

## Virtually Intouch—an evaluation of desktop telehealth in rural and remote New South Wales

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**Aim:** To evaluate the effectiveness of simple, cost-effective telehealth solutions for rural and remote communities. The evaluation preceded and continued after the introduction of telehealth MBS items.

### Method

- Identified specialties that were conducive to telehealth consultations.
- Identified communities unable to sustain a regular visiting service.
- Identified existing visiting services experiencing increasingly long waiting lists or where patients needed follow-up more frequently than the visiting specialist was able to provide.
- Validated potential trial locations based on the available infrastructure and technology capabilities.
- Sourced doctors through an expression of interest.
- Developed a set of indicators for measuring each telehealth consultation.
- Developed evaluation forms based on the indicators to be completed by all telehealth participants.
- Evaluated comparable outcomes of new desktop and existing dedicated video conferencing systems.
- Evaluated comparable outcomes for Aboriginal and non-Aboriginal patients, supporting health workers and doctors.

**Relevance:** Documented experience of telehealth in Australia and overseas demonstrates that available technology can be used well, not only for group discussions and training but also for telehealth consultations.

We wanted to trial the image and sound qualities of simple desktop technologies that were easier for all parties and enabled specialists to participate from their own consulting rooms.

The specialties enrolled in the trial were oncology (medical oncology, radiation oncology and palliative care), clinical genetics, developmental paediatrics, endocrinology, psychiatry and cardiology.

**Result:** Evaluation data was collected through completed evaluation forms or structured phone interviews. The evaluation of desktop telehealth for rural, remote and Aboriginal

patients has demonstrated overwhelming support for the service from patients and supporting health professionals and strong support from doctors.

The trial has identified the benefits and pitfalls. Lessons learnt can be embedded into practice easily to enhance the experience for patients, doctors and local health professionals.

**Conclusion:** Ultimately the trial has demonstrated that telehealth is an excellent way to support visiting health care providers to enhance patient care by improving access to services for rural, remote and Aboriginal communities.

The trial has provided a valuable experience and a number of resources, and has identified potential policy enhancements to improve telehealth consultations for regional and rural communities.

