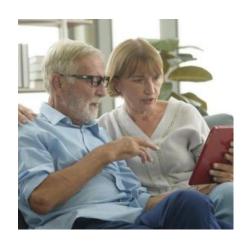
# Applied Research Collaboration Kent, Surrey and Sussex





Remote Memory Assessment in Times of Covid-19 Restrictions -A Study of Patient Satisfaction (R-MAS study)

ARC KSS COVID19 Rapid Response Projects



### **Public Summary**

The aim of this study was to understand patient. carer and clinician satisfaction with and experience of receiving or undertaking remote (i.e. on telephone or video call) memory assessment. Eighty one participants were recruited from patients and their carers who had a remote memory assessment in Sussex, Surrey and South London. All participants completed a satisfaction survey. We invited 15 patients and carers and 15 clinicians working in these memory services to take part in further interviews, so we could explore their experience in more detail. Most participants received their remote memory assessment through video conference (71%). Patient and carers were equally and generally satisfied with the remote memory assessment, with 93% agreeing or strongly agreeing with the statement "Overall, I was satisfied with the assessment". Satisfaction was not influenced by Covid-19 and lockdown circumstances. Only communication experiences and communication barriers were significantly associated with satisfaction, indicating that patients/carers were more satisfied if there was an absence of communication barriers and a perception that communication barriers and a perception that clinician was communicating clearly.

All participants who took part in detailed interviews were satisfied with remote assessment. They valued receiving a diagnosis. access to further support, as well as the skill of clinicians and being listened to. Familiarity with communication technology was important. Participants also reported choosing remote assessment for the purpose of swifter diagnosis. The perceived benefits of remote assessments included safety and reduced Covid-19 transmission risk, being at home, no travel time, cost or inconvenience, and less stress. Face to face contact remained the most preferred option, video conferencing being rated as second to this, and telephone as the least preferred opinion. The majority of those interviewed reported that they would be happy to continue their current contact with the memory assessment service remotely.

Clinicians were also satisfied with video consultation and valued seeing patients in their own environment and developing new skills for remote consultations. All clinicians preferred video conferencing to telephone, and were dissatisfied with telephone. Some of those interviewed questioned the reliability of remote memory tests and acknowledged the challenge of discussing dementia diagnosis remotely.

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All clinicians were supportive of maintaining a remote option for assessment (in keeping with patient choice and clinician need) due to less travel, being able to include carers who lived far away, having more focused time when working remotely and be able to continue to deliver support during Covid-19 lockdown conditions. In conclusion, Remote memory assessment appears to be a positive and satisfactory experience for patients, carers and clinicians. Patients should be offered a choice of having their memory assessment (or some parts of it) performed remotely if they so wish.

## **Public and Community Involvement**

A lived experience advisory group (LEAG) has been set up to support delivery of the evaluation research study. Advisory group members have been involved in the design, satisfaction questionnaire, participant-facing documentation, as well as the topic guide. The initial coding for the thematic analysis was further reviewed for the group. The final codes were shared with the group, and the implications for practice (for new patients and for clinicians) were explored, and used within dissemination material, such as the toolkit for clinicians, patient information leaflet about remote memory assessment and an animated film for future remote memory service patients.

#### Impact, Implementation and Dissemination

### **Conference and meeting presentations:**

The project was presented at KSS ARC webinar in October 2020 and the video of the presentation is now available on NIHR ARC Kent Surrey and Sussex YouTube channel.

Further presentation of study results took part at ARC - Living Well with Dementia Annual Event on 30th June 2021. A poster with the results of quantitative study was presented at the Alzheimer's Association International Conference in Denver in July 2021. Accepted for future presentations: The 14th Annual Summit of the Knowledge Network in Rural and Remote Dementia Care, Saskatchewan, Canada, November 2021 RCPsych Annual Quality Improvement conference, November 2021.

#### **Journal publications:**

Currently the study team prepares 3 papers that will be submitted to scientific journals - one with the results of quantitative study and 2 papers presenting the results of patient/carer in-depth interviews and clinician interviews.

## Commissioners, clinical services, communities of interest events:

The study results were presented at the Midlands Dementia Interest Group in September 2021. An interim study report was presented at Coastal West Sussex CCG board in December 2020.

# Higher Education Innovation Fund (HEIF) project:

The study team has been awarded a HEIF grant to develop a toolkit for clinicians and information material for patients about remote memory assessment pathway. The toolkit is in the final draft stages and will be produced professionally and disseminated to services





across the UK, aiming to establish a good practice, evidence-based remote memory assessment pathway. Production has also started on a 5 minute animated film for patients, aiming at familiarising people who are offered a remote assessment in memory clinic with the practical details involved in the process.

#### What next?

We will also disseminate the findings to study participants and more broadly to patients and carers who use our service. We will also run a free webinar using the existing networks (e.g. HEKSS and BSMS) and present findings either separately or jointly with other COVID-related projects ran within the CDS. We anticipate that the study will inform the design and clinical practice in remote memory assessment services. There are themes and trends already identified in the preliminary results that appear to support the continued use of the remote pathway and further results influence any changes and adjustments made to improve patient and carer experience as well as ensure the robustness of the diagnostic process. Further projects that are likely to develop from this study will include the comparison between remote vs face-to-face practice as well as qualitative research into attitudes and barriers to remote consultations within clinical staff.