Rural Home Care Palliative Videoconsultation Project – Phase 2

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Background

RATIONALE
In rural and remote areas, access to support from specialized palliative care (PC) consultants can be limited. Poor health can prevent travel by clients and time, weather, and workload can impede timely home visits by consultants. In-home PC videoconsultation has the potential to overcome these barriers.

PURPOSE
To evaluate the use of mobile web-based videoconferencing (WBVC) by rural Home Care (HC) nurses to connect distant PC consultants with clients and families in their homes.

TIME FRAME
December 2016 to November 2017

LOCATION
Three rural HC districts (Strathmore, Chestermere, Didsbury) in the Calgary Zone of Alberta Health Services (AHS). The Calgary Zone rural area extends~100 km in all directions from the city limits of Calgary, Alberta.

POPULATION
Integrated HC clients referred to the Rural PC Consultation Team. The team serves a population of ~400,000 living outside Calgary city limits, but within Calgary Zone.

Participants at WBVC visits

12 clients
• Age 56-80
• 30-80% on Palliative Performance Scale
9 health care providers
• 5 HC nurses
• 3 PC physician consultants
• 2 PC nurse consultants
• 1 oncologist
15 family members

18 visits

Impact of WBVC visits

43 km / 42 min
Average travel distance/time saved by client with in-home WBVC versus telehealth consult at nearest rural facility

120 km / 1.8 hours
Average travel distance/time saved by PC consultant per visit

2276 km / 36 hours
Total travel distance/time saved by PC consultants for all visits

49 hours
Average time clients seen earlier by WBVC than in-person

Satisfaction with WBVC visits

17/18 visits
Video call quality very good - good

100%
Clients/Families agree health information is safe and private when using video call

17/18 visits
All care providers agree WBVC facilitated better clinical decision-making than reviewing case by phone alone

0 10 20 30 40 50 60 70 80 90 100
Percent

PC Consultant
 علي

Strongly Agree

Agree

WBVC Questionnaire Responses*

• Health care providers agreement on the effectiveness of the consult

• Client/family agreement on the effectiveness of the consult

• PC Consultant agreement on the effectiveness of the consult

• HC Nurse agreement on the effectiveness of the consult

• Client/family agreement on the effectiveness of the consultation

• PC Consultant agreement on the effectiveness of the consultation

• HC Nurse agreement on the effectiveness of the consultation

• Client/family agreement on the effectiveness of the consultation

Results

Conclusions

• Rural Home Care nurses can effectively use WBVC for PC consultation from clients’ homes.
• "WBVC is a convenient, acceptable way to provide more timely specialized PC support to clients and families in rural areas when in-person visits are not feasible.
• "WBVC technology and training for PC consultation will be expanded to all Calgary Zone rural HC districts and considered for provincial scalability.

Contact Information

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References