Inquiry into Clinical Portals and Telehealth
Scottish Centre for Telehealth

Background

1. The Scottish Centre for Telehealth (SCT) was established in 2006 following publication of *Delivering for Health* in November 2005. The stated aim of SCT was to provide practical help to NHS Boards as they sought to realise the potential of telehealth development projects.

2. *Better Health, Better Care* restated the Scottish Government’s support for telehealth and noted how telehealth, when deployed effectively, may improve the patient’s experience of care by reducing the need to travel, or cross, major cities to hospital to receive care and treatment.

3. Over a five year period, SCT was charged with supporting and guiding the development of telehealth for clinical, managerial and educational purposes across Scotland.

4. The SCT was to provide support and advice to NHS Boards and to evaluate the potential benefits of new technologies, with the aim of making Scotland a recognised global leader in telehealth.

5. The potential of telehealth was reiterated in the national eHealth Strategy, published in June 2008. This strategy describes how eHealth has a role in supporting sustainable remote and rural health services. In particular, the strategy states how eHealth will continue to support developments in the areas of telecare and telehealth, through SCT, to expand the effective application of teleconferencing/teleconsultation and image transfer to support remote delivery of services.

6. Representatives of SCT last provided evidence to the Health and Sport Committee in June 2008.

7. In early 2009, the Scottish Government Health Department (SGHD) undertook a review of SCT and, following extensive communication with NHS Boards and others, concluded that there ‘is considerable support for the retention of telehealth expertise and clear evidence that the SCT has had significant successes in various discrete areas’.
Policy Context

1. Changes in demographics, and in particular an ageing population and the growth of people with Long Term Conditions, are driving changes in the demand for, and delivery of, health care services.

2. There is an increasing emphasis on delivering services in the local community and in supporting patients in their own homes.

3. Changing demographics and an ageing workforce also pose specific challenges for NHS Scotland in terms of managing its skilled workforce.

4. Telehealth offers considerable potential to alleviate these challenges. It provides NHS Scotland with the opportunity to develop more responsive, flexible and local services, and to support and develop its workforce through telecommunications.

Definitions

In the review of the Scottish Centre for Telehealth by SGHD, it was identified that terminology was a problem and that work needs to be done to simplify terms used in this area e.g. telehealth, telemedicine, telecare, eHealth, eCare etc. For the purpose of this document, the following definitions are assumed –

Telemedicine is the provision of healthcare at a distance using a range of digital technologies, including videoconferencing, with professional clinical involvement.

Telecare is the use of a range of technologies to support those in a home or community environment who would otherwise be at increased risk of coming to harm from a range of causes. Professional clinical involvement is not necessarily part of their package.

Telemedicine and Telecare are the two components of Telehealth.

Telehealth Deployment in Scotland

Recognising the need for brevity in this briefing document, the following is only a limited sample of the success stories from across Scotland. More information can be found at www.sct.scot.nhs.uk.

Scottish Tele-stroke Programme

- Thrombolysis support services via telemedicine have now commenced in Grampian, Lanarkshire, Fife and Western Isles. Other Boards are committed to follow,

- An award winning tele TIA service in Orkney has been operational for over a year.

- SCT is working in collaboration with the Regional Planning Groups to develop previously evidenced uses of Telehealth to improve region wide access to stroke care, for use at any stage of the stroke patient pathway i.e. thrombolysis support, TIA and stroke rehabilitation.
A tele rehabilitation pilot project is now underway for stroke patients in Grampian.

Paediatric Telemedicine Service

In January 2009, the Scottish Government published the National Delivery Plan for Children and Young People’s Specialist Services in Scotland. It establishes a national infrastructure for the sustainability of specialist children’s services and identifies work that needs to take place at a national and regional level to sustain and develop services.

A number of the plan’s clinical workstreams highlight the need to strengthen and develop tele-medicine links, particularly to support clinical networking and education.

Investment has allowed clinical network meetings for renal, gastro-intestinal, mental health, child protection, leukaemia and bone marrow transplant to develop with an increasing number of sites participating.

To improve the unscheduled care of children in remote and rural areas, investment has been made at Raigmore Hospital in Inverness, Royal Aberdeen Children’s Hospital, Belford Hospital in Fort William and Caithness General Hospital in Wick.

A pilot project will shortly be started test home-based equipment for children with complex needs and who are receiving palliative care at home.

Tele-dermatology

In the Western Isles and mainland Highland, it has been shown that a Tele-dermatology service has reduced the need for both patients and the dermatologist to travel and allows for prioritisation of cases. It has reduced waiting times for dermatology opinion for that population.

Digital images taken by GPs (NHS Tayside), community (NHS Forth Valley) or hospital-based (NHS Lanarkshire) medical photographers are assessed along with conventional referral information to permit prioritization and triage of patients to appropriate clinic or therapy list. The Lanarkshire service has shown that 'store and forward' can reduce waiting times to clinic and to definitive treatment.

For some time, a dermatology e-mail advice service has been run in NHS Lothian, receiving around 60 enquiries/month. It was principally setup to give advice but about one third of enquiries are for a diagnosis. Audit has revealed high GP and patient satisfaction and its use as an educational tool.

Tele-cardiology

Without telehealth, patients of Mid Argyll Community Hospital in Lochgilphead are faced with attending a general medical clinic locally or travel to Glasgow to a sub-specialty clinic. The introduction of tele-cardiology offers an increase to the number of services available locally and a reduction in the number of referrals to Glasgow for outpatient follow-up.
Long Term Conditions Management

- There are many examples of telehealth being used to support patients suffering from long term conditions. Most of these projects are still at the pilot stage. Many of these trials have been funded through the Telecare Programme, with involvement from the Scottish Centre for Telehealth.

- In particular, there are many pilots around the management of patients suffering from COPD. Of particular note is the work being undertaken in Argyll and Bute where there is a small trial using home monitoring to support patients with COPD at home. This pilot won the Improvement and Innovation category at the recent Health Awards dinner.

SGHD Review of SCT

The Review of the Scottish Centre for Telehealth was presented to the SCT Executive Group in August 2009 and released to a wider audience in September 2009. As well as recommending the continuation of a Centre, the review made a series of recommendations to better support the adoption of telehealth and to better support SCT itself. Amongst the recommendations were -

- The repositioning SCT within NHS24, recognising its potential as a service delivery and improvement organisation.
- SCT should become more strategic and initially focus on one or two clinical areas moving them from projects to universal use e.g. building on the existing paediatrics and stroke networks.
- SCT requires to develop a telehealth strategy which is underpinned by an IT infrastructure plan.
- Creation of a ‘telehealth network’ to share knowledge and experience throughout NHS Scotland.
- Closer working with the Joint Improvement Team who run the Telecare Programme.
- In collaboration with NES and other training stakeholders, SCT should develop telehealth education tools.
- Consideration should be given to the introduction of an element of core funding for national telehealth solutions.

Planned Activities

- The Transition of SCT to NHS24 is underway and will be complete by 31st March 2010
- Development of a Telehealth Strategy for Scotland by April 2010
- Development of a supporting Infrastructure Plan by April 2010
- Implementation of National Services e.g. Stroke and Paediatrics – ongoing
- Support of existing Health Board initiatives - ongoing
- Scoping of Developmental Initiatives e.g. Mental Health, COPD, Unscheduled Care – as part of strategy development
- Innovation/Emerging Applications e.g. Rehabilitation, Telecare – as part of strategy development
• Overarching Activities e.g. Education/Training, Clinical and Technical Standards, Communication, Ethics, coding – ongoing and as part of strategy development

Iain H Hunter
General Manager
Scottish Centre for Telehealth
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