

The rise, acceleration and acceptance of telehealth adoption

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‘Healing at a distance’ is the literal meaning of telemedicine. According to the World Health Organisation, it is defined as the use of ICT to improve patient outcomes by increasing access to care and medical information, incorporating new advancements in technology and responding and adapting to the changing health needs and contexts of societies.

Within this context, it goes without saying that Covid-19 has led to a big push towards digital healthcare solutions. Until 2020, the adoption of telemedicine across Europe was fairly slow and limited, but social distancing requirements and the consequent advancements in technology facilitated its accelerated adoption in healthcare systems.

Indeed, a Digital Health Trends survey conducted by Research Partnership and Sermo back in **March 2021** (with a mix of HCPs in the US, EU5 and China) reported that nearly 70% of HCPs regularly used telemedicine – as well as other digital healthcare solutions, – during the pandemic.

Furthermore, another qualitative study we carried out with patients and HCPs in the US, Germany and China in **May/June 2021** reported positive experiences with telemedicine on both sides for convenient, time-saving consultations. HCPs also felt it was helpful to have more time to reassure and empathise with patients, with less time-pressure and more relaxed consultations.

“We have learned new ways of working during Covid. Some are now the best ways of delivering care.”

Ophthalmologist, UK (Nov, 2021)

The scales seemed to be tipping back towards face-to-face

But how did the utilisation of telemedicine fluctuate as the pandemic evolved? A third survey we conducted in **November 2021** (with n=157 HCPs in both primary and secondary care in the EU4 and UK) revealed that physicians were increasing their volume of face-to-face interactions with patients and felt mostly positive about this. Attitudes varied by region, however, with UK physicians spending only 60% of their time in direct face-to-face consultations, versus ~80% in France and Italy. UK GPs in particular, were spending close to 40% of their time in teleconsultations in contrast to lower averages (~25%) in other markets.

The reluctance of UK GPs to return to face-to-face consultations may have been the reason for the government’s move to provide incentives. In October 2021, it was announced that GPs in England would receive £250m to improve their services, but only if they increased the number of patients being seen face-to-face under a new government and NHS action plan. This drive had been cited as a way to relieve growing pressures on A&Es, which the government attributed to patients not having access to see GPs in person (although disputed by the Royal College of GPs in September 2021).

Only 58% of patients were seen face-to-face in August 2021 (the first full month following the ending of restrictions), compared with 54% in January 2021 and more than 80% before the pandemic, which correlated with our survey. A behavioural shift back to face-to-face interactions corresponded with the results from our survey highlighting mixed perceptions on satisfaction with telehealth.

Those physicians reporting lower to moderate satisfaction began to see an opportunity to return to face-to-face consultations and overcome some of the perceived underlying telehealth challenges pertaining to managing patient compliance (37%), remote diagnostics (35%) and overall disease management (32%).



The perceived preference for face-to-face consultations was also reflected in our previous research that highlighted lingering doubts about telemedicine, most notably the reliability of remote diagnostics for more complex cases, especially if HCPs were dependent on patients correctly and confidently, carrying out self-assessments.

This theme tied in with patient apprehension over aspects such as accurate diagnosis and patient desire for in-person consultations to build rapport with their physicians. Limited online prescription services and data privacy were also cited as concerns from both the HCP and patient perspectives.

Finding the right balance with a hybrid approach

Bearing in mind these challenges, is this an indication that we are seeing a return to the face-to-face model? Not entirely. HCPs were already seeing some success with video consultations and this is expected to continue. More than half the doctors in our study expected to use video consultations to manage patients in the next 3 years, with 20% expecting to use it a majority of the time. GPs, especially in the UK, did not expect to return to solely in-person consultations in contrast to other specialties who anticipated more face-to-face interactions. Another key point from our research was that a hybrid model would be strongly based on using the most appropriate consultation type dependent on the circumstance, with many in favour of using teleconsultations for routine follow-up appointments.

“Really, I still need face-to-face and in-person interaction for some phases of the clinical process.”

Dermatologist, Spain (Nov, 2021)

“I hope to return to face-to-face limiting telehealth to scheduled ‘follow-up’ appointments, in absence of disease variation.”

Cardiologist, Italy (Nov, 2021)

This finding was corroborated by other studies conducted at Research Partnership that showed user experience with telemedicine had mainly been positive. Moreover, there was consensus that usage would become established in the future alongside in-person appointments, dependent on the stage of the patient’s journey. In the UK, for example, this scenario is included in the NHS Long Term Plan to optimise and increase the range of digital health tools and services.

“People will be able to seek health information and support online and choose whether they speak to a doctor on the phone or in person. A wide range of NHS-approved apps will help people get ongoing support to help them manage their health and wellbeing needs, backed up by face-to-face care when this is needed.”

Physician, UK (Nov 2021)

Future digital transformation

Considering what we have learned since the start of the pandemic, it is valid to conclude that technological advances are swift – as seen with some markets trialling telemedicine apps/platforms – and digital health tools will continue to develop and improve at speed. In this sense, there are expectations that current telemedicine gaps will be filled. Consequently, the hybrid model may extend beyond routine follow-ups and will be utilised confidently for clinical purposes such as diagnosis, resulting in convenience and time benefits, as well as potential health economic cost savings in the long run.

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