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STAYING CLOSE FROM FAR AWAY PATIENTS' PREFERENCES FOR VIDEO CONSULTATIONS IN PRIMARY CARE: A QUALITATIVE STUDY**Irit Chudner^a, Khaled Karkabi^a, Hadass Goldblatt^b and Anat Drach Zahavy^b**^aIsrael Institute of Technology, Israel^bUniversity of Haifa, Israel

Statement of the Problem: Video-consultations (VC) provide increased accessibility of primary-care to the geographic and cultural periphery, improved treatment for chronic patients, and higher satisfaction with medical services among young patients. Despite being highly beneficial, VCs' integration into health systems is complex and slow. Understanding Patients' attitudes and preferences can help design more effective training programs, leading to better implementation. This qualitative study's purpose was to better understand primary care patients' preferences for VCs versus in-clinic consultations (I-CCs).

Methods: The study sample comprised of 42 patients. Data were gathered through 5 focus groups' interviews, which were audio-recorded, transcribed verbatim and content-analyzed.

Findings: Patients perceived VC as beneficial for reducing waiting times (until the appointment and in line with the consultation itself), and for reducing costs associated with reaching the clinic. They preferred conducting VCs with their own family doctor, neither any Primary-Care-Practitioner (PCP). Patients believed that it would be easier to gain their doctor's attention during VC, unlike in the clinic, where there are distractions. Patients expressed concern about the loss of personal close contact with a PCP, and perceived good interpersonal communication with PCPs at VCs as even more important than in I-CCs. The main communication elements were listening, empathy; talking at the "same level", acquaintance with the patient and his needs. According to the patients, VCs can only partially replace I-CCs.

Conclusion & Significance: It seems that the optimal experience for patients when using VCs will be created by the unity of opposites: on the one hand, the availability and convenience to be connected from far away; and on the other hand, to keep close communication and conduct VC with their own PCP. Findings suggest that training programs should specifically address patients' needs and preferences to plan and implement successfully VC projects in primary care settings.

Biography

Irit Chudner is the Research Coordinator of a research project addressing the future of family medicine. The study aims to examine the desirable directions, training and practice-related needs for family-medicine physicians, in accordance with the changing e-Health environment, the needs of the Israeli healthcare system, the patients and those of primary- care physicians. She is a Lecturer and a Facilitator in frontal and tele-trainings in Medical Coaching Certification Courses and workshops for clinicians who wishes to support their patients, to meet their health-goals, and to improve clinical outcomes. She advises Managers and Clinicians in Israeli Health Organizations on developing programs to increase adherence, reduce medical utilization, and boost productivity. She is a Doctoral Candidate at the Faculty of Medicine, Technion, Israel Institute of Technology. Her doctoral dissertation examines the preferences in implementation of Video-Consultation Technology by Discrete Choice Experiment Research Methodology.

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