users', and 'Reports'. Below this is the title 'Diabetes Outpatients Waiting Area' and 'TEC Cymru Training Centre'. A 'Back to Waiting Areas' link is visible. The main content is a table with columns: Status, Caller, and Telephone. The table has two rows: one for 'Fred Bloggs' (Being seen) and one for 'Vera Bloggs' (Waiting 4 min). A yellow arrow points to the 'Add to Call...' button in the context menu for Vera Bloggs. The sidebar on the right contains settings for 'New caller alerts off', 'Calls begin with my microphone' (ON), 'Calls begin with my camera' (ON), and 'Waiting Area hours' (09:00 AM to 05:00 PM on Mon-Fri, 07:00 PM to 09:00 PM on Tue, 09:00 PM to 10:00 PM on Mon, London (Europe) (UTC +1)).

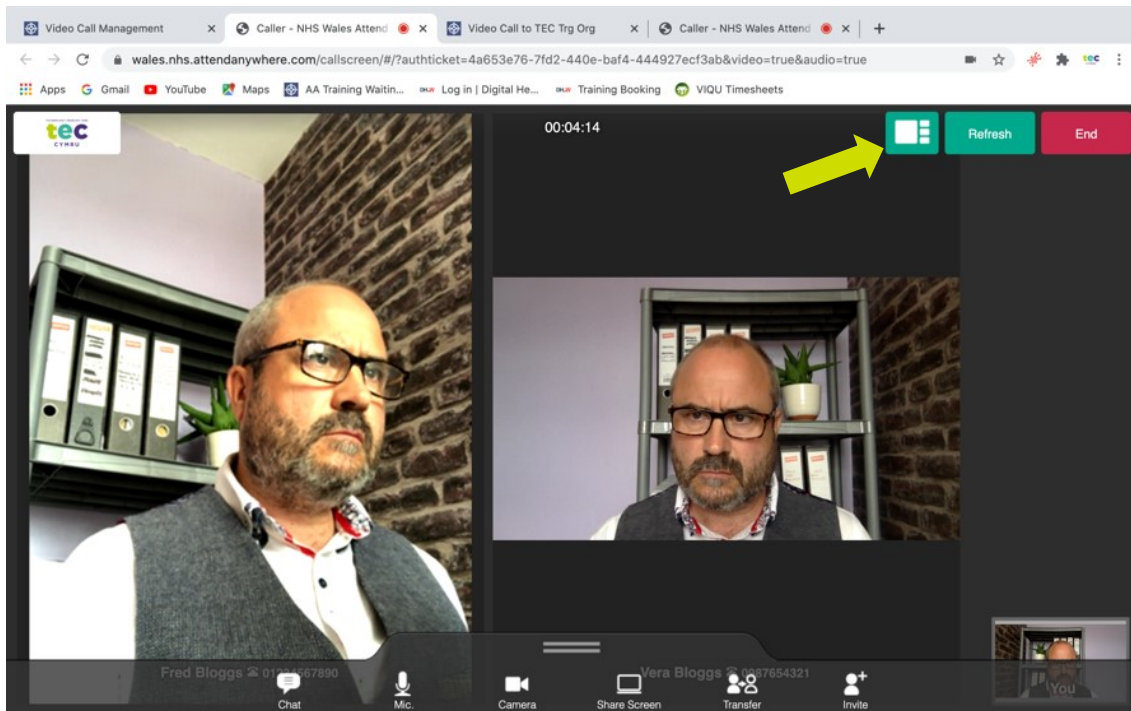
Status	Caller	Telephone
Being seen	Fred Bloggs 01/01/1980	01234567890
Waiting (4 min)	Vera Bloggs 01/01/1960	0987654321

Confirm that you wish to add this person to the current open call.

The screenshot shows a confirmation dialog box titled 'Add Vera Bloggs to call?'. The dialog contains an information icon, a message stating 'This will pull Vera Bloggs from the Waiting Area, into your current call.', and two buttons: 'Yes' (green) and 'No' (red). A yellow arrow points to the 'Yes' button.

