Digital Technology & Health Survey

Research Report

March 2021









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Background & Sample Profile







Research Objectives

Focus on Digital Technology



- Gauge usage of online video and telephone appointments with health and social care professionals during the pandemic period
- Gain opinions of the quality of service received for each, including the existence of any problems
- Introduce the prospect of other healthcare services using digital technology being introduced, and determine residents' likelihood to use each when things are 'closer to normal'



Research Method



Online survey emailed to all 823 current members of the Staffordshire People's Panel

Emailed out invite: 975

Bounced back: 19

Unsubscribed: 1

Opened the survey but did not complete: 30

Completes: 263 (27% response rate)

NB:

a. The response rate shows a significant improvement over the first survey (Urgent Care) - which was 21%

b. All 30 people who did not complete fell out at the data protection statement, which was given in full this time (rather than as a link)

Fieldwork dates: 8-14 March 2021

Two reminders sent to all who didn't respond to previous mailing.

Responses:

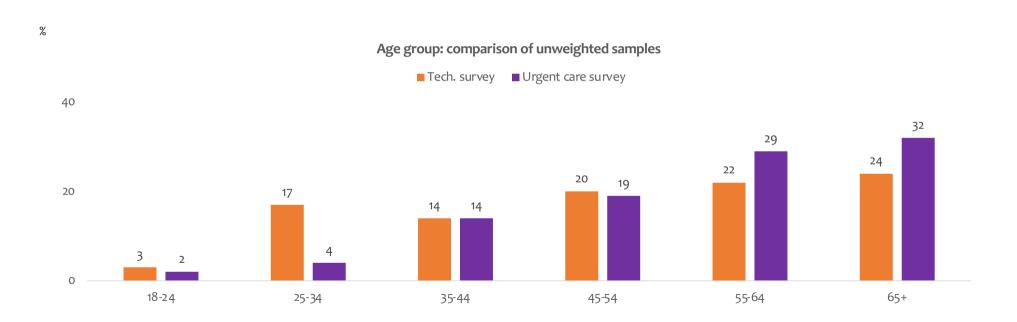
Initial Mail Out: 131 1st Reminder: 63 2nd Reminder: 69







- The representation of age groups in this survey is much better than in the recent urgent care survey
- There is a good mix of different age groups and so the data did not need weighting

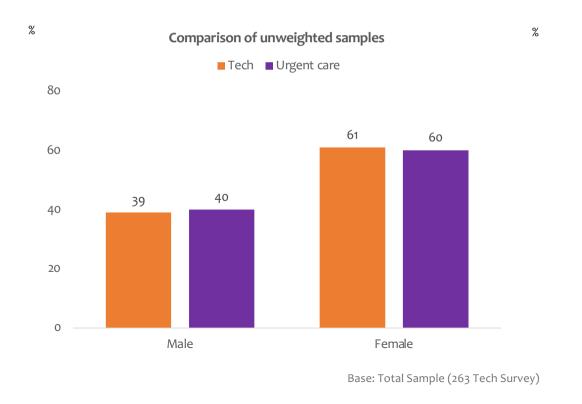




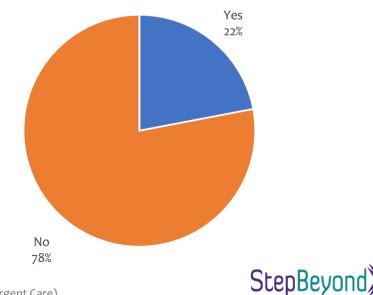
Gender



- Four-in-ten survey participants were again male which does under-represent them in terms of the population (but not the current Panel composition)
- One-in-five had some form of long-term health condition



Do you have any physical or mental health conditions or illness?



