



# What factors influence patient preference for communication technology consultations in an orthopaedic rehabilitation setting? A qualitative abductive analysis

Anthony Gilbert<sup>1,2,3</sup>, Jeremy Jones<sup>2</sup>, Maria Stokes<sup>2,4</sup>, Carl R May<sup>3,5</sup>

<sup>1</sup> Therapies Department, Royal National Orthopaedic Hospital, Stanmore, UK

<sup>2</sup> School of Health Sciences, Faculty of Environmental and Life Sciences, University of Southampton, Southampton, UK

<sup>3</sup> NIHR Applied Research Collaboration, North Thames.

<sup>4</sup> NIHR Applied Research Collaboration, Wessex

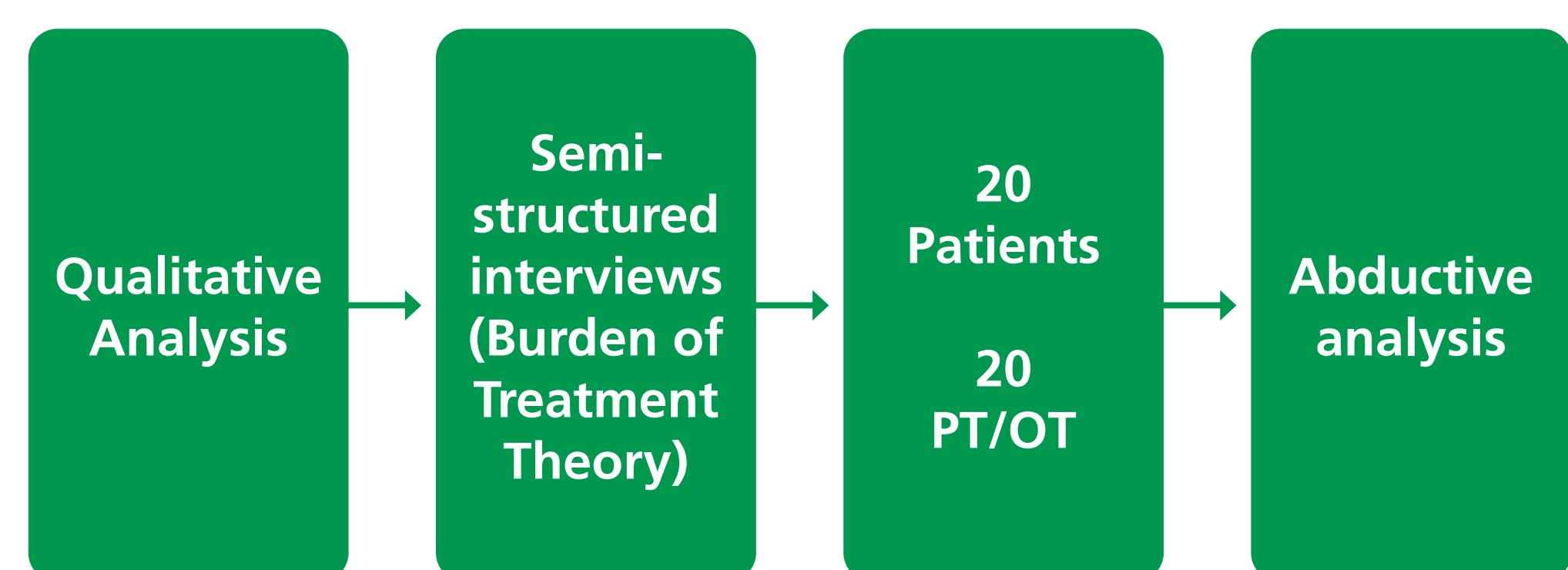
<sup>5</sup> Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, London, UK

## Background

- Virtual consultations (VC) was a core feature of the NHS Long Term Plan. Since the onset of COVID19 uptake of VC has been widespread across all areas of healthcare. It is highly likely VC is here to stay.
- The objectives of this research were to identify, characterize and explain factors that influence patient preferences for video consultations in an orthopaedic rehabilitation setting.

## Methods

Ethical approval was received for this study (Approval received 4th December 2018 from the South Central-Oxford C Research Ethics Committee [IRAS ID: 255172, REC Reference 18/SC/0663]).



### Competing interests

None to declare

### Funding

Anthony Gilbert is funded by a National Institute for Health Research (NIHR), Clinical Doctoral Research Fellowship for this research project (ICA-CDRF-2017-03-025).

### Patient and Public Involvement

The CONNECT Project Patient and Public Involvement steering group (PPISG) has been set up to provide guidance on the conduct of the research (details available from [www.theconnectproject.info](http://www.theconnectproject.info)). The first meeting of the PPISG was held in August 2016 prior to the submission of the research to the National Institute for Health Research in May 2017. A discussion was held about the overall research aims which supported the identification of the research questions. The PPISG has supported the design of the overall research plan and will continue to be involved during the development and refinement of each phase prior to the completion of each study protocol. The participant information and consent forms and the discussion guide for this research was reviewed by the PPISG. In addition, the PPISG will support the development of the lay summary outputs to be disseminated to patients and the public.