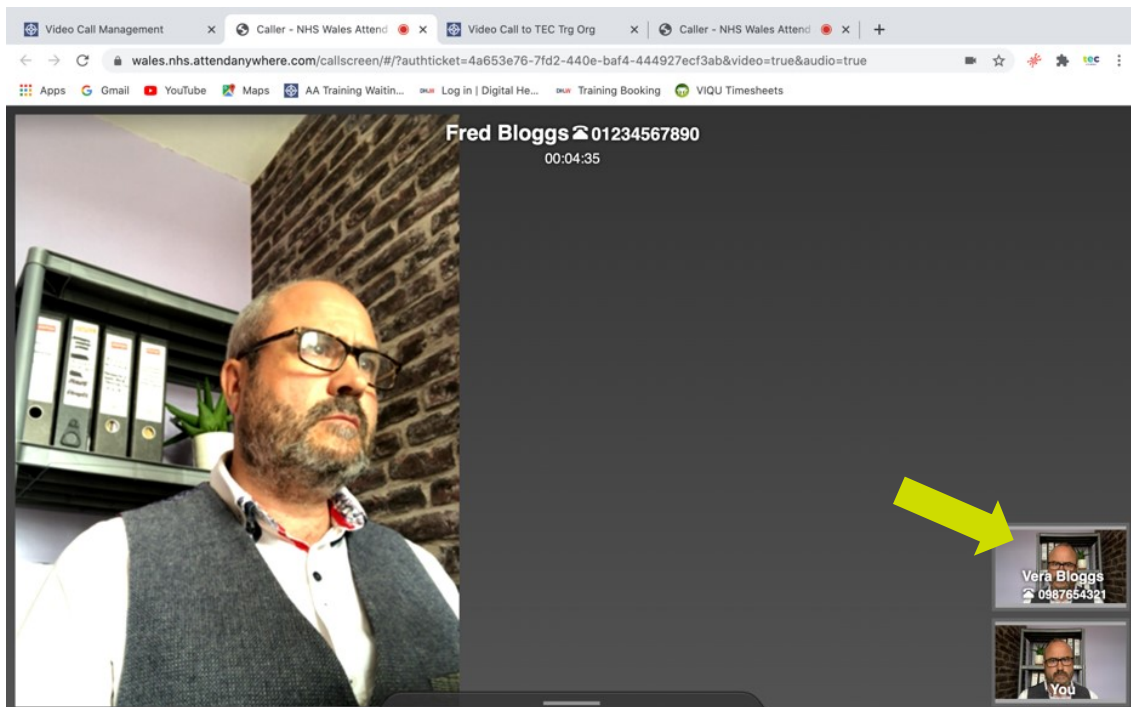
They will enter the open call.

When more than one person is in a call a new button will appear, see below.



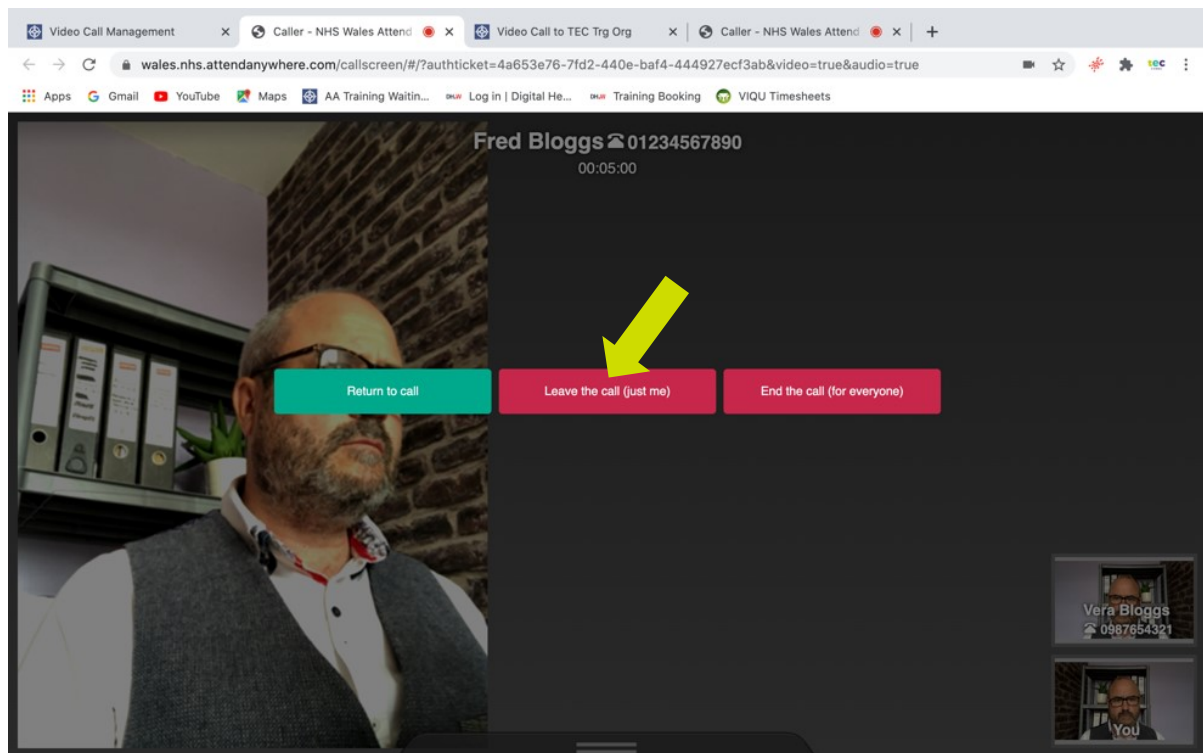
This will switch between equal view (see above) or one person view (see below)

