Setting up and running Virtual Clinics

Monday 9 October 2017 De Vere West One Conference Centre, London

Chair and Speakers Include:

Mr Bibhas Roy  
Consultant Orthopaedic Surgeon  
& Virtual Orthopaedic Clinic Lead  
Central Manchester University Hospitals NHS Foundation Trust

Dr Tim Yates  
National Medical Director’s Clinical Fellow  
NHS Digital

Supporting Organisations
Setting up and running

Virtual Clinics

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Chaired by Mr Bibhas Roy Consultant Orthopaedic Surgeon and Virtual Orthopaedic Clinic Lead at Central Manchester University Hospitals NHS Foundation Trust, this conference focuses on setting up and running virtual clinics. Virtual clinics are increasingly being used in healthcare to reduce outpatient appointments, reduce DNA rates, save money and ensure the patients that do need to be seen face to face by a consultant have enough dedicated time. A large number of appointments can be replaced by virtual clinics, for decision making, consultation and outcome analysis.

Expert sessions, case studies and an extended masterclass will focus on understanding service virtualisation, developing virtual clinics, developing policy and procedure to support clinic working and understanding information governance implications. Case studies will share experience from a variety of virtual clinics in specialties such as Orthopaedics, Paediatrics, Diabetes, Kidney Disease, Colorectal Surgery, Urology, Obstetrics & Gynaecology, Follow Up and using Virtual Technology to create Virtual Wards in Care Homes for GP review.

“We aimed to provide more accessible and cost-effective diabetes care by replacing routine follow-up outpatient appointments for patients not requiring physical examination with web-based consultations; evaluated using qualitative and quantitative methods... We have reduced our DNA rate to 13% (62% uptake from patients) and improved blood glucose control in those who routinely use online care. Patients reported that, compared to face-to-face appointments, web consultations saved them time, were far more convenient, cheaper, that they preferred them and would be more likely to attend them. This has implication for DNA rates. Staff and patients reported that the quality of care over webcam was at least as good as that provided face to face. Initial savings are modest, through increased productivity, however results indicate that more substantial savings will follow through.” Dr Shanti Vijayaraghavan Consultant Physician, Diabetes and Endocrinology Newham University Hospital – Barts Health, speaking at Virtual Clinics April 2017

This conference will enable you to:

• Network with colleagues who are working to develop Virtual Clinics
• Learn from established practice in setting up Virtual Clinics
• Reflect on national standards for Virtual Clinics
• Develop your skills in the use of virtualization technology
• Understand risk issues and which patients are suitable for Virtual Consultations
• Understand the role asynchronous virtual clinics and questionnaires
• Ensure delivery of effective governance and security
• Understand how the patient journey needs to change
• Identify key strategies for commissioning and negotiating tariffs
• Update your knowledge on legal issues and developments
• Self assess, reflect and expand your skills in clinical audit practice
• 100% of delegates at our previous conference on this subject would recommend it to a colleagues

Delegates from the last conference stated:
“excellent, overall a very good conference and provides lots of confidence to new consultants who wants to set up a clinic”
“very informative, knowledgeable and experienced speakers”
“very useful information on existing and expected virtual aspects of healthcare”
“clinical examples very relevant to help deliver context applications – lots of different models shown – all relevant to my practice”

Follow the conference on Twitter #VirtualClinics
10.00 Chair’s welcome
Mr Bibhas Roy Consultant Orthopaedic Surgeon & Virtual Orthopaedic Clinic Lead Central Manchester University Hospitals NHS Foundation Trust

10.10 EXTENDED SESSION: Setting up and running Virtual Clinics
Joe Wherton Research Fellow University of Oxford
• setting up and running virtual clinics: where to start and tips for success
• our experience and the patient pathway
• developing virtualization by non face to face interaction
• what defines ‘quality’ in a virtual consultation and what are the barriers to achieving this?
• how is a successful virtual consultation achieved in an organisation whose processes and systems are mostly oriented to more traditional consultations?
• what is the national-level context for the introduction of virtual consultations in NHS organisations, and what measures might incentivise and make these easier?
• looking ahead to the health service of the future

10.55 Developing National Standards for Virtual Clinics
Dr Tim Yates National Medical Director’s Clinical Fellow NHS Digital
• developing national standards to support Virtual Clinics
• the use of skype for e consultations
• developments at NHS Digital

11.25 Questions & answers, followed by tea & coffee at 11.35

11.40 Information Governance, Consent & Legal Issues and Virtual Clinics
Ros Foster Partner Browne Jacobson LLP
• information governance and virtual clinics
• principles of information sharing and consent
• legal issues to be aware of
• potential challenges and examples in practice

12.10 EXTENDED SESSION: Virtual Clinics: Governance, Security and Technology
Mr Bibhas Roy Consultant Orthopaedic Surgeon & Virtual Orthopaedic Clinic Lead Central Manchester University Hospitals NHS Foundation Trust
• governance of virtual clinics
• developing the business case
• the supporting technology
• communicating the clinic and developing referral processes
• monitoring quality and effectiveness
• issues around security
• what are the costs involved, and the savings

12.55 Questions & answers, followed by tea & coffee at 12.15

13.00 Extended Interactive Discussion, followed by lunch
13.15 Virtual Clinics Networking Lunch

Virtual Clinics; Case studies and Practicalities

14.00 Virtual Clinics: Redesigning the patient pathway
Lucy Cassidy Fracture Care Extended Scope Physiotherapist Brighton & Sussex NHS Foundation Trust
• winning hearts and minds of clinicians and patients
• redesigning the patient pathway
• our experience in and an overview of our virtual clinic

14.10 The Practicalities of Virtual Clinic implementation: Case study: An Allergy Virtual Clinic
Roisin Fitzsimons Consultant Nurse Allergy Service Lead for Quality Patient Experience and Transformation Guys & St Thomas’ NHS Foundation Trust
• setting up and running a nurse led allergy service
• telephone clinics, running with virtual, to improve efficiency
• our experiences: overcoming the challenges
• delivering quality service by utilizing resources effectively

14.50 Questions & answers, followed by tea & coffee at 15.10

15.00 Asynchronous Virtualisation: Supporting Virtual Clinics with web-based questionnaires
Case study: Virtual Clinics: From Urogynaecology to Pre Operative Assessment
Dr Stephen Radley Consultant Obstetrician and Gynaecologist Sheffield Teaching Hospitals NHS Foundation Trust
• understanding service virtualization: Theory, tools & pathways
• where to start? Lessons from our virtual clinics
• developing a web-based ‘Virtual Clinic’ in Urogynaecology; Combining on-line interviewing, using an electronic Personal Assessment Questionnaire (ePAQ) with telephone consultation
• benefits of virtual clinics for ‘sensitive’ conditions, practicalities and a walk through of how the clinic works in practice
• using electronic interviewing in other areas - Health economic, patient and patient flow benefits of web-based Pre Op assessment (ePAQ-PD)

16.10 From Virtual Clinics to a Virtual Ward
Dr Majid Akram GP The Deepings Health Centre
• Using Telemedicine platforms for Virtual consultations with care homes
• The development of GP led virtual ward rounds with care homes
• The GP perspective

16.40 Questions & answers, followed close at 16.50
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