



**Global Centre for
Modern Ageing**



The Future of Telehealth - Refining the Blend

KEY INSIGHTS FROM AN EXPANSIVE STUDY
INTO AUSTRALIA'S RESPONSE TO COVID-19

AUGUST 2020

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The global pandemic has thrust telehealth upon clinicians and patients alike. A light has now been shone on the added benefits of telehealth, but like all things, it too is not without its limitations. The future of health and care will only be successful if careful attention is paid to how telehealth and traditional models of care can work together to provide the best possible patient experience and health outcomes. A blended future is one we must work towards. This research informs the beginning of this journey.

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- Prof Justin Beilby,
General Practitioner and GCMA Advisor

Foreword



While the rise of telehealth happened suddenly, the benefits it provides Australians are becoming clear. Blended care will be the way of the future.

As the pandemic continues, the Global Centre for Modern Ageing continues to reach out to Australians as part of an expansive study to understand their evolving experience during the pandemic.

Our last report *Telehealth - Here to Stay?* responded to the rapid adoption of telehealth in Australia since the COVID-19 outbreak. We reflected on people's receptivity, use of, and experiences with telehealth. The report sparked fascinating conversations and raised various questions, many of which have remained unanswered, until now.

How can telehealth secure its future and improve the patient and health outcomes for all Australians? Our latest research suggests that the secret to its success is in the blend, understanding how telehealth can be integrated with existing approaches, to offer new models of care that optimise clinician and patient experiences, and improve health outcomes into the future.

A shift in mindset is critical; a willingness to step away from what was, and leap into what could be. Unfortunate circumstances have created a golden opportunity. I invite you to join us on this exciting journey informing the future of health care.



Julianne Parkinson
Chief Executive Officer
Global Centre for Modern Ageing

Key findings

Finding: **Experiences with telehealth continue to be positive.**

76%

Trust in technology for telehealth is generally high amongst older Australians, with 76% having trust in phone calls and 64% having trust in video calls.

76%

76% of older Australians thought that personal interaction with telehealth via video call was the same as or better than face-to-face, compared to 68% for telehealth via phone call.

19%

Amongst those 60 and over who had a telehealth appointment via phone call, 19% were offered a video call (compared to 44% of those under 60). They were also less likely to be offered face-to-face appointments.

20%

20% of Australians had used telehealth prior to the COVID-19 outbreak, whereas 47% have used telehealth since.

7%

Those having a phone call with a new practitioner were offered a face-to-face appointment 7% of the time (vs. 31% if seeing a previous clinician).

>50%

Video call and face-to-face appointments were offered more for general check ups, healthy lifestyle conversations or mental support, with over half of patients being offered these alternatives.

68%

The perceived importance of practitioners providing appointments via video or phone call in the future declines with age, with 68% of those 60+ perceiving a telehealth offering as important, compared to 82% of those under 60.

61%

61% of older Australians were willing to have a telehealth appointment via phone call in the future, while 45% were willing to have an appointment via video call. Willingness to have an appointment via video call was higher for younger Australians.

Key findings

Finding: **Telehealth technology should be device and software agnostic.**

38% of older Australians are using Apple smart devices for telehealth consultations, compared to 66% of younger Australians.

38%

42% of those aged 60 and over used a smartphone for video calls, but laptop, desktop computers and tablets were also commonly used.

42%

Finding: **Existing relationship between patient and practitioner is an important consideration.**

80% of older Australians were satisfied with telehealth via phone if they were engaging a practitioner they already knew, compared with only 59% of those who were seeing a new practitioner.

80%

When engaging a new practitioner via phone call, 39% of older Australians thought that the quality of care and/or treatment provided was worse than face-to-face, compared to 15% of those seeing a practitioner they have engaged before.

39%

Finding: **Phone calls are preferred, despite more positive experiences with video calls.**

Satisfaction with telehealth was higher for video calls, with 87% of people satisfied with their experience, compared to 78% for phone calls.

87%

Yet, across all types of appointments, the majority of people indicate that they would prefer appointments to be face-to-face or via phone call. This is consistent in both the under and over 60's, but may be driven by different motivations (e.g. comfort with technology or convenience).

