

A person-centred approach to telehealth

DEBORAH V FERRARI AND LISE L BUNDESEN

“The time when telehealth was a remote, abstract concept has come to an end”.

Deborah Ferrari and **Lise Lotte Bundesen** discuss how to advance person-centred care in hearing rehabilitation through online tools and training.

The time when telehealth was a remote, abstract concept has come to an end. In the United States, a survey showed that interest in telehealth spans all ages, being higher for the millennials [1]. Modern consumers expect to have access to products, services and care when, where and how they need them. Today, telehealth technologies are evolving to provide both patients and healthcare professionals with new, efficient ways of delivering hearing care that meet these expectations.

Integrating telehealth in audiology practice may, at first glance, seem an unsurmountable task. But telehealth comes in many forms and shapes, and encompasses a broad application of information and communication technology (ICT) to deliver health, education and research services. In fact, many hearing care professionals have already engaged in telehealth practices, some without even realising it – from taking appointments online, to answering questions via email and having video chats with patients or sharing instructional videos with them.

The Ida Institute offers a suite of online tools and resources designed to facilitate the integration of telehealth in audiology practices, and to support the development of distant learning and service provision. The tools, which have been developed in collaboration with an international group of clinicians and audiology experts, aim to advance person-centred care in the hearing rehabilitation of the future.

Enhancing counselling through telehealth

The provision of counselling in auditory rehabilitation decreases the patients’ hearing handicap and is likely to lead to better use of hearing instruments and communication strategies [2]. An important part of the counselling process is in eliciting and exploring the patient’s narrative.

Based on principles of person-centred care (see Box 1), Ida’s Telecare platform is designed to help clinicians integrate

telehealth in their practice, as well as to help patients talk to their hearing care professionals, prepare themselves before appointments and extend care beyond the appointment.

Box 1 – Person-centred approach

Developed as an approach to psychotherapy by Carl Rogers [3], person-centred care focuses on the needs of the person - considering their values, aspirations, life circumstances, etc. Professionals are required to be genuine, empathetic and supportive. The patient is an equal partner and takes an active role in his / her care. Professional-patient partnership is necessary to understand what is important for the patient, identify his / her goals and share treatment decisions. This approach has found application in different domains of healthcare and education, among others.

The platform offers resources and easy-to-use tools available online (see Box 2) for the patient to fill out at home and send to their hearing care professional or bring to their appointments.

The platform presents a number of advantages for hearing care professionals, enabling them to:

- Extend services beyond appointments in the clinic
- Engage the patient in a more productive and focused conversation and save time during the appointment
- Get more motivated and satisfied patients
- Develop long-term, trusting relationships with patients
- Empower patients to self-manage their hearing loss through online resources

Box 2 - Ida Telecare Tools

Living Well: A tool allowing patients to identify and describe different communication situations that they find important and challenging.

My Turn to Talk: This tool invites patients to think about whom they communicate with, and what questions they have before their appointments.

Why Improve My Hearing: This tool helps patients reflect on their own motivation for taking action on their hearing loss.

Top Tips for Managing Conversation

Well: A collection of suggestions for how people with hearing loss can cope with difficult situations, including ethnographic video clips to illustrate how others have dealt with similar situations.

By combining new technologies with the principles of person-centred care, the platform contributes to enhancing the quality and efficiency of the rehabilitation process. It provides a channel for stimulating the patients’ self-reflection and makes them more aware of their communication needs and concerns. The Ida Institute has also developed a suite of tools dedicated to tweens and teens, which specifically address the needs of teens and young adults with hearing loss and equips them to make decisions related to their hearing loss that are right for them.

Overcoming challenges in professional-patient communication

While research has shown benefits of real-time remote hearing aid (HA) programming, fitting and verification, effective professional-patient communication and relationship development can be challenged

by the mediation of ICT and the presence of a third person (the telehealth facilitator) in the setting.

A study developed at the Speech Language Pathology and Audiology (SLPA) Department, Bauru School of Dentistry-University of Sao Paulo (BSD-USP) compared professional-patient communication during face-to-face and telehealth HA fitting appointments [4]. Appointments were video-recorded and analysed by means of a scale based on the Calgary-Cambridge Guide [5]. Although the difference was small, significantly higher scores (better results) were obtained for face-to-face interaction. Thematic-categorical content analysis, performed to complement the results, showed that in both consultation modalities the professional and, when present, the facilitator dominated the communication which was predominantly biomedical in nature. This work points to the need for reinforcing the audiologist's training in using effective communication skills, as well as strategies (e.g. media training) to avoid potential obstacles arising from the interaction via ICT.

