

Full version of guidance and supporting resources available at:  
<https://www.phc.ox.ac.uk/research/resources/video-consulting-in-the-nhs>

# Video consultations: a guide for practice

## VIDEO CONSULTATIONS IN PRIMARY CARE 1: When is video appropriate?

There is no need to use video when a telephone call will do. The decision to offer a video consultation should be part of the wider system of triage offered in your practice.

Patients who just want general information about COVID should be directed to a website or recorded phone message. But video can provide additional diagnostic clues and therapeutic presence.

Below are some rules of thumb, which should be combined with clinical and situational judgement.

### **COVID-related consultations: video may be appropriate when**

- The clinician is self-isolating (or to protect the clinical workforce)
- The patient is a known COVID case or is self-isolating (e.g. a contact of a known case)
- The patient has symptoms that could be due to COVID
- The patient is well but anxious and requires additional reassurance
- The patient is in a care home with staff on hand to support a video consultation
- There is a need for remote support to meet increased demand in a particular locality (e.g. during a local outbreak when staff are off sick)

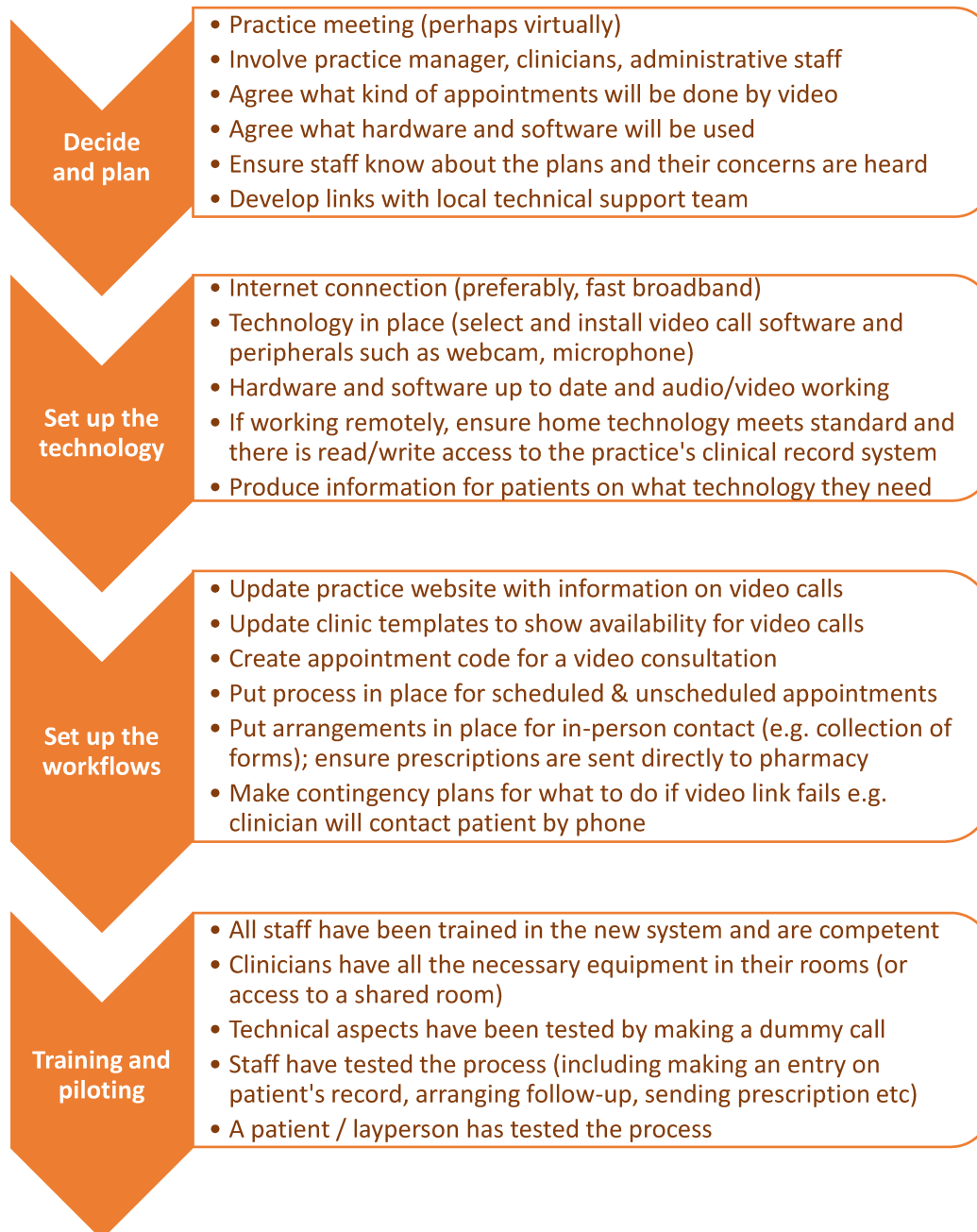
### **Non-COVID-related consultations: video may be appropriate for**

