# Setting up a Neurorehabilitation Telemedicine Clinic

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### **Context (why)**

- The Oxford Neurorehabilitation unit is a level I unit receiving referrals from the whole of the Wessex region.
- Neuro-rehab patients often have complex disability and depend on non-emergency patient transport services. Many patients fail to attend due to transportation issues.
- Cancellation and Did Not Attend rates to neuro-rehab clinics are as high as 30%

## **Objective (what)**

- To attempt to reduce the need for face to face appointments through the launch of a telemedicine clinic.
- To act as a pilot for a greater rollout of telemedicine clinics in keeping with the NHS long term plan to avoid up to 1/3<sup>rd</sup> of face to face consultations.
- To improve patient satisfaction by increasing accessibility to neuro-rehabilitation clinics.

### Impact

- We collated patient (n=104) and clinician (n=194) feedback following each video consultation.
- Key impact metrics include accessibility, ease of use, time-saving, consultation quality and patient satisfaction.

#### **Figure 1** Project Outline

#### **Figure 2** Patient Feedback

### Figure 3

Pros & Cons



#### **Results/conclusions**

- The response to this service has been overwhelmingly positive, with 86% of patients reporting the video consultation to be as good as a face to face consultation, and 14% of patients reporting it to be better or significantly better.
- 70% of clinicians reported that the video consultation was as effective as a face-to-face consultation, and 89% reported that they would use the video consultation system again.
- The COVID pandemic has greatly accelerated the uptake of

#### **Key Messages**

- Video consultations are an effective and viable method of conducting clinics.
- Social isolation measures in response to the COVID pandemic necessitates flexibility in approach to traditional methods of reviewing patients.

telemedicine clinics in the department. Telemedicine clinics are presently tariffed at the same rate as a face-to-face appointment. A cost-benefit analysis and information on nonattendance rates are needed to assess which clinics remain cost-effective to run at a 'non-COVID' rate.

- We hope to expand the use of telemedicine to carry out virtual rehabilitation groups at the OCE. We plan to continue gathering patient and clinician feedback to identify areas for ongoing improvement.
- This service has excellent potential to be adapted for use by other departments, and we have plans to expand use of telemedicine to carry out virtual rehabilitation groups at the OCE.

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