In the one person view the person in main view can be changed by clicking on the small tab of the person you wish to see.



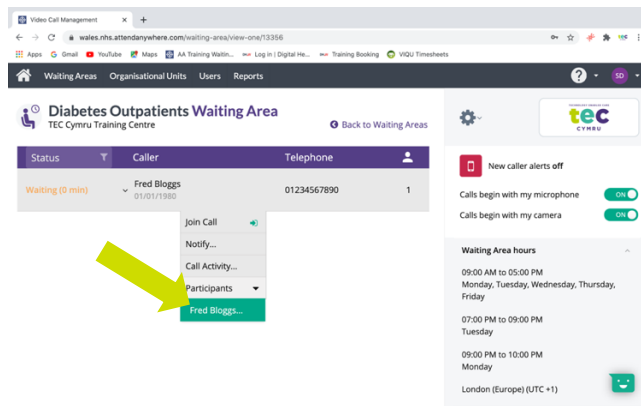
Whenever a single person is in the call or multiple people are in the call if you click end and then leave the call (just me) you will leave the call and they will be left in a call either together having their own discussion or on their own.

They will be found listed in the waiting area where they can be joined again either by you or any other clinician with service provider status.

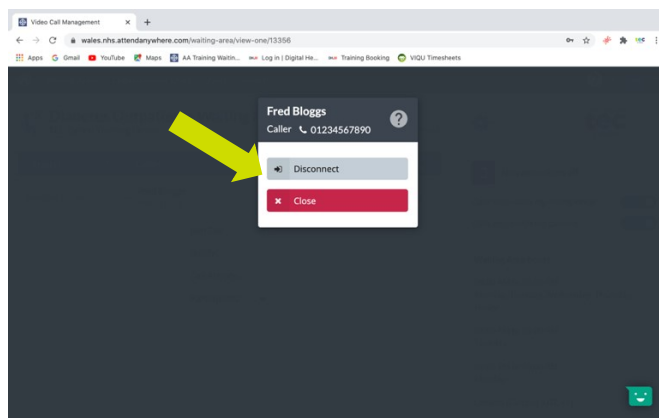


Disconnecting an Unwanted Caller

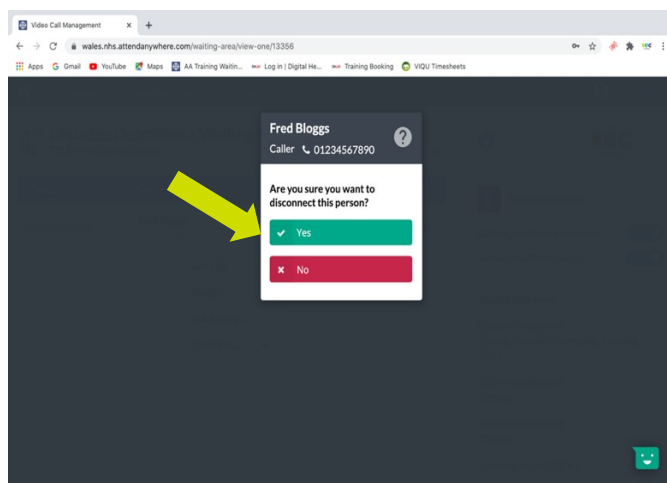
To disconnect a caller who shouldn't be in a waiting area simply click on the patient and then click on participants and then click on the name (see below)



