

Skype Consultations

Guidance on using Skype and similar virtual media for remote consultations

About this document

This document has been produced as part of a research collaboration led by Barts Health NHS Trust and Queen Mary University of London. It highlights key lessons on the implementation and use of Skype in a Diabetes service.

Recommendations for practice

- Introduce the service slowly and incrementally with direct involvement of the team to ensure compatibility between the technology and existing practice.
- Allow plenty of time for discussion with staff and patients about how it affects the service.
- Work in collaboration with your ICT department and technical support teams to establish roles and processes to assist use of the technology.
- Use with an understanding of the patients' lives and how the technology relates to the management of their health condition.
- Support flexible use, allowing scope to fit the service around the needs of the patient.

Implementing and Managing Skype

Installing and running software

Download the software from the official Skype website (www.skype.com). This may need to be done by your ICT department, as special administrative rights are often required when installing software onto NHS computers. Also note that Skype may require software updates to be downloaded after it has been installed.

Managing Skype accounts

Clinic accounts: You will need to register your clinic account with a username that is unique to every user and cannot be changed or duplicated once created. Register your Skype username using your Trust NHS email address, as this is more secure than internet based email accounts.

Patient accounts: Skype contacts are created by searching other users on the Skype directory and sending a contact invitation. It is important to ensure that correct contacts are formed during this process. Provide patients with written details of the clinic account username so that they can confirm these before sending or accepting a contact request. Note that some patients will have a username that will not reflect their actual name.

Conducting Skype Consultations

Communication

Video based communication can help the consultation by providing visual/physical assessment and supporting non-verbal communication. But it is also important to acknowledge potential limitations of video mediated communication and the suitability of this medium depending on the patient and their care support needs. Use Skype adaptively with each patient in conjunction with the use of face to face consultations.

Position the webcam directly above the computer screen in the centre to avoid mismatch between the viewer and the camera. This will help create realistic and direct interaction. If you are using other documents, notes or applications during the consultation (e.g. Electronic Patient Record), then display these on the same computer screen whenever possible so that direct interaction is maintained.

Patients may send messages for a number of reasons, such as rescheduling appointments, requesting a Skype call or to ask questions about their condition. It is important to make patients aware how regularly you will check messages in order to manage their expectations as to when you will respond.

Ask patients to have other forms of communication available with them at the consultation so that they can be easily contacted if any technical problems occur immediately prior to the Skype call.

Privacy and Confidentiality

A Skype consultation should be treated like any other outpatient consultation, in which sensitive and confidential information is safeguarded at all times.

Do not conduct the consultation in the presence of others without the patient's permission and take reasonable measures to avoid inadvertent disclosure of information.

Close the office door before initiating or receiving a Skype call and use signs to indicate that a consultation is taking place. Ensure other staff members are aware that Skype is used for consultations within the clinic to minimise risk of unintended interruptions.

Patient Consent

Patients should be made fully aware of any precautions required and potential risks of using Skype. Their consent to use Skype should be documented after they have had time to listen and read the information. The information should ensure that patients are fully aware and understand the following:

- use of Skype is completely voluntary and they can change a Skype based appointment to a face to face appointment at any time.
- video consultations are encrypted but it is their responsibility to ensure they have adequate anti-spyware and anti-virus protection to prevent unauthorized eavesdropping.
- some personal information is stored locally on the computer being used, which patients should be aware of, particularly if they are using a public or shared computer.
- Skype on a mobile phone is only as secure as any other mobile phone call
- medical outcomes from a consultation will be stored on their patient record
- Skype should not be used in an emergency as a response to calls and messages is not guaranteed

Standard Operating Procedure - Introducing the Skype Service to Patients

