Video conferencing-based telehealth--its implications for health promotion and health care.

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Abstract:

To review the experience with a province-wide telehealth system in Canada, and its implications for health care and health promotion. To explore whether group support systems (GSS) based on networked computers can substitute for video conferencing technology.

Key results of the evaluation of the BC Telehealth Program are summarized. The potential of extending the successful principles through use of GSS is explored based on literature review, demonstrations, and trial use for educational applications.

The BC Telehealth Program was designed to support health professionals at secondary care facilities, such as regional and district hospitals in two application domains: children's and women's health (C&W) and emergency room and trauma care (ER-Trauma). Successful applications extended beyond health professionals and focused on chronic conditions, the management of which is contingent on visual information, and involves established teams in regular scheduled visits or in sessions scheduled well in advance. Ad hoc applications, in particular applications under emergency conditions proved problematic. Administrative applications in support of telehealth implementation, e.g., through facilitation of management and provider education, are essential for clinical success. Savings from support of administrative applications exceeded the substantial capital investment and made educational and clinical applications available at variable cost. Educational applications were shown to have significant clinical benefits. Exploration of GSS technology showed that it may not be mature enough to substitute for video conferencing technology in support of sophisticated training and education aiming at clinical impact.

The substantial clinical and efficiency gains provided by video conferencing-based telehealth may for now continue to depend on mature video-conferencing technology.

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