

COVID-19: ACTION BRIEF

Title

The development of a person centred virtual visiting service to mitigate the impact of COVID-19 on hospital-based care in Scotland

Country

United Kingdom

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Key learning points

- A person centred virtual visiting service was key to the delivery of holistic care to patients admitted to hospital in NHS Greater Glasgow and Clyde during the COVID-19 pandemic, including ensuring ongoing support and engagement from family and carers.
- The virtual visiting service involved a multidisciplinary team effort across all hospital sites, including adapting the digital health technology for specific patient groups.
- The use of digital literacy support tools are key to equitable access and provision of such services.

How has COVID-19 impacted essential health services in Glasgow (Scotland)?

NHS Greater Glasgow and Clyde (NHSGGC) is the largest healthcare system in the UK employing around 39,239 staff and serves a population of around 1.4 million (21.4% of the Scottish population). There are 35 hospitals of differing types providing a comprehensive range of acute hospital, maternity, mental health and community care facilities.

In response to guidance from the Scottish Government in March 2020, severe restrictions to in-person visiting in our hospital has been in place throughout the Covid-19 pandemic.

This has had a significant impact:

- Due to the restrictions on visiting, patients were separated from their families resulting in feelings of isolation, loneliness and low mood.
- Family members and those close to the patient not being able to engage and be involved in decisions about plans of care, provide updates on their insights into the progress of those who matter to them or to alert healthcare staff to signs of deterioration. This has also meant relatives have not been involved in rehabilitation and discharge planning in the way they would normally be prior to Covid-19.
- Not all patients or relatives have their own mobile phones or other devices to enable them to stay in touch with their families and friends virtually.



Photo: Ronald Black

What was the intervention to mitigate this impact?

As a result of the Covid-19 visiting restrictions, an alternative solution was needed to:

- 1. Support patients to maintain contact with their family and friends.
- 2. Enable healthcare staff to maintain a personal face-to-face connection with family members to discuss care-planning arrangements.
- 3. Provide a range of digital support tools and apps to support and enhance diverse communication needs and support health and wellbeing for patients in our care.

Person-centred virtual visiting (PCVV) was implemented across all hospital sites in NHSGGC. This involved the use of mobile tablets to allow patients and clinicians to communicate with family members. Recognising that not all patients have their own device, hospital tablets were set up to support video calls. Most wards (approx. 300 wards) have been offered a minimum of two tablets each. This has been a collaborative effort involving eHealth, Clinical Governance, Infection Control, Information Governance, Knowledge Services, Equality and Human Rights, the Public Health Teams and Endowments Management Committee.

How did this intervention help in the maintenance of essential health services?

The establishment of virtual visiting has provided the opportunity to maintain, where possible, the pivotal role family members and those closest to the patient normally play in supporting patients. This includes social interaction, providing emotional support, contributing to care planning discussions, rehabilitation sessions and discharge planning discussions.

In addition, the AHP team are using the service to involve family and carers in 'virtual home visits' when planning for discharge, including assessing the home environment for modifications and adjustments. Furthermore, Healthcare Chaplains are able to meet with patients virtually to provide spiritual care, offer support and provide a listening service. Virtual visiting has also allowed patients and families to celebrate special events together such as birthdays, anniversaries and to connect patients with family members all over the world, which would not have been possible without the availability of technology in all our wards.

To date we have received 179 survey responses with the majority complementary about the experience. This has had a positive impact on both patients and staff members. An example of the feedback received: "This was just amazing! I have not seen my uncle for 2 years due to travel restrictions with COVID. He has been in hospital for over 3 months and his wife has only seen him briefly twice. My uncle was over the moon as was I.". As a result of this initial success, a business case is now in development to ensure virtual visiting is integrated and sustained as part of our long-term approach to person-centred visiting.

What were the key challenges?

- **Technical challenges** this included issues with connectivity to the hospital Wi-Fi system on some of our hospital sites. As a result, tablets with mobile connectivity were deployed.
- Infection Control Measures a strict infection control protocol had to be approved to ensure the devices are sanitised before and after each patient use with an approved product which does not damage the integrity of the devices.
- **Digital literacy** To support our virtual visiting approach a range of self-help guides have been developed and published on the **NHSGGC website**.
- Adapting the PCVV to specific patient groups some patients found it difficult to hold the mobile tablet independently due to frailty and acuity of their illness, often dropping the device, and losing connection to the video call. Modifications have been developed to accommodate these needs i.e. built-in stand and freestanding carts. This has allowed staff members to maintain a social distance whilst still being available to provide support to patients when required.