

APRU Global Health Conference 2021

GLOBAL URBAN HEALTH

16-18 November 2021

The University of Hong Kong, Pokfulam, Hong Kong

Abstract No.

Abstract Title

42

Evaluating The Patient Experience In Telemedicine: A Systematic Review

Theme

Smart city / technology

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Purpose / Background:

Background

- Telemedicine refers to the remote delivery of healthcare services using information and communication technology
- The COVID-19 pandemic and technological advancements have brought telemedicine to the forefront of clinical practice
- As telemedicine adoption rates multiply, it is crucial to comprehensively evaluate this digital health intervention
- Most of the evidence on telemedicine revolves around measuring clinical outcomes while data on evaluating patient experience is scarce
- Evaluating patient experience in telemedicine is important to create patient-centric healthcare and transformed health systems that are responsive to patient needs

Objective

- To conduct a systematic review to evaluate patients' experiences during telemedicine consultations
- **Research question:** What are the experiences involved in telemedicine consultations like from the patients' perspectives?

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Methods:

Databases: PubMed, Scopus, CINAHL, grey literature

Main Keywords: telemedicine, teleconsultation, patient experience, patient satisfaction

Inclusion Criteria: telemedicine consultations described as encounters that are between patient and doctor, conducted via video or voice, synchronous, and pertaining to provision of medical services; specific focus on patient experience; June 2011 to June 2021; human adults; English

Number of Articles Identified: 19

Analysis of Results: thematic synthesis

Results:

Figure 1: Characteristics of Included Studies

Primary Outcomes

Patient Satisfaction (N = 6)
Patient Experience (N = 5)
Facilitators & Barriers of
Telemedicine Use (N = 8)

Mode of Telemedicine

Video Consultation (N = 15)
Phone Consultation (N = 2)
Both (N = 2)

Reason for Consultation

Chronic Conditions (N = 10)
Acute Conditions (N = 4)
Mental Health Issues (N = 3)
Administrative Episodes (N = 2)

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Results:

Conclusions and Significance:

Figure 2: Identified Themes (facilitators/barriers of positive patient experience)

Accessibility/Convenience	Interpersonal Engagement
<p>Facilitators:</p> <ul style="list-style-type: none"> No travel Shorter waiting times Lower cost burden Ability to receive care in a familiar environment (more relevant during COVID-19) Ability to connect across geographical barriers <p>Barriers:</p> <ul style="list-style-type: none"> Technological issues such as poor audio/visual clarity and poor connectivity 	<p>Facilitators:</p> <ul style="list-style-type: none"> Doctor's interpersonal skills High levels of telepresence – the extent to which the patient feels the physician is in the room with them Video instead of phone consultations <p>Barriers:</p> <ul style="list-style-type: none"> Inability to conduct physical exams
	Quality of Care
	<p>Facilitators:</p> <ul style="list-style-type: none"> More time with doctors Thorough assessments <p>Barriers:</p> <ul style="list-style-type: none"> Privacy and data protection concerns

- Evaluating patient experience in telemedicine will enable higher adoption rates, patient-centricity, and enhanced quality of care
- Future efforts should focus on creating formal metrics to assess patient experience and quality improvement initiatives (eg. training physicians in building telepresence and nurses in technology) [Fig 3 presents a telemedicine model that drives positive patient experience]

Figure 3: Patient Experience Strategy House