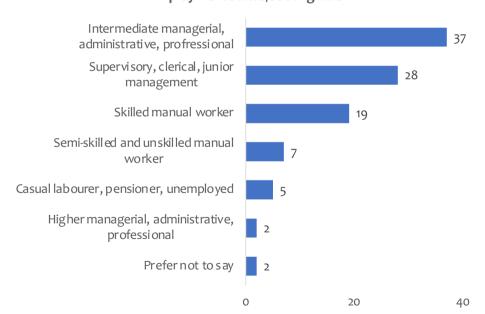
(176 Urgent Care)



TOGETHER WE'RE BETTER

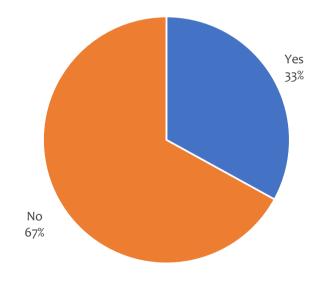
- The sample (and People's Panel) is still skewed towards the higher grades (65% ABC1s)
- Forthcoming recruitment will aim to address this

Employment status/social grade



 One-in-three respondents had children living at home, which is exactly the same proportion as in the Urgent Care survey

Do you have any children of any age living at home?





Online Video Appointments









Online video and telephone appointments

- As many as one-in-two Panel members have had at least one telephone appointment with their GP over the past year
- One-in-three have had one with another healthcare professional at their GP's surgery and one-in-four with a hospital consultant
- Only a small minority have had a video appointment

Have you personally had any form of online video or telephone appointment with each of the following since the pandemic started i.e. since March last year? % ■ Video ■ Telephone 60 51 40 32 24 20 Nurse/Healthcare professional at Hospital consultant Social care/social services GP Other GP surgery professional Base: Total Sample (263)



%

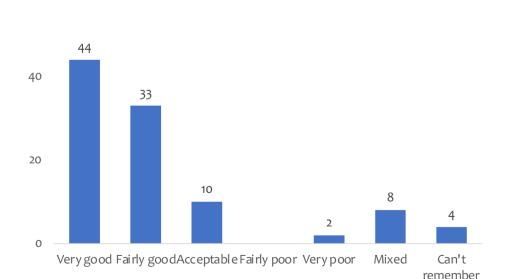
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TOGETHER WE'RE BETTER

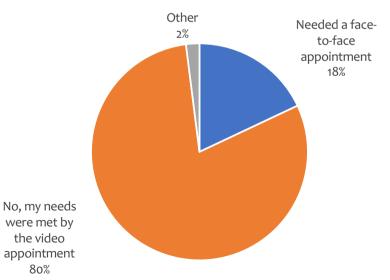
- In total, 11% of the sample had had a video appointment with a health or social care professional since the pandemic started.
- Satisfaction levels were high: 44% saying it was very good and almost all the remainder, fairly good

Furthermore, the great majority said that their needs had been completely met by the video appointment

How would you rate your experience of video appointments?



Did you need a subsequent face-to-face appointment or did the video appointment meet your needs at the time?



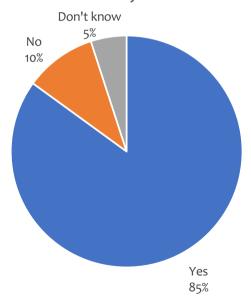




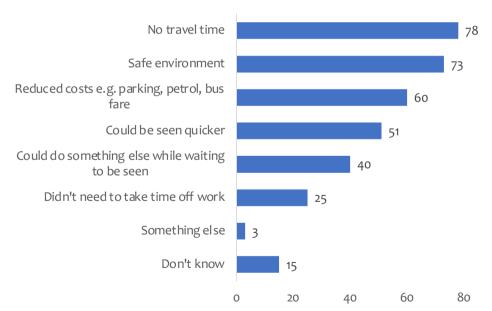


- In addition, almost everyone felt that the use of technology had benefitted them
- The main benefits being seen as no travel time and being able to stay in a safe environment

Do you feel that the use of technology benefitted you in any way?



How did you benefit from the video appointment?



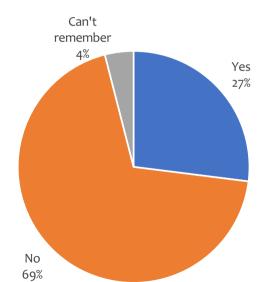






 However, one-in-four people who'd had a video appointment had some form of problem with it • A variety of (relatively minor) issues...

Did you have any problems with the online video appointments?



