**Personalised Care and Support Planning Using Video**

Most communication techniques used in face-to-face consultations are applicable to video consultations. Some practical and set up issues will need to be considered however before initiating a video personalised care and support planning conversation.

Ideally the person doing the review should already know the person - this may help with rapport and ease of communication.

The main limitation with video consultations is around practical examinations and sharing of physical information between parties e.g. self-monitoring.

**Practical issues**

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| **Tips for video personalised care and support planning - preparation and set up** |
| **Preparation**  | * Ensure the patient receives preparation materials and ask them to have this ready to review during the conversation
* Ask the patient to have a pen and paper to make a note of plans and actions
* Give the person an idea of the timing of the call so they can be ready to have a conversation
* Ask if there is anybody else they would like to have with them or clarify who else is joining the call or/and listening
* Where possible encourage people to share results (such as BP or capillary glucose results) electronically with professionals
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| **Setting up the video link**  | * Use a private, well-lit room and ask patient to do the same
* Before starting the consultation, check that the audio and video components are both working and ensure that your image is in the middle of the screen and zoomed in so that you are clearly visible at the patient end
* If you have a webcam positioned at the top of your monitor/laptop, position the image of the patient end as close to the webcam as possible so that it appears you are making eye contact with the patient
* Maintain eye contact with the patient by effectively using the camera and zoom in and out to pick up any non-verbal cues
* Be aware that video communication is generally a bit harder for the patient
* Take the patient's phone number in case the video link fails
* Ensure you have access to the patient's clinical record (ideally, have it available on a second screen and explain that you will sometimes look away at it) and that you will also be taking notes
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| **Tips for video care and support planning - conducting the CSP conversation**  |
| **Setting the scene** | * Spend a moment checking the audio and visual equipment is working adequately and prompt patient to optimise the technical set-up
* Check who you are talking to and if anyone else is present
* Check the location of the call and that is can be confidential and private
* Introduce anyone who is joining the call
* Take and record verbal consent for a video consultation - explain that the call is confidential/secure
* Explain the focus and time allocated to the appointment - explain you have the same time as usual
* Ask the patient to have their preparation material and pen and paper ready – also any home monitoring results and their medication list
* Ensure the person is sitting and is comfortable and that you can see them on the screen
* Highlight that on occasions you may be looking away onto another screen to access information
* Encourage the patient to interrupt if they feel you have something wrong
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| **Patient story** | * Spend enough time on this stage of the conversation
* Use open questions (*“what other things were you thinking about?”*) and reflections to encourage the person to tell their story and list their concerns
* Refer people to the generic front page of their preparation prompt – what issues have they listed – gather these but do not go through each one
* Summarise the issues at the end of this section of conversation
* Check out if there is anything else before moving on (make sure you have elicited as much as possible)
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| **Professional story** | * Give short explanations, with opportunities for the patient to clarify and ask questions – be prepared for some silence
* Ensure you adequately discuss the patient’s concerns referring to the preparation material where necessary - share the results letter as you would during a ‘usual’ CSP conversation
* If you need to raise new ‘professional’ concerns give a warning shot *“so there is something new I need to discuss with you”*
* Use the technology to share information with people e.g. diagrams or pictures or for them to show you things that seem important to them
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| **Exploring and discussing**  | * Use open questions to elicit the patient’s ideas, questions and concerns
* Actively ask the person what they think or feel about the issues raised
* Offer a range of suggestions rather than single solutions
* Ask them what preferences they have and what issues they would like to prioritise or focus on
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| **Goal setting**  | * Gain a good understanding of the person’s goal and why it’s important to them – ask them to write it down in their own words
* Use open questions to encourage them to be specific about what exactly they would like to achieve
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| **Action planning**  | * Support the individual to generate and arrive at their own solutions *“so what ideas do you have?”*, *“what do you think you will do about that?”*
* Ask the person to walk you through their plan, do not interrupt, ask questions to gain clarification of the plan
* Use repetition - repeat and summarise the overall plan
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| **Review**  | * Give clear instructions on next steps or any further tests needed
* Confirm (and record) if the patient is happy to use video again
* To end, tell the patient you're going to close the call now, and say goodbye (before actually closing the connection)
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