Then click disconnect (it may be worth messaging them first in "notify")



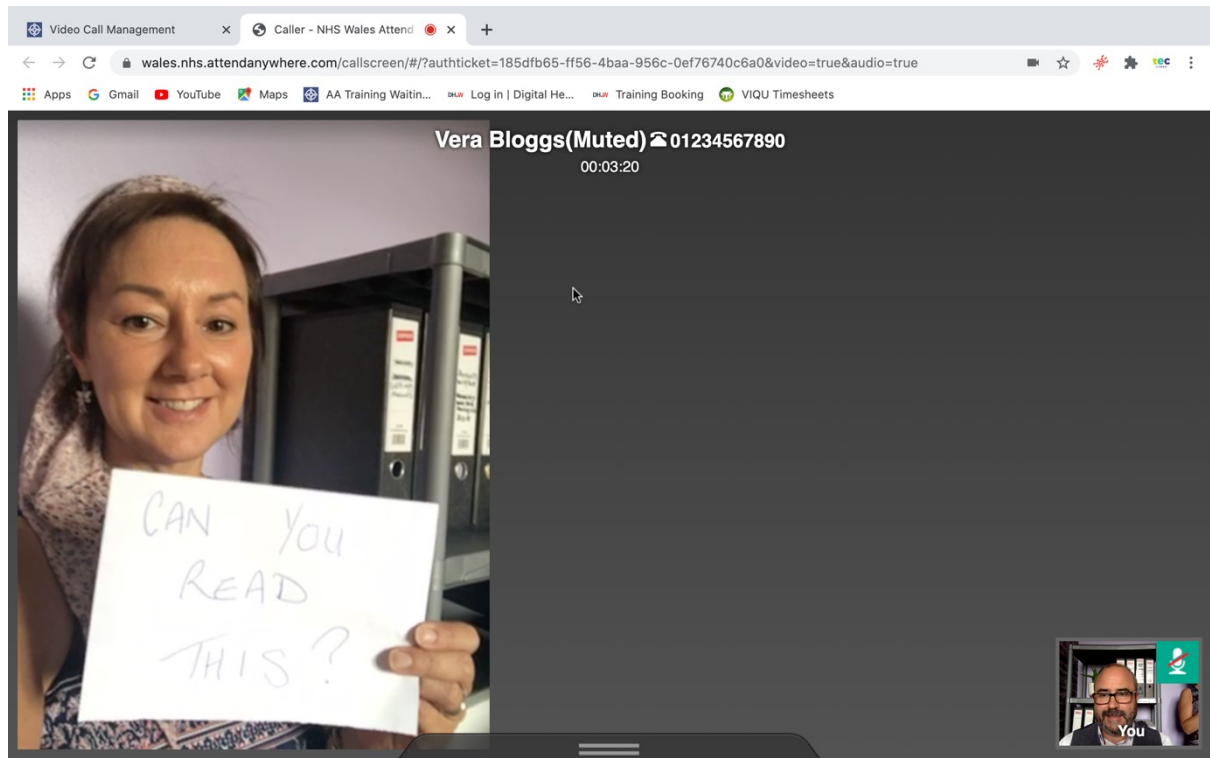
Finally click yes to confirm "see below" and then their call will end.



Confirming Left and Right

Important safety advice

If your consultation with the patient or client relies on the correct identification on the body of left or right, please be aware that some clients' devices may (rarely) reverse the picture! This is not done by the Attend Anywhere platform but rarely by the patient's device. Patients cannot totally be relied on to know left and right so the safest way to confirm this is to ask them to hold up some writing which you can read. If you can read it you are looking at them orientated as if in real life. (See below)



Types of Appointments and Clinics

Dedicated Clinics

Some practices may take an incremental approach, starting with dedicated Attend Anywhere clinics (e.g., every Tuesday, Wednesday, and Thursday 13.00 – 14.00). This may be influenced by available resources, for example where only some of the clinical rooms have the equipment necessary for video consultation (clinicians may share these rooms), or where only some clinicians offer video consultations.

The advantages of this model include: making it easier for clinicians to work remotely for a session (subject to access to clinical records) and building confidence for clinicians and practices new to Attend Anywhere. The downside of the dedicated clinic approach is the lack of flexibility: either appointment slots may go unused if there are insufficient requests/suitable presentations or there is limited availability if all dedicated Attend Anywhere slots are filled. Therefore, careful management would be required to ensure optimisation of appointment slots.