Link was sent as text message so had to use my mobile phone, would rather have had the link as email and used the better webcam on pc.

I couldn't turn my camera towards me so I could see her, but she had to talk to my table

I needed my daughter to connect everything up, I'm no good with technology

It wasn't a suitable option for the problem I had. It wasn't a video appt it was a text message so I didn't get to speak to the doctor. It was a terrible experience.

Had to keep chasing to have video info sent over to me, too many technical problems, frustrated

Failed & poor connections

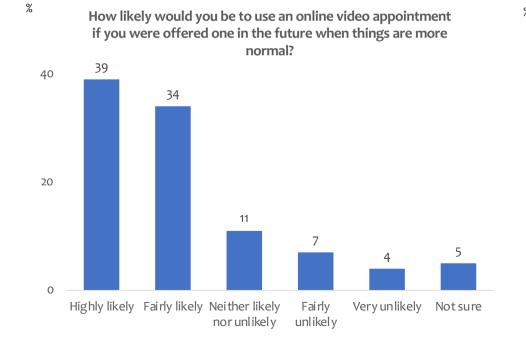


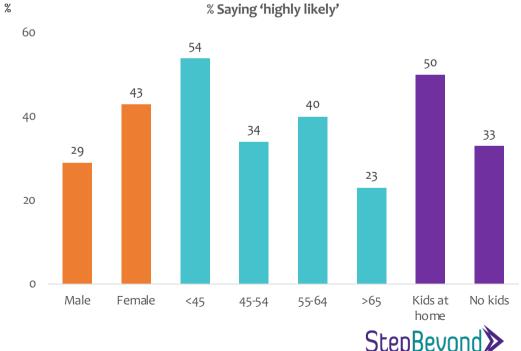


TOGETHER WE'RE BEVER

- As many as 4 in 10 people say they'd be 'highly likely' to accept an online video appointment in the future
- Very few say they'd be unlikely to do so

- Women and younger age groups were by far the most likely to accept an online video appt
- No significant difference by social grade





Base: Total Sample (263)





- Convenience (don't have to leave home)
- Better/easier for both healthcare professional and patient
- Don't have to see anyone else/risk catching something
- Speeds up the process of getting an appointment, getting to the appointment, and the appointment itself

I believe that everyone has had to adapt to new technology and accept that the way we do things will have to change.

I'm pretty familiar with video conferencing since covid

Quicker, easier, less chance of catching any other viruses while at a surgery

It's easier for the doctor

its easier to get an appointment, I didn't have to get dressed and go out

Sometimes it is harder to schedule a day around having to travel to a GP. Also, if I'm feeling too unwell, I do not wish to leave my home.

Having twin 2 year olds it solves childcare issues with going to an appointment

Quick and easy way to get seen







- Prefer to see them in person (feel closer, more conducive to talking through the problem)
- Difficulties using/unfamiliarity with/concerns about technology

I do not have a camera and am not an IT person at all. I have tried to use Zoom using just a microphone but could not log in to the meeting so gave up.

Face to face is better as you feel more in touch with the person you are talking to

I don't believe video appointments can ever replace a face-to-face talk. I fear it will lead to GPs taking an easy option and becoming far too distant

I much prefer to talk to somebody in person, and I am not very confident with the necessary technology either.

if the problem related to a hernia or an irregular heartbeat for example then an actual hands-on approach would be needed

Too many things go wrong with the internet.

It does not match face to face

Not very good at technology - do not trust it, too much misinformation on it.

