Overcoming Distance, Improving Care: The Impact of Telemedicine in a Teaching Hospital

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Background

Telemedicine has emerged as a crucial aspect of healthcare delivery in the modern era. The COVID-19 pandemic has significantly boosted its adoption, with teleconsultations serving as a means to overcome the barriers of distance and provide medical services to patients. [1]

The Teaching Hospital in examination has been at the forefront of this trend, leveraging telemedicine to deliver quality care to patients since the start of the pandemic period. This study aims to analyze the volume of activity and economic impact of telemedicine use in the Teaching Hospital and to gather the experiences and feedback of healthcare professionals involved.

Materials and methods

Administrative data regarding the activity of our Teaching Hospital were analyzed from January 2020 to December 2022, identifying telehealth-related records and costs for each considered operational unit. [2]

In-depth interviews were conducted with healthcare professionals to collect their personal and professional experiences with telemedicine. A questionnaire was adapted from the "Health Optimum Telemedicine Acceptance Questionnaire" [3] to gauge their technical and organizational perceptions of teleconsultations, their influence on patient health, and the overall quality of care delivered.

Results

35,192 records were identified as follow-up visits carried out in telemedicine, accounting for 4.78% of the total outpatient activities provided by the Teaching Hospital in the observation period.

During the first COVID19 lockdown in 2020 this percentage rose to 8.25%, involving 70% of the units with 11(20.75%) of them achieving more than 50% of the coverage. The usage has then declined with 48% of the units employing telemedicine in 2022, with a coverage of 2.60% of the total outpatient activities.

From a management perspective the average economical saving was estimated at 17.60€/televisit analyzing the Outpatient Performance Information Flow (SPA), considering only the direct personnel. While the medium length of the televisit was on average 0.16 hours shorter. Therefore it is possible to estimate the global savings in the period to be around 620,000€ and over 5800 hours.

Conclusion

The results of this study highlights the fundamental role of telemedicine in healthcare delivery during the COVID-19 pandemic.
The healthcare professionals who participated in the study acknowledged the need for training and a clear protocol for teleconsultations. The use of teleconsultations was not perceived as a replacement for in-person visits but as a means of enhancing them. The findings of this study align with the current literature and provide valuable insights into the experiences and perspectives of healthcare professionals on telemedicine.

References

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