




High versus low adoption and sustained use of telehealth among hospital based allied health services

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Aim (Phase 1): Examine telehealth (TH) activity and consumer, clinician and service-level factors that influence the use of TH in allied health services within Metro South Health (MSH, to develop a framework and practical recommendations for sustainable TH services.

What we did:

-  This study was conducted across 16 allied health departments from 4 hospital and health services across MSH
-  Service activity from hospital databases was examined across 4-timepoints: pre-COVID, peak COVID restrictions, easing of restrictions, and sustaining (Fig 1)
-  We conducted 80 interviews - 58 clinicians (6 disciplines - Fig 2), 14 managers & 8 administrative staff. Data analysed using the Non-adoption, Abandonment, Scale-up, Spread and Sustainability (NASSS) framework

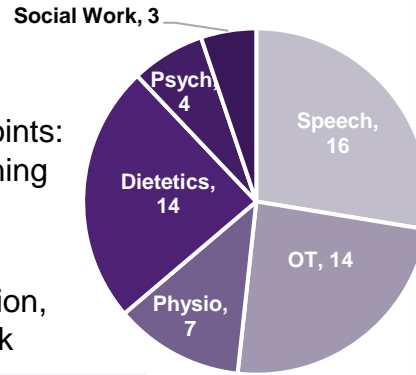


Fig 2

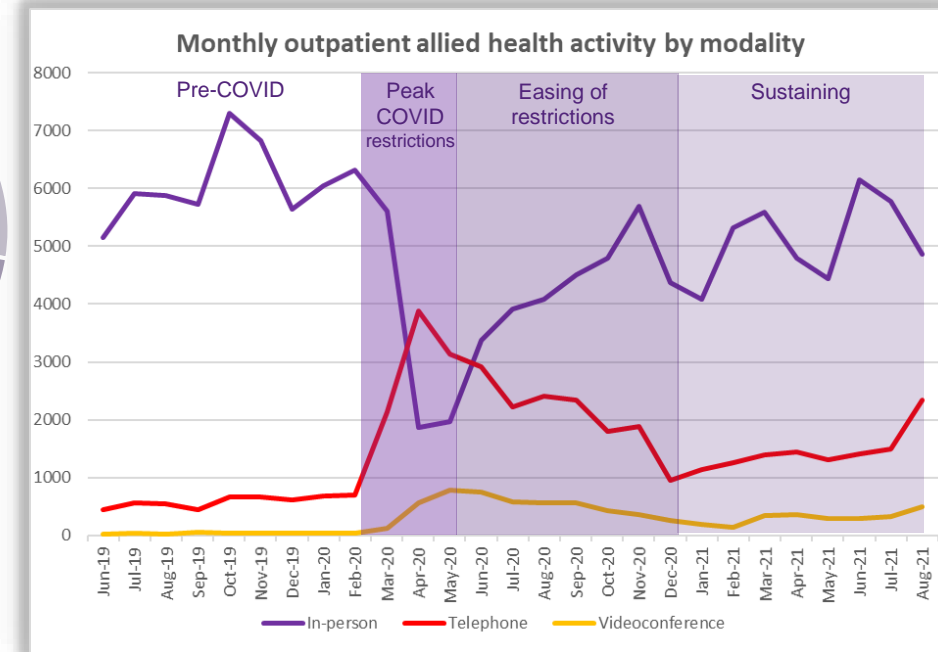


Fig 1









Conclusion:

The underwhelmingly small, sustained increase in telehealth beyond COVID can be attributed to a multitude of individual, service and system level factors. Telehealth re-design needs to consider and address factors across all three levels. We have developed a framework to assist this effort within MSH (view via the QR code, Fig 3).



Fig 3

Factors that support adoption and on-going use of videoconferencing:

-  Prior use and experience of telehealth before COVID
-  Adequate administration support
-  Opt-out rather than opt-in referral approaches
-  Consistent use of telehealth across the MDT
-  Delivery of a state-wide service
-  Staff willingness
-  Visible benefit for the consumer
-  Visible system level vision

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