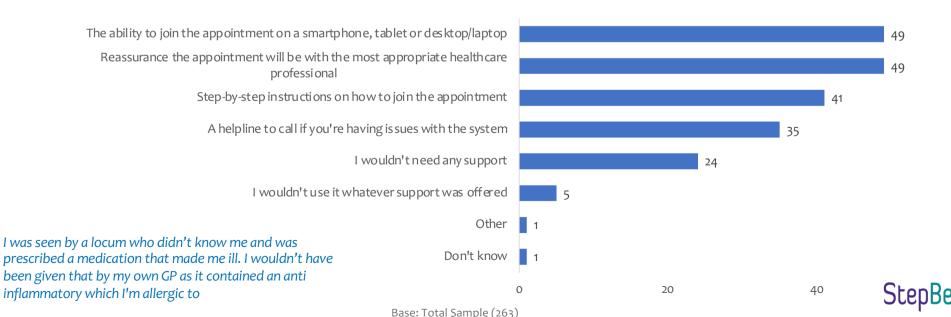






- One-in-four people say they wouldn't need **any** support to use video appointments (although this falls to 16% of >65s)
- Those who would like support, want to be able to join the appointment on a range of devices
- And reassurance that they will get to speak to the most appropriate healthcare professional
- And 45% of over 65s would like a helpline

What support would you need, if any, to use an online video appointment service?



Telephone Appointments



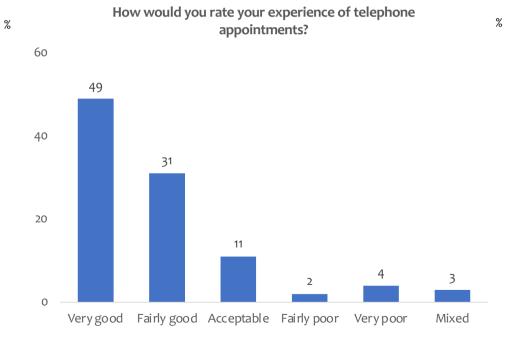


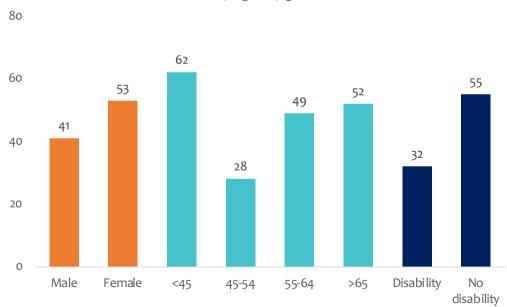






- People's experience of telephone appointments was as positive as video – one-in-two saying it was 'very good'
- Women and under 45s were especially happy
- Although those with a long-term disability seemed slightly less positive (tending to instead say it was 'fairly good'





% Saying 'very good'







VERY GOOD

 Often related to being called at scheduled time and the GP/nurse/consultant not seeming rushed and taking time to listen

Called exactly when they said they would and got everything resolved. It was very efficient

My Neurologists assistant was amazing! Professional, informative, she spoke with a lot of knowledge and also gave me the time to talk whilst she listened. She was really helpful and I'm being started on new medication so there was a result from the telephone consultation.

The nurse was very informative on the telephone and provided me with the correct advice regarding my issue/health concern at the time.

My GP listened with sympathy and I didn't feel as though he was rushing to end the meeting

FAIRLY GOOD, ACCEPTABLE OR POOR

• Most people felt it depends on the circumstances/problem – whilst telephone can work well sometimes, f2f would be better at others

It was a dermatology app how can you see skin over the phone?

I was asked to phone the GP to discuss results of a blood test. They never seem to be prepared for the call, and I have to tell them what the tests were for and what previous doctors had recommended.

Answered almost all the questions but I still feel face to face meetings are best (guess a Zoom Meeting would be as good)

They are not able to see what you are discussing, carry out examination, and rely on you carrying out certain checks on their behalf ie blood pressure readings

I feel that with the doctors' appointments works well as more general, but find it frustrating with consultant appointments as don't always feel it is in depth enough

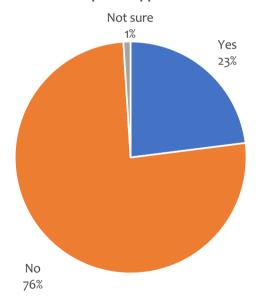






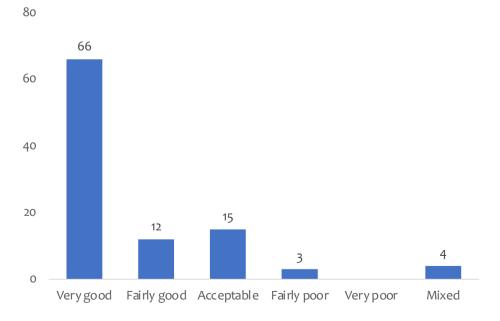
 One-in-four people who'd had a telephone appointment had uploaded photo(s)

Did you or a family member upload any photos to accompany the telephone appointment?



