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Nurses' and Patients' Experiences of Tele-Consultations

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Abstract. The study focused on real-time video consultations (tele-consultations) as experienced by Danish hospital-based, respiratory nurses (tele-nurses) and patients with chronic obstructive pulmonary disease, COPD, discharged after hospitalization with acute exacerbation (tele-patients). Tele-patients and tele-nurses consider tele-consultations as distinct, but qualified care, enabling close relationships between patient and nurse. The nurses' performance and their professional identity changed. The patients become active, participants in their treatment and care.

Keywords. Telemedicine, nurse video-consultation, Tele-consultation, COPD consultation, Postphenomenologi

1. Introduction

Currently telemedicine is introduced with the expectation that it can solve basic challenges faced by the health system regarding an increasing number of patients with chronic service needs (1). The effects of tele-consultations, however, on the embodied, experiential and perceptual dimension of the relationship between nurses and patients are little known. This study focused on real-time video consultations (tele-consultations) as experienced by Danish hospital-based, respiratory nurses (tele-nurses) and patients with chronic obstructive pulmonary disease, COPD, discharged after hospitalization with acute exacerbation (tele-patients). The purpose was to explore how telepatients and telenurses use and develop sensual perceptions during teleconsultations; and how teleconsultations affect communication and interaction between patient and nurse, and to inform the implementation process in clinical practice. The study was carried out at OUH, Odense University Hospital & Svendborg Hospital, Denmark. The telemedicine service consisted of daily consultations during a week. The teleconsultations were conducted between telenurses and telepatients. The patients' tele-equipment consisted of a dedicated computer with built-in web camera, microphone, speaker and external measurement devices.

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2. Methods

Post-phenomenological (2) analyses of empirical data from fieldwork. Post-phenomenology is a practice-oriented, philosophical approach to understand how our sense of the body and our perceptual orientation in the world is affected by technological mediation. Participant observations and video recordings were carried out twice with eight patients, three relatives and eight tele-nurses; within the first two tele-consultations (un-experienced patient) and after five tele-consultations (experienced patient). Afterwards, individual semi-structured interviews were conducted with the same participants. Interviews were structured around tele-patients' and tele-nurses' general experience of tele-consultations, their use of tele-devices, and tele-nurses' experience of the significance of technology on tele-consultations and caring. A semi-structured focus-group interview, themed around their experiences of treatment and care for tele-patients at home, use of tele-devices, the tele-devices' influence on patient consultation, the care that can be performed, and which nursing skills are required. The analyses were carried out using meaning-condensation. The interviews were examined, natural meaning units were categorized and central themes were identified. The themes were analyzed in a post-phenomenological framework with a focus on technology-mediated perception, transformation and transparency.

3. Results

Tele-patients and tele-nurses alike consider tele-consultations as distinct, but qualified care, enabling close relationships between patient and nurse (3). Technological mediation of nursing actions changed the nurses' performance and their professional identity (3). The nurses amplified their audio-visual perceptions and their communicative skills and they relied on their patients as assistants. Correspondingly, the patients took on active roles in observation and measurement of their condition, and their self-image changed accordingly for them to become active, participants in their treatment and care (3). Less conclusively, it appeared that patients would take ownership of their own data and perhaps gain better insight into their illness and treatment (3). Occasionally, some tele-nurses experienced digital interactions as inadequate (3). Furthermore, tele-consultation was not appropriate for all patients (3).

4. Discussion

The findings indicate that a more individualized process is needed to decide on the right technology for each patient in the future.

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