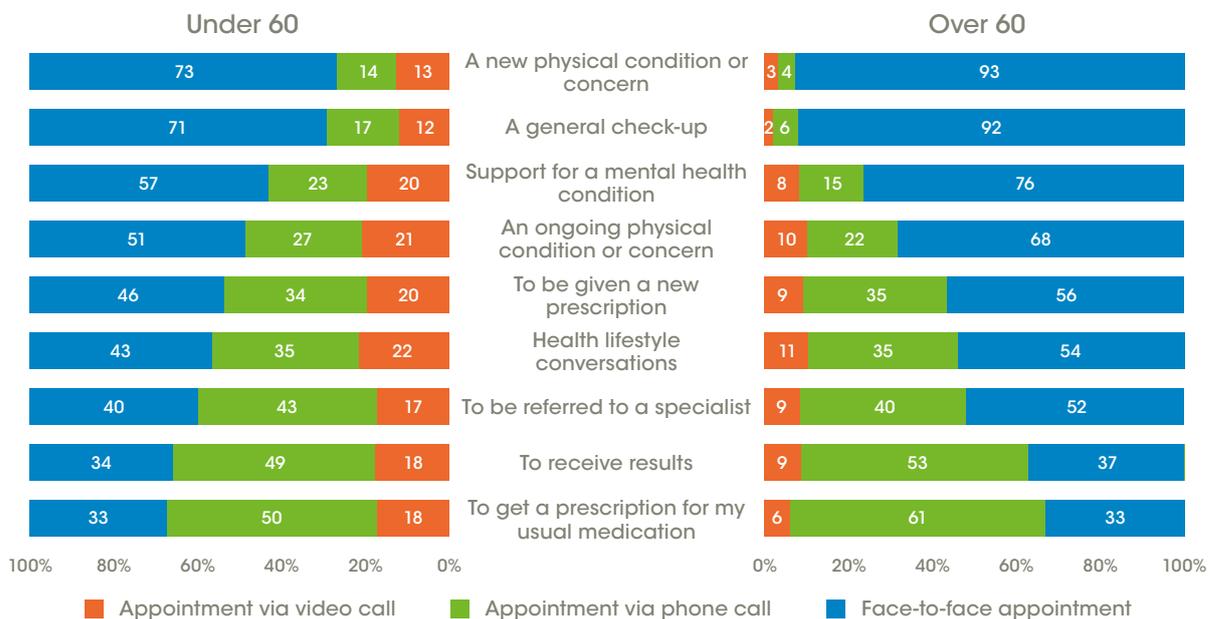
Key findings

Finding: The optimal telehealth blend should consider the purpose of the appointment, patient preferences, and the relationship.

Older Australians generally prefer face-to-face appointments, however several opportunities for telehealth exist, especially via phone call. The chart below shows preferences for appointments of varied purpose, and helps to inform clinicians about the right blend.

Prescription renewal and receiving results are great opportunities for telehealth; while new physical conditions and general check ups are less suited. For other needs, patients should be empowered with choice where possible. Addressing current limitations and alleviating concerns may increase telehealth uptake.

The nature of the clinician-patient relationship is also a crucial element. For those experiencing telehealth with a new clinician, the perceived value for money, personal interaction, quality of care and time spent in the appointment was more likely to be considered worse than a face-to-face appointment.



Firsthand experience

Finding: **While many benefits are noted, there are concerns and areas for improvement regarding privacy, technology and the quality of service.**

"List the sort of things that can be done over 1. audio and 2. video. Many people might not be aware of this and assume they need face-to-face."

**Male
Aged
70+**

"The information exchange is not as rich via technology, and incidental communication which can lend important context to diagnoses, may be lacking."

**Female
Aged
56-60**

"The person should clearly identify themselves and give the reason for the call. This gives a certain amount of security, that it is in fact, the person who you should be talking to."

**Male
Aged
65-69**

"I'm not sure the audio set-up in the doctor's surgery was optimal - I think that the healthcare professionals should receive additional specific training for this."

**Male
Aged
70+**

"We know from current research that medical practitioners are using phone over video, but when they are given an easy solution ...they will use video. They (practitioners) are the laggards, not older consumers who do want to engage with this technology."

**Female
Aged
70+**



Opportunity for industry: **Adopt a blended approach**

Face-to-face appointments will always have their place in healthcare. However, telehealth has enabled greater convenience and flexibility, as well as providing positive experiences for patients of all ages. There is strong evidence to suggest that a blended approach is both needed and possible. We suggest that clinicians consider the following:

- Offer telehealth for relevant appointments, ensuring that audio or video are offered for appropriate patient needs.
- Enable consumer choice, giving them freedom to choose models of care that suit their needs and preferences.
- Give preference to face-to-face consultations for new patients.
- Use technology that is device and software agnostic, and set up appropriately in the clinic, coupled with sufficient clinician training.
- Have a convenient booking process, adequate and timely scheduling and share necessary information prior to the appointment.

A blended future empowers clinicians and patients with optimised healthcare experiences and outcomes, by utilising the features and benefits of all models of delivery.





Our Response: **GCMA's commitment**



The latest revelations in telehealth give rise to a need to better understand the 'end to end' experience of home health so we can shape personalised offerings that meet the varied circumstances, preferences and needs of both patients and clinicians.

At the GCMA, we have been encouraged by feedback relating to our previous waves of research which have heightened awareness and curiosity by people at home, healthcare professionals, entrepreneurs, researchers and governments.