 The experience of doing so was very good, with no problems evident at all





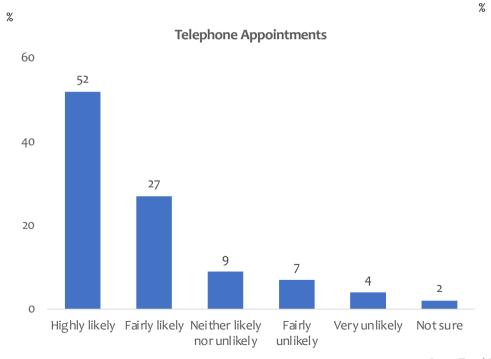


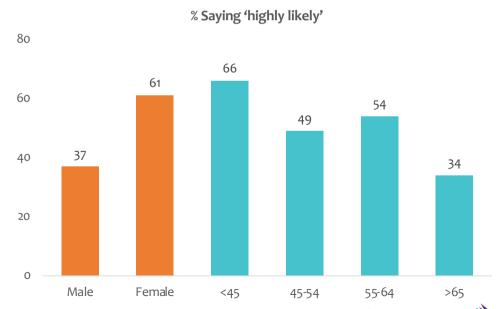


Likelihood to use telephone appointments in the future

- As many as one-in-two panel members said they were 'highly likely' to use telephone appointments in the future i.e. when things are getting 'back to normal'
- · Only a small minority are unlikely to do so

- Women are **much** more likely than men to be happy to accept telephone appointments
- But likelihood is quite even across all <65 age groups





Base: Total Sample (263)

Propensity to Use Other Digital Services



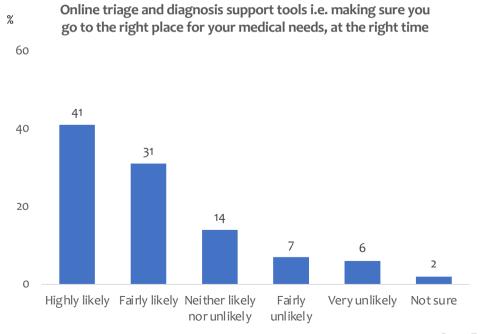


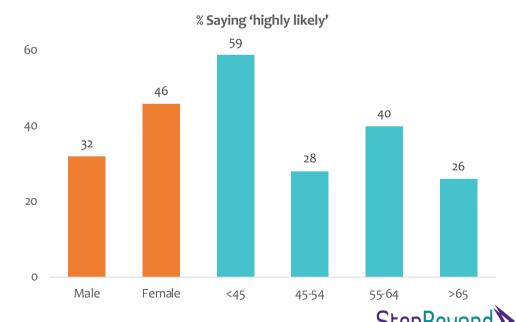






- Four-in-ten panel members say they'd be highly likely to use some form of online triage in the future
- Interestingly this is almost identical to the 47% who said they'd definitely use NHS 111 in the Urgent Care survey
- Again, women were more likely to say they'd use online triage
- There was a stronger skew to younger age groups, with under 45s being much more likely than others to say they'd use it.





Base: Total Sample (263)

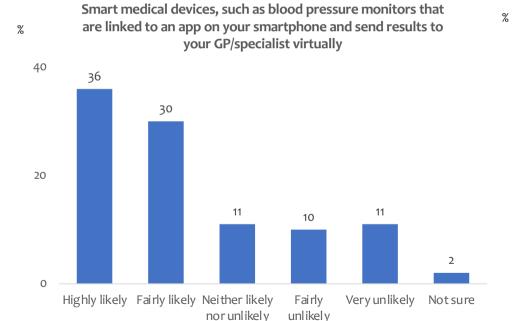
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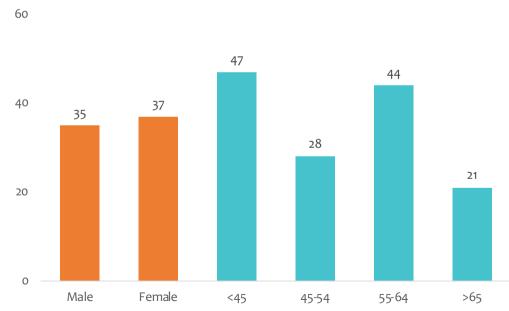


