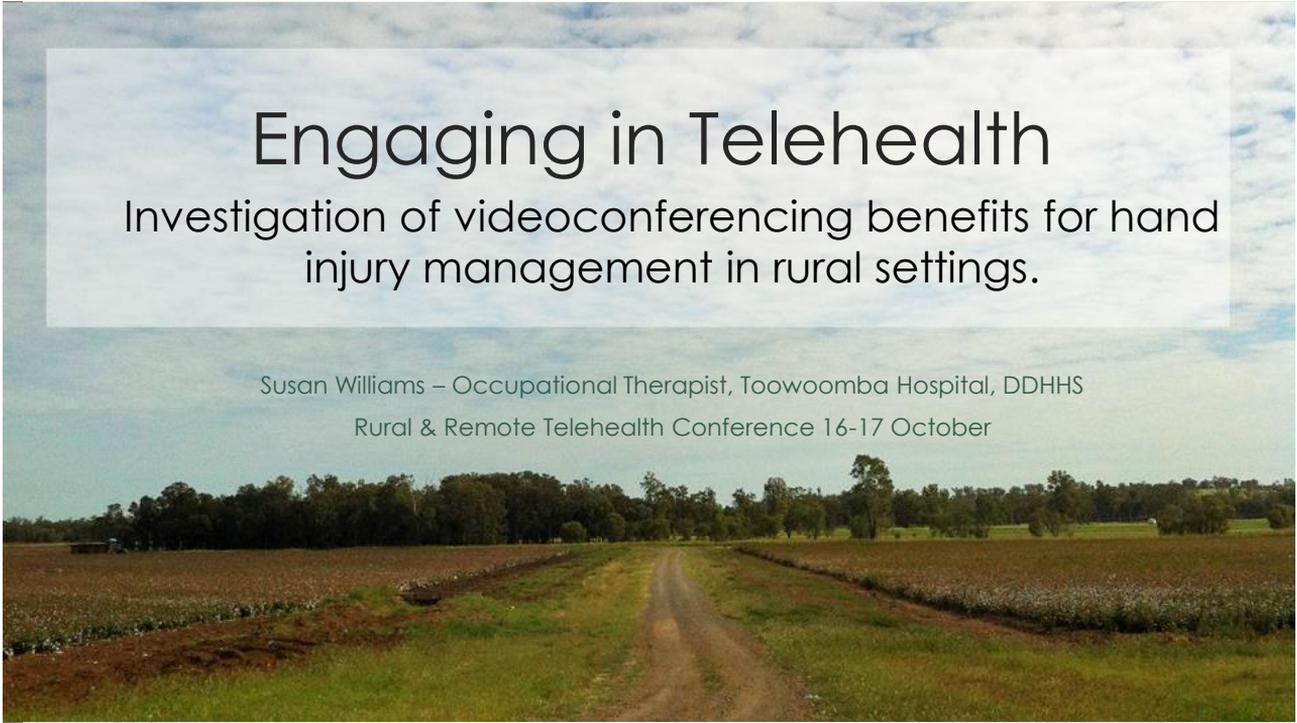


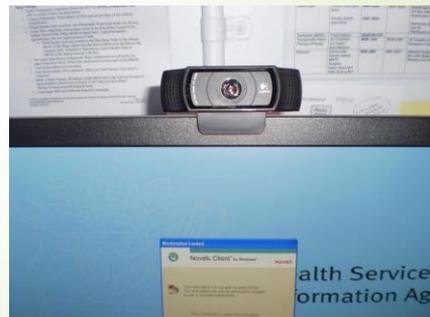
Engaging in Telehealth

Investigation of videoconferencing benefits for hand injury management in rural settings.

Susan Williams – Occupational Therapist, Toowoomba Hospital, DDHHS
Rural & Remote Telehealth Conference 16-17 October



Need for, and perceived benefit of, using MOVI within the Toowoomba Hospital Hand Therapy Clinic in treating patients and supporting and educating rural & remote clinicians.



Introduction



Method

This quality activity consisted of two phases:

1. Systematic literature review

- Keywords: telehealth, telemedicine, video conferencing and rehabilitation, hand therapy, occupational therapy and rural and remote health.
- 1994 – 2014
- Systematic reviews, RCTs or single case design

Literature review focused on:

- Need
- Patient benefits
- Clinician benefits
- Limitations

2. Survey:

- survey monkey
- DDHHS Occupational Therapists who had the potential to provide rehabilitation to a patient with a complex hand injury.
- About the perceived benefits and use of telehealth technology in provision of care to patients with hand injuries.
- 1 week response time

Results

Need (AIHW, 1998; ABS, 2011; Cason, 2012; Croll, Norton, Gray, Bryett & Smith, 2012; Hoffmann & Cantoni, 2008)

Rural and remote Australians have less access to health care

- centralization of health services,
- travel distance and associated costs,
- lack of public transportation options,
- negative consequences of time spent away from paid occupations
- personnel shortages in rural areas

A need for telehealth services in Dalby, Chinchilla and Miles

Telehealth

- overcomes access barriers
- improves functional outcomes
- minimises life roles disruption