Ida's 'Time and Talk tool', based on the Calgary-Cambridge Guide, can be used for teaching communication skills to practising and student audiologists, and is equally valuable as a means for professionals to reflect on their own practice.

New learning opportunities

Telehealth also opens up new avenues when it comes to when, where and how we learn. Creative and effective use of ICT can facilitate a shift from a traditional teacher-centred approach (emphasis on content) to a student-centred approach (emphasis on learning).

One example of this is an innovative online specialisation course in paediatric auditory rehabilitation in Brazil, organised by the SLPA department at BSD-USP in partnership with the Samaritano Association and the Ministry of Health. The course was established in response to a 2010 law in Brazil requiring universal newborn hearing screening, which increased the need for paediatric training of hearing care professionals in public healthcare facilities.

Several Ida tools (Change Guide, My World, Motivational Tools) and ethnographic videos are used in this course. It also uses problematising and other active strategies allowing participants to reflect on their practice and real-world challenges, while encouraging and supporting the achievement of competencies and skills that help transform their practice.

The course runs for 18 months to meet

the required 400 hours of training and allow students who work full time in public hearing healthcare facilities to complete it. The second edition of the course is now being finished, with a dropout rate of just 10% – extremely low for a free distance-learning course – indicating the value of such learning opportunities. This is just one example of how innovative educational programmes could inspire long-distance learning in audiology across the globe. It also illustrates how telehealth can continue to improve the quality of rehabilitation to the advantage of both patients and professionals alike.

Summary

Telehealth technologies are evolving to provide both patients and healthcare professionals with new, efficient ways of delivering hearing care. While research indicates that there are benefits of real-time remote hearing aid programming, fitting and verification, the communication and relationship between the professional and the patient can be challenged by the mediation of ICT. Principles of person-centred care can help clinicians navigate in this new setting and contribute to enhancing the quality and efficiency of the rehabilitation process. Supported by creative and effective use of ICT, they also open up for new avenues in long distance learning.

All Ida Telecare tools are available in mobile-friendly versions. Read more about the tools at: www.idainstitute.com

References

1. Modahl M., Meinke S. Telehealth Index: 2015 Consumer Survey Insights. <http://info.americanwell.com/telehealth-index-2015-consumer-survey> Last accessed January 2017.
2. Hawkins D. Effectiveness of counseling-based adult group aural rehabilitation programs: a systematic review of the literature. *J Am Acad Audiol* 2005; **16**(7):485-93.
3. Rogers, CR. *Client-centred therapy: its current practice, implications and theory*. Boston, USA; Houghton Mifflin; 1951.
4. Campos, PD. Teleaudiologia: análise da comunicação profissional/paciente no processo de seleção e adaptação de aparelhos de amplificação sonora individuais via teleconsulta. [Tese Doutorado]. Faculdade de Odontologia de Bauru. 2016. www.teses.usp.br/teses/disponiveis/25/25143/tde-16082016-102746/es.php Last accessed January 2017.
5. Silverman J, Kurtz S, Draper J. *Skills for communicating with patients* – Third Edition. London, UK; Radcliffe Publishing; 2013.



AUTHORS



Deborah V Ferrari, PhD,

Associate Professor, Speech Language Pathology and Audiology Department, Bauru School of Dentistry, University of São Paulo, Brazil.

E: deborahferrari@usp.br



Lise Lotte Bundesen,

Managing Director, Ida Institute, Egebækvej 98, 2850 Nærum, Denmark.

E: llbu@idainstitute.dk

Deborah V Ferrari is an Associate Professor at the Speech Language Pathology and Audiology Department, Bauru School of Dentistry, University of São Paulo, Brazil. Her teaching and research interests include hearing aids, counselling and audiology telehealth. She has received a scholarship on 'Technology and Innovation' from the Brazilian Ministry of Science, Technology and Education. She is a member of the Brazilian Council for Telemedicine and Telehealth. She is also a member of Ida Institute Advisory Board.

Lise Lotte Bundesen is the Managing Director of the Ida Institute - an independent, non-profit organisation based in Denmark working to foster a better understanding of the human dynamics associated with hearing loss. Ms Bundesen was the architect behind the creation of the institute in 2007. She has extensive experience in the fields of communication, education / training, ethics and social responsibility and has worked in the health care arena for many years, specifically for the multinational company Novo Nordisk.

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