Likelihood to use 'smart' medical devices in the future

- The majority of Panel members were also happy to use smart medical devices only 21% said they'd be unlikely to do so.
- There wasn't a distinct pattern by age group on this measure, nor any difference between men and women.

% Saying 'highly likely'



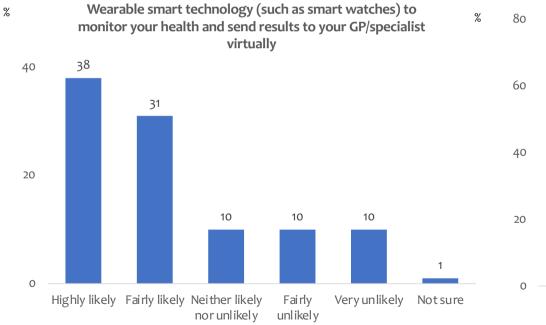


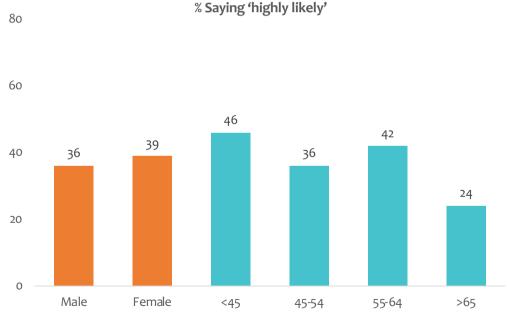




Likelihood to use wearable smart technology in the future

- A very similar pattern was evident for wearable smart technology 69% saying they'd be likely to do so and just 20% unlikely.
- Again, there was no difference by gender, although interest was lower among over 65s.









Likelihood to use an app in the future

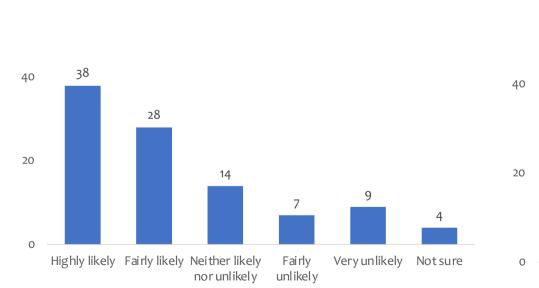
• Four-in-ten Panel members said they'd be 'highly likely' to use an app to help them manage a long-term condition

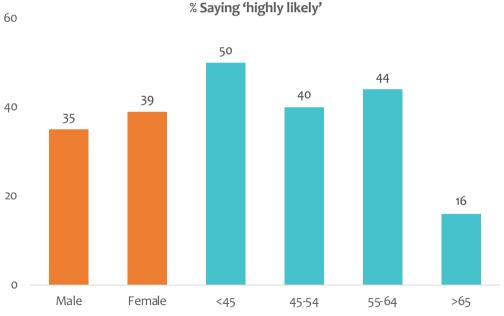
An app that helps you manage long term medical conditions

• Only a small minority would be unlikely to do so

60

 No difference by gender, and interest was considerable among all under 65s (but then falls off markedly)



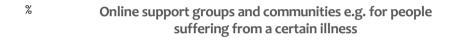






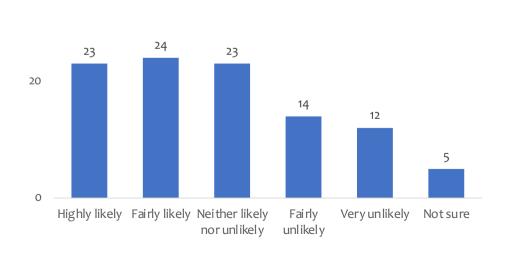
Likelihood to use online support groups in the future

