Single-centre telephone survey on patients’ perspectives regarding remote paediatric outpatient consultations in a district general hospital

Nilima Singh, Manas Datta

ABSTRACT

During the COVID-19 pandemic, remote consultations became a new norm for paediatric outpatient clinics. The objective of this survey was to find patients’ perspective on telephone consultations. 200 patients, who had remote consultations since April 2020, were surveyed and their responses were analysed. Almost half (98/200) of the patients or their parents preferred remote consultations mixed with face-to-face consultations; only a fifth (40/200) preferred exclusively face-to-face consultations; and approximately a third (62/200) preferred exclusively remote consultations. In conclusion, remote consultations are becoming a popular choice for patients, although there are limitations, especially in the context of safeguarding.

Face-to-face consultations are the norm for seeing patients in paediatric outpatient clinics. During the COVID-19 pandemic, this changed to telephone consultations due to the need for social distancing and minimising the risk of spread of infection.

We carried out a telephone survey in July 2020 on 200 patients who had telephone clinic consultations since April 2020, mainly to assess the future potential for remote consultations in paediatric follow ups, as well as for selected new patients who may not need physical examination. Patients were chosen from paediatric clinics, and we included everyone who answered the call, without any exclusion. No one declined the interview. A telephone survey provided instant results but was time-consuming due to low call pick-up rate. A postal survey was not sent out due to significant delay in postal services, costs involved and being labour intensive yet likely low yield. Patients or their parents were not involved in the design, conduct, reporting or dissemination plans of this survey. Parents responded on behalf of their children in most cases due to the child’s age and shared their views (please see online supplemental appendix 1 for the questionnaire). Data was collected and anonymised for analysis.

Results of the survey (figure 1) showed that only a fifth of patients/parents (40/200) preferred exclusively face-to-face consultations. Approximately a third (62/200) preferred virtual consultations either by telephone or through video. Almost half (98/200) preferred a mixture of virtual (telephone/video) and face-to-face consultations with majority preferring face-to-face consultation initially and then virtual consultation follow-up.

In patients’/parents’ own words, the main reasons for preference for exclusively face-to-face consultations were regarding the need for examination of the child and ease of communication (box 1, section A). There were a variety of reasons for preference for virtual consultation, but the main themes were decreased risk of infection, convenience and time saving (box 1, section B). Parents also felt that this was a safe option as face-to-face review could be organised at a later date if needed.

In summary, although there can be limitations to virtual consultations, for example, lack of ability to examine the child physically and record their growth parameters, there are several advantages of virtual consultations as our survey results show. Remote consultations are particularly suitable for chronic conditions and may be appropriate for some new referrals, provided the patients are triaged appropriately. Virtual clinics can also support providers to meet increased demand. Recent data from the paediatric outpatient department showed that we were able to reduce the waiting periods significantly. Before

Figure 1  Patient’s/Parent’s preferences for clinic consultation.
On balance, virtual consultations seem to be appropriate for and preferred by most children and parents, as long as factors such as safeguarding and need for investigations or examination are taken into account carefully. The widespread introduction of virtual clinics has been a positive outcome from the pandemic, and this study suggests that virtual clinics are already a popular choice among parents.

Acknowledgements The authors thank the paediatric outpatient team at Broomfield Hospital.

Contributors NS conceived the idea for the research, designed the template for questionnaire, collected the data with initial help from nursery nurses in the paediatric outpatient department and prepared the original manuscript. MD supervised the project and the manuscript.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Not commissioned; externally peer reviewed.

Supplemental material This content has been supplied by the author(s). It has not been vetted by BMJ Publishing Group Limited (BMJ) and may not have been peer-reviewed. Any opinions or recommendations discussed are solely those of the author(s) and are not endorsed by BMJ. BMJ disclaims all liability and responsibility arising from any reliance placed on the content. Where the content includes any translated material, BMJ does not warrant the accuracy and reliability of the translations (including but not limited to local regulations, clinical guidelines, terminology, drug names and drug dosages), and is not responsible for any error and/or omissions arising from translation and adaptation or otherwise.

Open access This is an open access article distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial. See: http://creativecommons.org/licenses/by-nc/4.0/.

ORCID iD Nilima Singh http://orcid.org/0000-0001-5565-6566

REFERENCES
Appendix:

Questionnaire for the telephonic survey:

Dear Patient,

Based on your recent telephonic clinic consultation in view of Covid-19 situation, could you please choose one of the following for future consultations for your child?

☐ I would prefer telephonic consultation only

☐ I would prefer a mixture of telephonic and face-to-face consultation

☐ I would prefer a mixture of telephonic and video

☐ I would prefer a mixture of telephonic and face-to-face and video

☐ I would prefer face-to-face consultation only

☐ I would prefer face-to-face or video

☐ I would prefer video only

Please if you could give brief reasons why you chose the above option: (e.g. I chose face to face only because my child has a skin condition that can not be assessed over telephone)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Important: The data will be collected and analysed anonymously and may be helpful for us to make necessary changes to our outpatient service provision for you in future. We may also publish the anonymous data in a medical journal.

Thank you for sharing your valuable views and completing this survey.