- Routine chronic disease check-ups, especially if the patient is stable and has monitoring devices at home
- Administrative reasons e.g. re-issuing sick notes, repeat medication
- Counselling and similar services
- Duty doctor/nurse triage when a telephone call is insufficient
- Any condition in which the trade-off between attending in person and staying at home favours the latter (e.g. in some frail older patients with multi-morbidity or in terminally ill patients, the advantages of video may outweigh its limitations)

### **On the basis of current evidence, we suggest that video should not generally be used for:**

- Assessing patients with potentially serious, high-risk conditions likely to need a physical examination (including high-risk groups for poor outcomes from COVID who are unwell)
- When an internal examination (e.g. gynaecological) cannot be deferred
- Co-morbidities affecting the patient's ability to use the technology (e.g. confusion), or serious anxieties about the technology (unless relatives are on hand to help)
- Some deaf and hard-of-hearing patients may find video difficult, but if they can lip-read and/or use the chat function, video may be better than telephone

## VIDEO CONSULTATIONS IN PRIMARY CARE 2: How can our practice get set up?



Professor Trisha Greenhalgh (on behalf of the IRIHS research group), University of Oxford, 16<sup>th</sup> March 2020

## VIDEO CONSULTATIONS IN PRIMARY CARE 3: How to do a high-quality consultation

### Before the consultation

- Confirm that (as far as you can assess in advance) a video consultation is clinically appropriate for this patient at this time
- Use a private, well-lit room and ask patient to do the same
- Take the patient's phone number in case the video link fails
- Ensure you have access to the patient's clinical record (ideally, have it available on a second screen)
- On the day, check that the technology is working

### Starting the consultation

- Initiate the consultation by calling or inviting the patient
- Say something e.g. "can you hear me?" "can you see me?" to prompt patient to optimise the technical set-up
- Take and record verbal consent for a video consultation
- Introduce everyone in the room (even those off camera), and ask patient to do the same or confirm that they are alone
- Reassure the patient that the consultation is likely to be very similar to a standard one, and that the call is confidential / secure

### Having a video consultation

- Video communication works the same as face to face, but it may feel less fluent and there may be glitches (e.g. blurry picture)
- You don't need to look at the camera to demonstrate that you are engaged. Looking at the screen is fine
- Inform the patient when you are otherwise occupied (e.g. taking notes or reading something on another screen)
- Make written records as you would in a standard consultation
- Be aware that video communication is a bit harder for the patient

### Closing the consultation

- Be particularly careful to summarise key points, since it's possible something could have been missed due to technical interference
- Ask the patient if they need anything clarified
- Confirm (and record) if the patient is happy to use video again
- To end, tell the patient you're going to close the call now, and say goodbye (before actually closing the connection)

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## VIDEO CONSULTATIONS IN PRIMARY CARE 4: A guide for patients on consulting by video

### Decide if video is right for you

- If you just need general information and self-care tips, use a website (e.g. put 'NHS coronavirus advice' into Google)
- You don't need a video consultation if a phone call will do
- Video consultations provide more visual information and can be more reassuring if you're anxious
- Your doctor or nurse may be self-isolating and working by video
- Check your GP practice's website to see what is on offer

### Get set up technically

- A good internet connection
- A quiet place where you won't be disturbed
- A computer, tablet or smartphone with a built-in camera and microphone
- Test your audio and video connection and adjust the settings so you can see and hear well (or get someone to do this for you)
- Check your practice website for what else you need to do (different video platforms have slightly different set-up steps)

### Booking and connecting

- Make a video appointment by following instructions from your GP practice (on the practice website or answering machine)
- Just before your appointment time, click the connection
- Say hello or wave when you see the doctor or nurse (you may both have to fiddle a bit to get the sound and picture working well)
- Make sure the doctor or nurse knows your phone number so they can call you back if the connection fails

### Having your consultation

- Look at the screen (there's no need to look directly at the camera)
- If all goes well, the call will feel like a face to face appointment
- Use the screen camera to show things (e.g. a rash)
- If you get cut off and can't reconnect, wait for a phone call
- Write down any advice or instructions, and make sure you understand the next steps (e.g. where to leave a specimen)
- When you've both said goodbye, disconnect

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