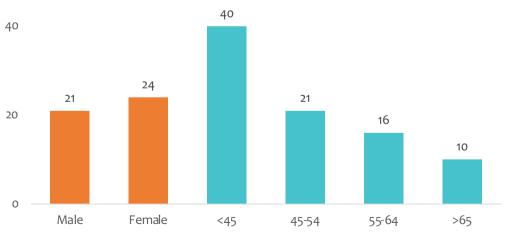
- People were more undecided on whether they'd use online support groups, with significantly less in the 'highly likely' group and more saying they were 'neither likely nor unlikely'
- Again, no difference by gender but a significant difference by age, with by far the greatest interest being expressed by under 45s.



40









Summary & Conclusions







The Sample



The sample for this survey is pleasingly representative in terms of age group. Seems likely to be due to the combination of:

- New recruits
- The subject matter perhaps more interesting/relevant to younger Panel members
- Changing the incentive from M&S to Amazon Gift Card

The sample is again skewed towards women, but not massively so (60%)

And also to the higher social grades, but there was no difference by social grade in responses, and so there's no evidence that the slight sample bias has affected the survey findings in any way.





Experience of video appointments

Whilst the incidence of telephone appointments relating to healthcare is widespread (65% have had at least one), only a small minority of people (11%) have had a video appointment since the pandemic started.

That said (and on a small base of 29), people's experiences of video appointments were very positive: 44% saying it was 'very good' and almost all the remainder 'fairly good'.

Almost everyone who'd had a video appointment felt the use of technology had benefitted them – generally due to the lack of travel time and not having to leave their home/safe environment

Only 18% had needed a subsequent f2f appointment – the great majority said their needs had been fully met by the video appointment.

24% did however experience some form of problem – generally due to unfamiliarity with the technology/process. These seem quite minor though and didn't have a significant impact on their overall positive experience.





Experience of telephone appointments

As many as 65% of respondents had experienced a telephone appointment with a health or social care professional during the pandemic.

They also had a very positive experience – 49% saying it was 'very good' and almost all the remainder 'fairly good'. It would be useful to know how those figures compare with those for pre-pandemic f2f appointments?

One-in-four had uploaded a photo and that had gone well for almost everyone, with no particular problems being evident.

One-in-two (and two thirds of under 45s) said they would be highly likely to accept a telephone appointment if offered one in the future, and only a small minority were reluctant to do so (typically being aged over 65)



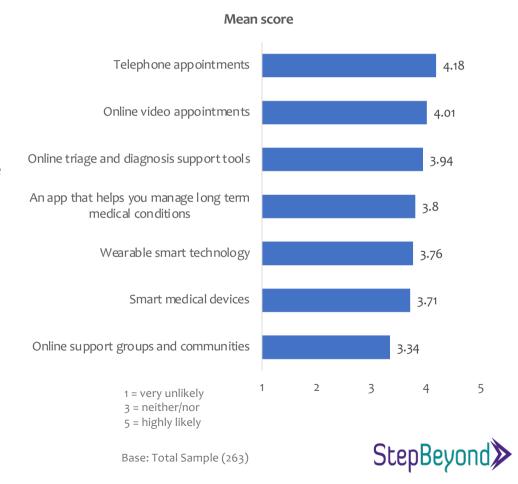


Propensity to accept health services using digital technology in the future

The research also found a very high acceptance of other uses of digital technology once things have returned to being 'more normal'.

This may however be slightly inflated due to the fact that this is an online panel (and hence members have to be quite comfortable with technology)

That said, the findings are really positive for all the listed uses of digital technology, which indicates a high level of public support and acceptance should they be introduced/expanded.





Propensity to accept health services using digital technology in the future

As would be expected, young people (i.e. under 45) would be much more immediately accepting than over 65s.

This seems to mainly be because they are more familiar with the technology and would benefit more from the time saving.

Conversely some older people are more reluctant because they're not familiar with technology and are also more entrenched in the 'usual' way of doing things. Some may not even have a smart phone and so were less positive about the use of an app or smart devices etc.

Many of the barriers could be overcome with more familiarity, reassurance and help using the new technology.