### Authors contributions to the published manuscript

AG wrote the paper and conceived the project with CRM, JJ and MS. CRM guided qualitative data collection. AG conducted all the interviews. CRM assisted with data analysis, and with AG developed the model. CRM, JJ and MS edited and critically revised the paper. All authors have read and approved the manuscript. AG is the guarantor of the manuscript.

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## Results

Forty-four participants were interviewed in the study; 22 patients (12 female, average age 46 [range 20-78]) and 22 healthcare professionals (13 physiotherapists, 14 female, average age 35 [range 23-52]) were included in the study. The average interview length was 48 minutes [range 28 – 81 minutes].

### Factors identified from the research

#### Situation

- Clinical status** the healthcare complaint, stability, reversibility, impact (with other complaints)
- Treatment requirements** the treatment and management required. Restrictions imposed
- Care pathway** the availability of healthcare to the patient

#### Expectations

- Desire for contact** whether patient / HCP believes FF more capable than VC
- Psychological status** the psychological status of the patient and the impact of delivery
- Previous care** experience of previous care
- Perceived requirements** the negotiated requirements of the session

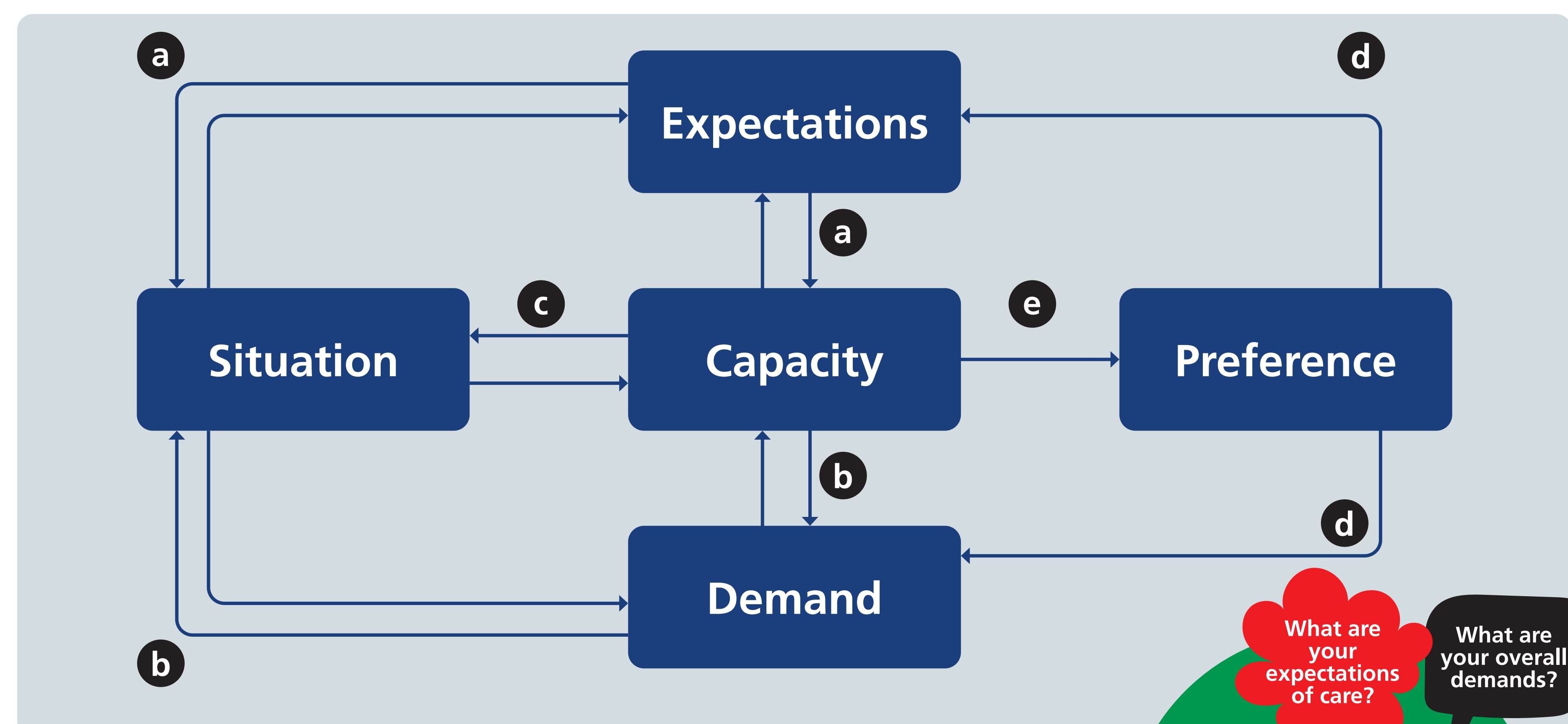
#### Demand

- Care factors** the requirements of care
- Social factors** the competing life demands
- Consequences of choice** the things people need to do as a direct consequence of choice

#### Capacity

- Financial** the ability to free up financial resources
- Infrastructure** access to material and informational resources
- Social** support available through the social network
- Healthcare System** sources of healthcare capacity

## Conceptual model of factors



(a) The relationship between **Situation** and **Expectations**

(b) The relationship between **Situation** and **Demand**

(c) The relationship between **Situation** and **Capacity**

(d) The consequences of **Preference**

(e) The formation of **Preference**



## Impact

These results can inform the development of patient centred care pathways utilising virtual consultations.

