Use of digital technology

To minimise the risk of COVID-19 transmission, community service providers moved rapidly to utilise telephone and video consultations, where appropriate. The standard operating procedure for NHS community health services during the pandemic advised using digital technology ‘by default’ (NHSEI, 15 April 2020). In a recent survey, 83 per cent of community trusts reported that they have increased their capacity for remote (telephone and video) appointments (NHS Providers, June 2020). For example, Lincolnshire Community Health Services NHS Trust conducted 1,559 e-consultations between March and June, with an average 4.5/5 patient experience rating.

Some providers set up digital pathways and delivered physical and mental health services remotely, such as musculoskeletal services, group physiotherapy and ward consultations. One community interest company (CIC), Accelerate CIC, achieved the virtual transformation of its wound care service, which has facilitated patients to become more independent with the support of a structured self-care programme. Accelerate CIC is clear that patients are assessed based on risk, using clinical judgement, and those who needed urgent or essential face-to-face care during the pandemic continued to do so.*

* As presented at the NHSEI COVID-19 webinar for NHS community health services on 5 May 2020.

Tameside and Glossop Integrated Care NHS Foundation Trust expanded their digital health service to support care homes during the COVID-19 pandemic. The digital health service is a team of nurse assessors, clinicians and GPs, who provide support to care homes to help staff make informed decisions about their residents and prevent avoidable hospital admissions. Individuals and their carers, care home residents and staff, and the community rapid response teams, are able to contact the digital health service via Skype. Visits to patients’ homes or care homes continued where clinically necessary. The digital health team stepped up their service to offer 24-hour support and provided senior clinical leadership to help care homes with difficult clinical decisions. They did a virtual round every day of all care homes, including gathering information about the prevalence of COVID-19, which was then used to direct support with infection control. The service usually runs between 7am and 10pm seven days a week and provides other services including urgent care GP triage, falls prevention and community response to 999 calls. The existing Safe Steps app was expanded to include COVID-19 monitoring and was used by care homes to help identify patients requiring review and care interventions.

In addition to virtual consultations, many providers also set up remote monitoring services for patients at home or in care settings. These virtual wards helped identify the soft signs of deterioration in care home residents before medicalised symptoms develop and provided oxymeters to patients at home to monitor their oxygen levels. These virtual wards kept patients under the care of secondary care consultants, which avoided over-burdening GPs.