

# Hospice staff experiences of remote consultations for palliative care during the COVID-19 pandemic: virtual focus group study



Care and support  
through terminal illness

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## Abstract

- During the COVID-19 pandemic, remote consultations became essential for delivering palliative care. Evidence suggests that remote consultations are generally feasible for palliative care.<sup>(1,2,3)</sup> Understanding the circumstances when they are most and least effective is now required.
- We explored the experiences of hospice staff providing palliative care via phone or video.
- We conducted 8 focus groups involving 38 palliative care staff across 2 hospices.
- Nearly all participants reported positive attitudes towards future use, viewing remote consultations as a resource-efficient way to facilitate palliative care access and increase choice. However, first assessments, physical assessments and bereavement support were viewed as challenging to conduct remotely, as were difficult conversations where an earlier relationship had not been established in person, or where communication difficulties were evident
- Hospice staff valued remote consultation for maintaining patient support during Covid-19 and are open to its future use. However, face-to-face consultations are still seen as optimal for establishing the therapeutic relationship and laying the foundation for advance care planning conversations.

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# Background and Methods

## Aim

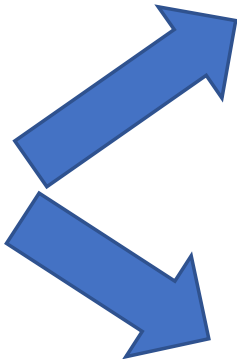
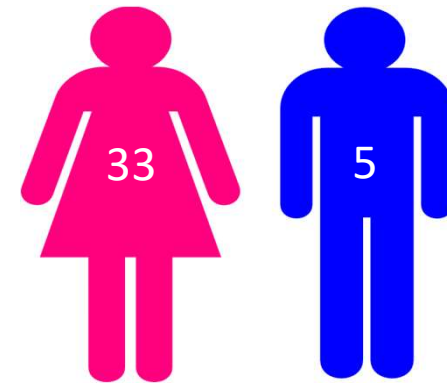
- To explore the experiences of hospice staff providing palliative care via phone or video; and to inform guidance on when palliative care can be effectively delivered remotely in the long run.

## Participants

- Purposive sample of staff from two Scottish hospices – Marie Curie Hospice Edinburgh and Marie Curie Hospice Glasgow

## Data collection and analysis

- Virtual focus groups conducted via MS Teams in April and May 2020.
- Eight focus groups involving 38 participants.
- Data was analysed in nVivo using a framework approach.



Community CNS x 13  
Doctors x 9  
Day therapies staff x 4  
Bereavement support x 3  
Social workers x 3  
Physiotherapists x 2  
Occupational therapists x 2  
Inpatient Unit Nurse Managers x 2

# Results



"I suppose it's just about learning to adapt isn't it to a different environment and using different tools to help you do your job, you know, which takes a bit of time but I feel like we're getting there because we've been doing it for a few weeks now, so it's starting to get a wee bit easier and feel a wee bit more natural". (FG3, p2)

*I think a lot of the niceties happen on the way in and the way out of a house don't they, you know the comment on a photograph... you kind of diffuse some of your conversation often when you're going out the door, you maybe talk about the weather ...whereas that's a bit different on a phone or a video consultation, it's not just a natural kind of ending (FG1, p2)*

*I feel very.. nervous about dealing with new patients. Especially if you're doing the advance care planning, but also even for things like titrating analgesia, especially opioids, somebody that you just haven't seen" (FG6, p2)*

*"it's a great resource for carers that either are working or they've not got that time to physically meet with you... (FG4, p2)*

*"..what this has taught us is that we don't have to see every single patient every single week,...there are other ways of communicating and assessing and managing our patients, so yeah I definitely would find value in it in the future." (FG4, p2)*



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# Conclusions

- Hospice staff valued remote consultation for maintaining patient support during COVID-19 and are open to its future use for routine follow-up, carer support, and conversations on practical matters.
- However, face-to-face consultations are still seen as optimal for establishing the therapeutic relationship and laying the foundation for advance care planning conversations.
- Sustaining remote services will require training to ensure their appropriate usage in combination with in-person care.



## Related publications:

1. Jess, M., Timm, H. & Dieperink, K. B. *Video consultations in palliative care: A systematic integrative review*. Palliative Medicine. 33, 942-958, [doi:10.1177/0269216319854938](https://doi.org/10.1177/0269216319854938). 2019.
2. Steindal, S. A. et al. *Patients' Experiences of Telehealth in Palliative Home Care: Scoping Review*. J Med Internet Res 22, e16218, [doi:10.2196/16218](https://doi.org/10.2196/16218) (2020).
3. Finucane A, O'Donnell H, Lugton J, Swenson C & Pagliari C. Digital Health Interventions in Palliative Care: A Systematic Meta-Review and Evidence Synthesis. medRxiv 2020.09.16.20195834. <https://doi.org/10.1101/2020.09.16.20195834> (2020).

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