

# Video Consultation Overview For Residential Aged Care and General Practitioner consultations

## What is a video consultation?

Video consultations are medical appointments that are conducted using a computer or iPad. They are sometimes also known as telehealth consultations. A video consultation connects a resident of a Residential Aged Care Facility (RACF) with a General Practitioner (GP) or specialist so that they can see and hear each other without having to be in the same place.

In general, portable equipment such as a tablet computer or a laptop equipped with a web camera, videoconferencing software and an internet connection are all that is needed.

Video consultations are particularly useful for residents in aged care facilities who have trouble getting out and about. In addition, they are helpful in the after-hours period when access to a GP might not otherwise be possible.

Video consultations do not replace face-to-face GP visits and are not suitable for all appointments. The resident's GP and the RACF's Registered Nurse and Director of Care will advise when it is suitable.

Benefits of video consultations for residents and the aged care facility include:

- Reduced waiting times
- Less distress for residents
- Reduced need for transport
- Easier for family and carers
- Increased access to specialists

Benefits for the GP include:

- Ability to see the patient in their usual surroundings.
- Ability to provide access to services quickly

## What equipment is needed?

To run a video consultation, the RACF will need three things:

### 1) A strong and reliable internet connection

This provides the audio-visual connection between the aged care facility and the GP. The better the connection, the better the picture quality and the more natural the consultation will feel.

The internet connection must be:

- High speed (ensures high quality picture)
- High bandwidth (enables other staff to use the connection at the same time without affecting quality)
- Reliable service (to avoid drops outs at busy times of the day)

## 2) Hardware

There are a wide range of video conferencing equipment options. Existing or inexpensive equipment can often be used. The equipment should provide a good quality sound and picture, but also be flexible and easy-to-use.

## 3) Software

Video conferencing software provides the ability to create a video connection between two devices. Cisco Jabber will connect the RACF to the health provider and is the product that we are using for this project.

## Organising a video consultation with a GP

The Registered Nurse will determine if a video consultation is required and will contact the relevant GP or delegate contact person to organise a time.

- The Registered Nurse will be with the resident during the appointment.
- The resident can also have a family member present if appropriate.
- The Registered Nurse will ensure the staff member is familiar with the equipment and set up prior to the appointment.

## Consent

Video consultations should have the same ethical standards applied as face-to-face medical appointments. Therefore, you will need to ensure the consent of the resident or their family/next of kin is obtained as per your usual treatment consent procedures.

## Getting Started

Remember to start preparing for the consultation 15 minutes prior to the appointment time.

- Get the resident ready for their appointment.
- Place “Telehealth consultation in process do not enter”, door hanger outside the room to ensure the resident’s privacy.
- Get equipment from secure storage or take the resident to the dedicated consulting room.
- Turn on the device (e.g. laptop or tablet) and open the videoconferencing program. You may need to activate the webcam. If you need more help operating your equipment, please refer to the instruction sheet.

## Setting up the room

### Lighting

- The room needs to be well lit. Normal room lighting is usually perfectly adequate.
- A desk lamp can be used if extra light is needed but bounce the light off a wall rather than shining it directly at the patient or clinician's face.
- Try to avoid major differences in brightness. If the patient sits behind a bright window, they will only be a black outline. To fix this, draw the blinds or close the curtains.

### Sound

- Microphones are not as good as human ears at filtering out unwanted sounds, so background noise such as traffic or loud air conditioning will be very prominent. The quieter the room, the better the sound will be.
- Making noise near the microphone, for example rustling papers, should be avoided as this can be loud enough to prevent voices from being heard.

### Field of view

- The width of the field of view which can be seen through the camera needs to be checked, particularly when there is more than one person in the room. It may be necessary to place the chairs closer together.
- It may be necessary to move the camera around, which could involve turning the screen if it is built into the device.

## During the video consultation

### Introductions

It is very important that the people at each site know who is at the other end and that everyone in the room has been introduced. Finding out there is someone in the distant room who is out of view and has not been introduced can be very uncomfortable for participants and constitutes a potential breach of privacy.

### Feeling awkward?

Video communication can sometimes feel awkward or artificial. If you'd like some further suggestions on what to do during a video conference, please read the video consultation etiquette factsheet by the Royal Australian College of General Practitioners available at:

[www.racgp.org.au/your-practice/e-health/Video/resources/factsheets/](http://www.racgp.org.au/your-practice/e-health/Video/resources/factsheets/)

Remember:

- Only one person can speak at a time.
- Speak at a normal volume.
- Pause and wait to hear comments before speaking again.
- Video consultations can occur the same way as a face-to-face consultation.

## After the consultation

At the conclusion of the video consultation, agree on who will action changes and requests (such as prescriptions and pathology requests).

Take a few minutes to have a short debrief with the resident. Ask how they found the video consultation and if they have any questions or feedback.

## Trouble shooting

For a video consultation to be successful, both the GP and the patient must be able to see and hear each other during the appointment. It is a good idea to do some test calls prior to the consultation to make sure everything works. If the internet connection is not good enough for the video conferencing to work, you may need to try a different room.

Below are some further options to check if you are having trouble getting the video consultation software to work. Remember you will need to check each of these items at both ends.

<b>Voice drop-out</b>	If voice keeps dropping out during the videoconference or you are experiencing significant delay, try turning off the sound and using a landline with a speaker phone for sound instead.
<b>No Wi-Fi connection</b>	If you are unable to get a connection using Wi-Fi, try using a mobile hotspot.  Compare this hotspot connection with the Wi-Fi connection.
<b>No sound</b>	If you cannot hear any sound from the iPad, try turning up the volume using the volume control button on the side. Ensure that any external speakers are plugged in.
<b>No vision</b>	If the other person cannot see you, ensure your camera is on and facing the right way.
<b>Connectivity</b>	Always check connection points.