Integrated Attend Anywhere Appointments

Having blocks of video appointments integrated in existing clinics (e.g., the first/last five appointments set aside for video consultations) allows for a wider spread of clinicians to offer video consultations, and potentially more ready access for patients to a video consultation with their dedicated or preferred clinician, though perhaps not at a preferred time.

This model also supports clinicians to build confidence in use of Attend Anywhere and is helpful for those who prefer their workflow to have clear demarcation between different appointment types. As with the dedicated Attend Anywhere clinic model, the downside is the potential for ring fenced Attend Anywhere appointment slots to go unfilled. Therefore, good practice for GP practices adopting this model would be to incorporate a protocol whereby unfilled Attend Anywhere appointments are opened up/can be changed to other uses within a certain timeframe before the appointment date/time.

Ad-Hoc Use

The third option, where Attend Anywhere slots are booked in an ad hoc way into existing clinical sessions, allows both practices and patients the greatest flexibility to accommodate video appointments. It would involve booking staff changing the slot type of appointments to a video appointment.

For some practices this may represent a mature model, once staff are confident with the Attend Anywhere concept. This model could be applied across a practice but could also be applied on an individual clinician basis, e.g., for a GP who has video consulting equipment in the clinic room and is happy to switch between appointment types.

Single/dual device considerations

If Attend Anywhere is operated on a single device with dual screens, the clinical system and video call can be open in separate screens.

Attend Anywhere – Call Screen Guide

[English](#) and [Welsh](#)

Attend Anywhere – Troubleshooting Guide

[English](#) and [Welsh](#)

Example of the Patient Information Sheet

Download and customise for your service – [English](#) and [Welsh](#)

Poster - What is NHS Wales Video Consulting Service

[English](#) and [Welsh](#)

Poster - How do Primary Care Video Appointments Work for Patients?

[English](#) and [Welsh](#)

Poster - How do Video Appointments Work in Primary Care?

[English](#) and [Welsh](#)

Poster - Receptionist & Front Line Staff Information for Video Consultations

[English](#) and [Welsh](#)

Suggested Scripting for Primary Care Clinicians Using Video Consultations

[English](#)

Frequently Asked Questions and Answers

[English](#)

Authors and Additional Resources

Authors

Prof Alka S Ahuja, Consultant Child and Adolescent Psychiatrist, Aneurin Bevan UHB & TEC Cymru
Clinical Lead

Gemma Johns – Research & Evaluation Lead

Dr Jacinta Tan, Consultant Child and Adolescent Psychiatrist, Aneurin Bevan UHB

Clare Morrison – National Near Me Lead, Senior Clinical Quality Lead, NHS Highland; Scotland

Contributors

Caroline Waite – Informatics Programme Manager, Aneurin Bevan UHB

Scott Kuperus – Senior Project Manager, Aneurin Bevan UHB

Mike Ogonovsky – SRO TEC Cymru, Assistant Director of Informatics, Aneurin Bevan UHB

Sara Khalil – National Programme Lead, TEC Cymru

Lynne Hockey – National Programme Officer, TEC Cymru

Nick Jeremy – National Project Manager, TEC Cymru

Dr Rebecca Payne FRCGP, National Clinical Advisor Urgent & Primary Care, The Care Quality Commission

Gareth Cross – Head of Healthcare Technology & Innovation, Welsh Government

Janice Jenkins – WCCIS Programme Manager, Informatics Programme, Aneurin Bevan UHB

Simon Drew – National Training Manager, TEC Cymru

Reviewers

Dr Anne Marie Cunningham – NWIS and Primary Care Lead

Anna Burhouse – Director of Quality Development, RUBIS.Qi and Health Foundation

Dr Manon Kirkwood, Cyncoed Medical Centre, Pontprennau, Cardiff – GP

Dr Leena Menon, Courthouse Medical Centre, Caerphilly – GP

Dr Indu Nair, Abercwmboi Medical Practice and Maendy Place Surgery – GP

Dr Niba Shah, Foundry Town Surgery, Aberdare CF44 7PA – GP

Please go to <https://digitalhealth.wales/teccymru> for additional resources and evidence.

For advice specifically related to Primary Care please follow [Covid-19: a remote assessment in primary care](#) and [Video Consultations: A Guide for Practice](#).