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ORIGINAL RESEARCH PAPER

A QUALITATIVE STUDY OF COMMUNITY HEALTH OFFICERS' EXPERIENCES WITH TELEMEDICINE IN A RURAL BLOCK OF MADHYA PRADESH

Community Medicine

KEY WORDS: Telemedicine, Community Health Officers, Health and Wellness centres

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| STRACT | Telemedicine implementation in Health and Wellness Centers facilitates consultation, screening and remote monitoring, allowing individuals to connect with health care providers, receive medical advice and promote wellness. This will improve access to specialists, support follow-up care, especially for patients with chronic diseases, and ultimately improve access to healthcare and better outcomes. Methods: Twenty-two semi-structured interviews with Community Health Officers working in a rural block of Madhya Pradesh were conducted and analyzed using thematic analysis to assess their perspectives regarding the benefits and challenges of telemedicine. Results: Community Health Officers identified several advantages and challenges related to Telemedicine. Telemedicine offers promising opportunities to transform rural healthcare, enhancing accessibility, convenience, and patient-centred care. However, | |

opportunities to transform rural healthcare, enhancing accessibility, convenience, and patient-centred care. However, challenges in technical aspects, patient assessment, and data privacy must be addressed through appropriate training, policy frameworks, and patient education. **Conclusions:** Telemedicine ensures that patients in remote areas receive necessary and desired care, offering convenience and timely medical advice without disrupting daily activities. However, addressing technical challenges and privacy concerns while providing specialized training to healthcare providers can maximize its effectiveness and bridge the healthcare access gap for underserved populations.

INTRODUCTION

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The advent of telemedicine has brought about significant advancements in the healthcare industry, particularly within the realm of Health and Wellness Centers(HWCs). By harnessing the power of technology, telemedicine has revolutionized the delivery of healthcare services, offering a wide range of benefits for both patients and healthcare providers. Through remote consultations, telemedicine enables individuals to connect with healthcare professionals from the comfort of their homes, reducing barriers of distance and time. It provides access to a variety of healthcare services, including preventive care, health education, and specialized consultations. Moreover, telemedicine facilitates remote monitoring, allowing for continuous care and personalized treatment plans for individuals managing chronic conditions. This introduction highlights the transformative potential of telemedicine in enhancing accessibility, convenience, and quality of care within HWCs, ultimately promoting improved health outcomes and patient satisfaction^[1].

Recognizing the potential of ICT innovations, the Ministry of Health and Family Welfare (MoHFW) has initiated the integration of telemedicine services within the HWCs, following a phased rollout under the National Health Mission (NHM). This implementation follows a "Hub and Spoke Model," with the HWCs acting as spokes and the establishment of a hub at the state, zonal, or divisional level^[1]. The hub will provide tele-consultations and prescriptions to Community Health Officers (CHOs) while also offering specialist services to Medical Officers at the PHCs. This approach optimizes healthcare delivery, ensuring enhanced accessibility and quality care for individuals within the primary healthcare system.

According to a report released by MoHFW, the HWCs have achieved a significant milestone in their mission to provide quality healthcare services to communities. A recordbreaking 3.5 lakh tele-consultations were registered in just two days, utilizing the ministry's flagship telemedicine scheme, "eSanjeevani". Additionally, over 76,000 patients availed themselves of the eSanjeevani OPD telemedicine services during this period. This achievement showcases the robust technology of the e-Sanjeevani platform, which has enabled access to healthcare services across the country. With approximately 1 lakh AB-HWCs registered as spokes and more than 25,000 hubs providing teleconsultations, the e-Sanjeevani portal has facilitated quality and affordable healthcare services to even the most remote areas of the country. Teleconsultations have become a vital means of ensuring timely specialist services for the underprivileged in the remotest parts of the country^[2].

In response to the scarcity of studies exploring the perspectives of Community Health Officers (CHOs) regarding telemedicine, our research aimed to address this gap by conducting a qualitative study to capture their experiences. Focusing on a rural block in Madhya Pradesh, the study aimed to gain insights into the benefits and limitations of telemedicine as perceived by CHOs, evaluate their satisfaction with telemedicine services, and explore their views on the future use of telemedicine.

Through this research, we aimed to enhance understanding and provide valuable insights into the implementation and potential of telemedicine from the perspective of CHOs, ultimately contributing to the advancement and utilization of telemedicine services in the healthcare system.

2. MATERIALS AND METHODS

The study adopted a descriptive qualitative approach in order to obtain a rich and detailed account of the data. The qualitative research was carried out using the interview technique, relevant to exploring Community Health Officers' experiences and opinions.

2.1. Study Settings and Participants: The research was conducted with Community Health Officers working in 22 Health and Wellness Centres of a rural block of Madhya Pradesh, central India between September 2022 and November 2022. All 25 CHOs of the block are approached for the interview out of which three denied consents. All participants were able to communicate both in English and Hindi.

2.2. Data Collection: The semi-structured interviews with Community Health Officers were conducted in a mutually agreed place convenient to the participants and based on the interview topic guide.

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2.3. Interview Procedure

The interviews were performed at a time and place convenient for each participant. All the interviews were conducted in local language Hindi by the same interviewer. All the participants were having maximum variability in relation to socio-demographic characteristics such as age, educational status, gender and length of work experience. A total of 22 interviews were conducted and it varied in length between 27 min and 42 min, with an average length of 33 min. Data collection started with the interviews in September 2022 and ended in November 2022. Participation in the study was voluntary. Each participant was asked for consent at the beginning of the interview, and oral informed consent was obtained from all participants. All interviews were audio recorded and then transcribed verbatim.

