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Lewis Macdonald MSP
Convener
Health and Sport Committee

By Email.

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Dear Lewis

I am writing to inform the Health and Sport Committee of the forthcoming publication, on 23 March, of the independent evaluation of the rapid rollout of the Near Me video consulting service in response to the COVID-19 pandemic. The evaluation was undertaken by a University of Oxford team led by Professor Trisha Greenhalgh, and built on their pre-pandemic evaluation which was published in July 2020.

As you will know, from March 2020 onwards, there was a rapid acceleration in the rollout and scale-up of the Near Me service, to reduce the number of face to face contacts with patients while enabling continued access to health and care services. Between March and June 2020 there was a 50-fold increase in video consultations, from 330 per week to just under 17,000 per week: the weekly number is now consistently around 22,000.

The detailed research findings cover that significant increase in video consultations; the role played in the rapid scale-up by the pre-pandemic national-level groundwork and targeted support for specific health and care settings; the value of a quality improvement approach; and the scale-up experience within the three health and care settings which were studied: Hospital and Community Services, General Practice and Care Homes.

Key issues covered include:

- a. **Clinical appropriateness:** the expansion of video consulting into clinical specialities where little or no formal physical examination is required, but where non-verbal cues and facial expressions are important.
- b. **Technology:** the generally high-quality video and audio provided by the Attend Anywhere video consulting platform; and some challenges for GPs in managing patient access by video due to their unpredictable workflows.
- c. **Benefits for patients, staff and services:** included reduced risk of infection, reduced travel by patients and staff, increased service capacity and opportunities created for service redesign.

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- d. **Concerns raised by patients and staff:** included inequalities in digital access, whose causes included technical barriers and limited IT literacy; and potential negative impacts on staff wellbeing.
- e. **Organisational issues:** the pandemic brought conditions conducive to adoption and scale-up of video consulting, but also challenges around IT infrastructure and arrangements for booking and managing appointments.

Early feedback of the lessons from this evaluation have already been reviewed by the policy team and have informed the continuing response to the COVID-19 pandemic, and also the move through into service recovery plans and remobilisation.

The report updates the ten recommendations from the previous report, and adds four new ones to reflect the research undertaken during the pandemic. In response to the recommendations, key areas of work moving forward will include:

- a. The Near Me Learning Network for health and care, with an ongoing focus on quality improvement approaches.
- b. Continued rolling programme to develop guidance for the use of video consulting, tailored for specific clinical specialties.
- c. Staff training and updates to online training materials.
- d. Ongoing schedule of support for local clinical champions via the Learning Network.
- e. Continuing collaboration with the Connecting Scotland programme to address digital inequalities.
- f. Support for General Practice staff to embed video appointments within their administrative routines.
- g. Collaboration with the Office of the Chief Social Worker to support the provision of care reviews to Care Home residents via Near Me.
- h. Support for expansion of Near Me to a wider range of social care settings and facilitate expansion to wider public services.

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