We will continue our inquiry into the at home health experience, including a deeper understanding into the optimal blend of care from both the patient and clinician perspective.

We are committed to sharing our insights publicly and actively participating in leadership forums to facilitate meaningful developments in the home health industry.

Leveraging our new understanding, we are forging collaborative partnerships with those organisations who are excited to lead ethical and new evidenced based developments in real life settings to advance the home health experience.

The broader conversation: A global change

Telehealth is increasingly at the centre of inquiry and discussion about the current and future of healthcare delivery. We report on some of the key conversations emerging from other research findings.

Currently, patient awareness for telehealth is growing in proportion to the frequency of attendance. We encourage clinics to push messaging about their telehealth capabilities within the clinic and also via their website, Facebook page and through SMS broadcasts. "Many patients are happy to pay privately for telehealth appointments. However, it will be important for clinics to proactively communicate changes as the COVID-19 restrictions are lifted."

- Telehealth Patient Survey: Australians share their views on telehealth during COVID-19. Published by HotDoc.

Dr Steven Kaye, a GP and Deputy Chair of the RACGP Expert Committee on Practice Technology and Management, said it is positive to see GPs transforming the way they operate and adopting video technology. Dr Kaye said the RACGP is committed to working to overcome any hurdles for GPs. "We want to continue working with Government to help GPs and patients embrace telehealth and resolve the obstacles some GPs have identified," he said. "For too long general practice has been stuck in the 1970s. Let's learn from this experience and bring consultation services up to speed".

- GPs have embraced telehealth, survey finds. Published by Anastasia Tsirtsakis, reporting on findings from the RACGP survey.

"Telehealth is not as simple as replicating face-to-face health services via technology. Telehealth is unfamiliar for both parties and crossing that unfamiliarity typically takes time and effort. "What helps to build trust in a virtual consultation is feeling that there's some sense of connection or commonality. If we can relate to each other that helps to build trust. This is why it's really important to connect at a social level at the beginning of a consultation."

- Trust and the future of telehealth services in Australia. Published by Nicole Gillespe, KPMG and University of Queensland Business School.

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During the global pandemic, trust in technology assisted healthcare has never been higher. The safety versus privacy debate has certainly fallen on the side of safety. Digital health also shows us a more consumer centric, convenient way of engagement, and I am convinced the demand for such services will continue post-pandemic. Checking the pulse of the nation, the GCMA report is a valuable resource for anyone involved in healthcare delivery, including governments, providers, insurers, technology companies and consumers.

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- Dr Terry Sweeney, CMG
Global Digital Health Expert and GCMA Advisor