Benefit to patients

- Reduction of costs
- Reduced travel distances
- Improved access to specialist services
- Increased patient satisfaction
- Increased patient attendance and compliance

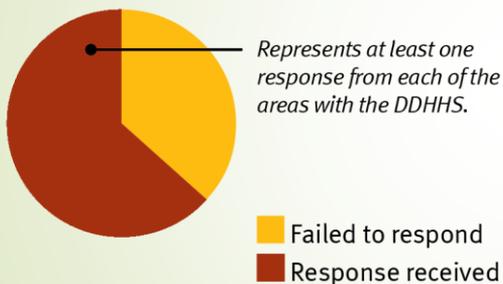
Benefit to rural clinicians

- Decreased feeling of professional isolation
- Mentoring and training using specific clinical situations
- Support from specialists may contribute to workplace retention

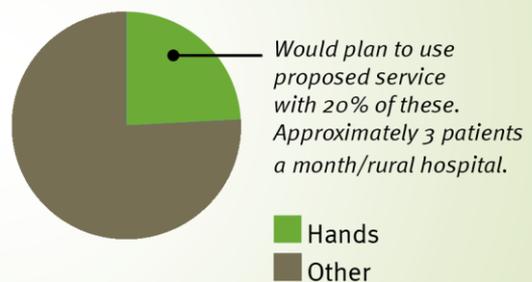
(Barden et al., 2000; Chipps, Brysiewicz, & Mars, 2012; Moffatt & Eley, 2010; Piga et al., 2014; Hoffmann et al., 2008; Clark, Dawson, Scheidman-Miller, & Post, 2002; Cason, 2012; Hoffmann, Russell, & Cook, 2007; Hoffmann & Russell, 2008; Hoffmann & Cantoni, 2008; Kairy, Lehoux Nicent, & Visintin, 2009; Kingston, Judd, & Gray, 2014)

Survey

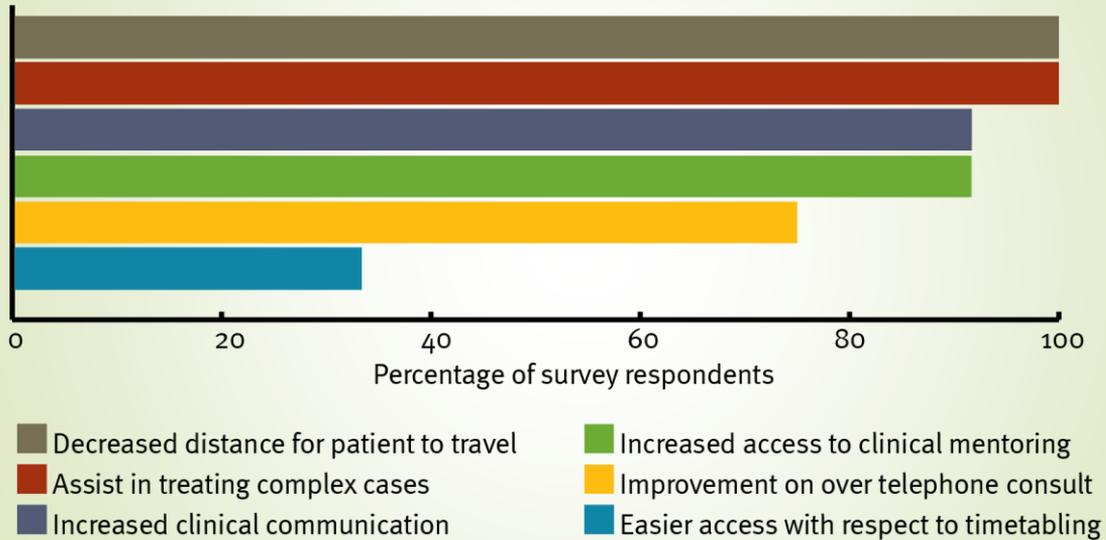
Survey response rate



Distribution of rural caseload



100% of respondents thought MOVI (in hands room) beneficial - why?



Discussion

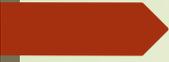
The survey revealed:

- strong support from Occupational Therapists within the DDHHS
- over 90% of respondents reported the access to clinical mentoring and further education in specialized skills would be beneficial.

Supported by the literature review which showed:

- Need at a national and local level for telehealth services.
- Benefits to rural clinicians and patients in the use of telehealth.

- Important telehealth limitations however they have been addressed as follows:
 - Guidelines available through Queensland Health
 - Local Occupational Therapist present with patient during consultation
 - Videoconferencing equipment available in each of the rural locations
 - Location of the videoconferencing equipment within the hand therapy room at Toowoomba Hospital significantly improves accessibility of equipment.
 - High cost of equipment outweighed by long term savings
- Study limitations
 - Exclusion of physiotherapy as a search term in literature review



Conclusion

- Plan to integrate telehealth into everyday practice
- Aimed to ensure sustainability through quality activity
- Inspired to do further bench-marking
- Continuous, ongoing evaluation
- Encourage others with specialized skills to consider MOVI

There is a need, and it offers real benefits to patients and their rural clinician.



References

- Available on request

Acknowledgements

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