

CFAHR Evidence Brief

Improving the uptake of telepractice at Allied Health: Development and implementation of a training package to support multi-disciplinary clinicians in the use of videoconferencing for outpatient services

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Alignment with [Metro South Health Research Strategy 2019 - 2024](#)

- Build research capability
- Increase research capacity
- Embed research in clinical services
- Translate research to better health
- Research excellence

Alignment with [Allied Health Research Capability & Development Strategy 2017 - 2020](#)

- Engage staff as research consumers
- Enable staff as research generators
- Build research-enabling infrastructure and strategic processes
- Strengthen leadership in research and innovation
- Enhance internal research collaboration and synergy
- Strengthen partnerships with consumers and external stakeholders

Alignment with [Allied Health Research Capability & Development Strategy 2017 - 2020](#)

- Standard 1 – Clinical Governance
- Standard 2 – Partnering with consumers
- Standard 3 – Preventing and controlling healthcare-associated infection
- Standard 4 – Medication safety
- Standard 5 – Comprehensive care
- Standard 6 – Communicating for safety
- Standard 7 – Blood management
- Standard 8 – Recognising and responding to acute deterioration

Practice Issue

Telepractice is used in a variety of settings across Australia to improve patient access to service delivery and improve clinical efficiency in high-demand services. There has been a steady proliferation of evidence supporting the use of telepractice to deliver outpatient-based clinical services across the continuum of care. Despite the documented benefits of telepractice-assisted models of care in allied health, and the advantages of their implementation, the uptake of telepractice models in clinical practice remains slow, and methods for facilitating implementation are inconsistent. Research has identified a number of potential barriers to the clinical utilisation of telepractice services by health practitioners. Chief among them is ensuring staff end users are sufficiently trained and confident in the use of telepractice, which in turn affects user acceptance and attitudes for success in clinical implementation. Despite this, there is limited research evidence surrounding the development and evaluation of telepractice training programs and their impact on changes in staff skills, confidence, and perceptions of telepractice-based services, or the uptake and/or implementation of telepractice into routine clinical care.

Evidence

The aim of the project was to develop, implement and evaluate a multidisciplinary telepractice training package for clinicians at Redland Hospital. Forty-one clinicians from the Speech Pathology department, Physiotherapy department and Chronic Disease team participated in a training package with a specific focus on staff skills training, resources, infrastructure and operational planning and organisational culture. Questionnaires were used to evaluate clinician self reported skills, confidence and perceived barriers and facilitators using telepractice at 3 time points (baseline, post-training and 6-months post- training).

Results demonstrated that participants' perceived knowledge and confidence significantly increased from baseline to immediately post-training, with a further significant increase from immediately-post to 6-months post-training ($p < 0.001$). Staff perceptions of telepractice were consistently high from pre- to post-training. However, multivariable modelling demonstrated a significant effect of profession on perceptions towards telehealth. Specifically, nursing staff were significantly more likely to have more negative perceptions of telehealth, than allied health professionals.

Thematic analysis of the enablers to telehealth uptake revealed three main themes: (a) perceived benefits to patient care; (b) training and practice; (c) resources and support. Thematic analysis of the barriers revealed four main themes: (a) staff knowledge and training; (b) staff confidence; (c) client factors; (d) infrastructure and resources. The first two of these barriers reduced as factors post-training.

Practice Change

These findings demonstrate that a comprehensive telepractice training package can improve staff skills and confidence in the use of telehealth, which can be sustained over time. Supporting and maintaining a positive telehealth culture within organisations as well as addressing real and perceived client factors appear integral to telehealth uptake. This study has led to a significant increase in the use of telepractice for allied health and multidisciplinary outpatient clinical services at Redland Hospital.

Publication/s

Morton, D., Domalewski, R., Harris, M., Scolari, N., Fulton, S., Hale, K., Ward, E. C., & Wishart, L. R. (in prep). Development and implementation of a training package to improve the confidence and competence of multi-disciplinary clinicians in the use of Telepractice for outpatient services. *Journal of Telemedicine and Telecare*.

Adapted from Tilley Pain (Townsville HHS)

Based on the Australian Healthcare and Hospitals Association's Health Policy Evidence Brief

Metro South Health Research Strategy 2019 – 2024 https://qheps.health.qld.gov.au/_data/assets/pdf_file/0012/2325000/research-strategy.pdf

Allied Health Research Capability & Development Strategy 2017 – 2020 <https://metrosouth.health.qld.gov.au/sites/default/files/allied-health-research-strategy.pdf>

National Safety and Quality Health Service Standards <https://www.safetyandquality.gov.au/sites/default/files/migrated/Overview-of-the-NSQHS-Standards-second-edition.pdf>