About the research

Aim

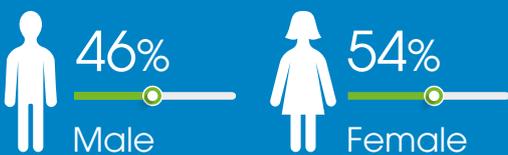
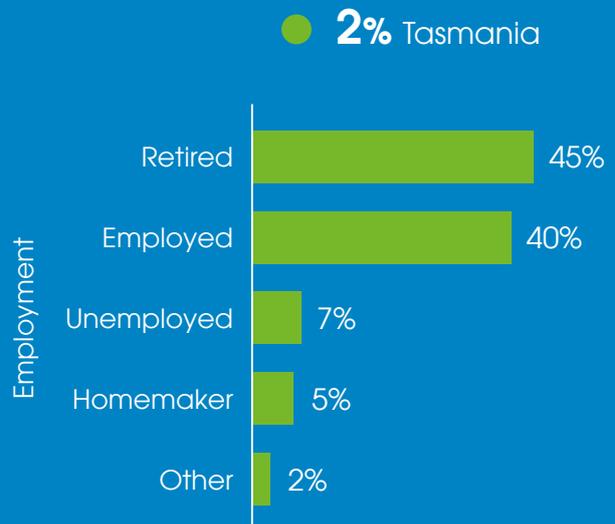
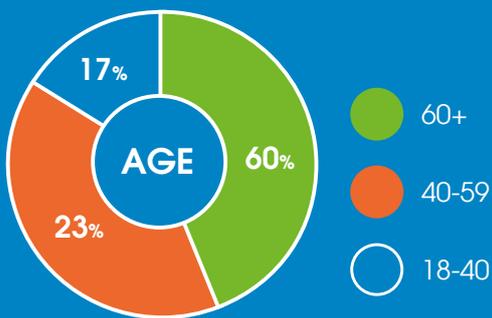
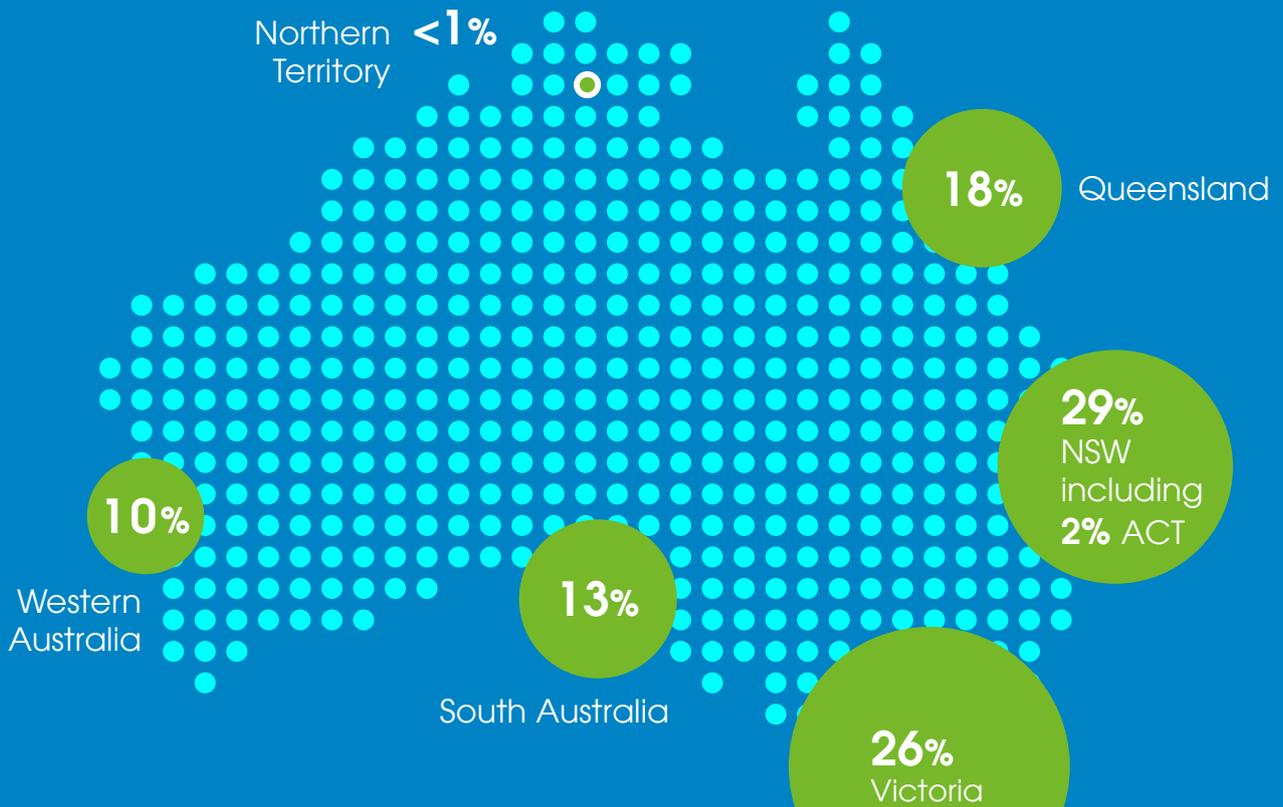
The aim of this research is to understand the evolving experience of Australians during the coronavirus pandemic.

The results in this report are drawn from the second component of a larger multi-faceted study to gauge how people are adapting to and navigating changes during this unique period. Our second survey in this research series focused on telehealth to better understand the experiences of those who have engaged with telehealth services during COVID-19.

Methodology

Through an online survey, the Global Centre for Modern Ageing received insights from 1,228 Australian adults (18 years and over). The survey was open from 13 - 26 July 2020.

The sample



Questions about the research?

If you would like to know more, please contact our
COVID-19 research team leads :

- **Dr Amy Wilson** at amy.wilson@gcma.net.au
- **Dylan Lee** at dylan.lee@gcma.net.au

What's next?

This report is the third of a multi-staged piece into the effects of the
COVID-19 pandemic on Australian life.

To read our other reports from this research,
please visit gcma.net.au/covid19/research

About GCMA

The Global Centre for Modern Ageing (GCMA) serves as a leading response to the international ageing phenomenon.

Modern ageing sparks an inclusive future that engages people throughout the whole of life's course to participate and belong in the ways they value.

The GCMA provides world class research, advisory, advocacy and living lab services for governments, businesses and organisations. We help to improve the development of products, services and solutions, and to understand the challenges and opportunities presented by the changing demographic landscape.

The GCMA is a not-for-profit organisation that provides national and global clients with an independent, specialist and internationally acclaimed service offering.

Led by CEO Julianne Parkinson, the GCMA and its LifeLab network includes a product and technology testing environment facilitating user co-design, located in South Australia's Tonsley Innovation District.

The GCMA's team of international subject matter experts includes:

- Health and wellbeing research
- Global digital health
- Artificial intelligence and the human interface
- Gerontology

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