2.4. Data Analysis

Thematic analysis was used in the process of identifying patterns or themes within qualitative data. The analysis process started with getting acquainted with the data. After reading the transcripts and looking at the data, an initial list of ideas was generated and seed codes were prepared. When all data were pre-coded, a list of potential topics was created. These topics were then reviewed critically. In the next phase, the topics and sub-topics were finally defined and named.

3.RESULTS

Data collection took place over several weeks, during which face-to-face interviews were conducted with the CHOs. Each interview followed a semi-structured format, allowing participants to freely share their experiences with telemedicine. The interviews covered a range of topics, including the benefits of telemedicine, challenges encountered during its implementation, and suggestions for its future improvement. The collected data, comprising interview transcripts and field notes, underwent thematic analysis. The main themes and subthemes arrived are summarised below.

1.Advantages of Telemedicine:

1a. Enhanced accessibility and continuity of care: Telemedicine has been very helpful for the patients living in remote or underserved areas. It allows those individuals to connect with healthcare providers and if needed to the specialists without the need to travel long distances, saving their time and money. Additionally, telemedicine enables the patients with chronic conditions to receive continuous care as specialists can monitor their progress and thus will be able to provide timely interventions leading to better health outcomes.

1b. Convenience and empowerment for patients: The patients can receive medical advice and guidance right from a centre near to their homes, eliminating the need to visit a faraway healthcare facility. This is especially beneficial for those patients with mobility issues, elderly patients, or those with limited transportation options with them. Telemedicine empowers patients to take charge of their own health by giving them more control over their healthcare decisions, health seeking behaviour and also by reducing the barriers to seek medical advice.

Ic. Healthcare equity and inclusivity: Telemedicine plays a crucial role in promoting healthcare equity and inclusivity. It helps bridge the gap between urban and rural healthcare facilities, ensuring that individuals in underserved areas have access to the same quality of care as their urban counterparts. Additionally, telemedicine addresses the issue of healthcare disparities by providing services to vulnerable populations, including people with disabilities or limited access to healthcare resources.

1d. Seamless collaboration and data accessibility: Telemedicine facilitates seamless collaboration among

healthcare providers, specialists, and patients. Healthcare teams can easily share patient information, medical records, and test results, leading to faster and more accurate diagnoses and treatment decisions. Patients also benefit from having easy access to their health data and the ability to review their treatment plans. This transparency and accessibility promote patient engagement and empowerment in managing their health.

2. Challenges of Telemedicine:

2a. Technical challenges and connectivity issues: Despite the numerous advantages of telemedicine, technical challenges and connectivity issues remain a significant obstacle. In rural or remote areas with limited internet infrastructure, unstable internet connections can disrupt teleconsultations and lead to communication gaps. Technical glitches can result in delayed consultations and impact the overall telemedicine experience for both healthcare providers and patients.

2b. Privacy and confidentiality concerns: Some CHOs had an opinion that the patients expressed concerns about the privacy and confidentiality of their medical information during telemedicine consultations. Unlike in-person visits, telemedicine involves sharing sensitive health data over digital platforms, raising worries about data breaches and unauthorized access. Addressing privacy and security concerns is vital to maintain patient trust and ensure compliance with data protection regulations.

2c. Challenges in patient assessment and rapport building: Conducting comprehensive patient assessments can be challenging in a virtual setting. Patients may find it difficult to explain their symptoms accurately through a video call, leading to potential misdiagnoses or incomplete evaluations. Additionally, building rapport with patients in a virtual environment requires healthcare providers to adapt their communication styles and use effective virtual engagement strategies to establish trust and comfort.

2d. Limitations of virtual interaction and in-person value: While telemedicine offers numerous benefits, some healthcare providers felt that it cannot completely replace the value of in-person interactions. Physical examinations and face-to-face consultations allow for a more comprehensive assessment and a better understanding of patient needs. The absence of physical touch and direct eye contact may impact the level of patient-provider connection in virtual consultations.

3.Suggestions for Future:

3a. Telemedicine training and education for healthcare professionals: Providing specialized training in telemedicine is essential to equip healthcare professionals with the necessary skills and knowledge for successful teleconsultations. Training should cover effective virtual communication, patient assessment in virtual settings, and best practices for ensuring patient en gagement and satisfaction.

3b. Telemedicine policy and regulatory framework: Developing a well-defined telemedicine policy and regulatory framework is crucial to maintain patient trust and ensure data confidentiality. This framework should address issues related to patient consent, data privacy, cybersecurity, and telemedicine reimbursement. A clear and comprehensive policy will set standards for teleconsultations and provide a sense of security for both patients and healthcare providers.

3c. Telemedicine for mental health support: Expanding telemedicine services to include mental health support can significantly benefit patients. Virtual mental health consultations offer greater privacy and convenience,

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reducing the stigma associated with seeking help for mental health issues. Implementing telemedicine-based mental health programs can improve mental health outcomes and increase access to mental health services.

3d. Fostering patient digital literacy: Educating patients about virtual healthcare tools and technologies is critical to ensuring smooth teleconsultations. Digital literacy programs should focus on teaching patients how to use telemedicine platforms effectively, access health information online, and securely manage their health data. Increased patient digital literacy will enhance patient engagement and satisfaction with telemedicine services.

4. DISCUSSION:

In this study, we aimed to explore the advantages, challenges, and suggestions regarding telemedicine as perceived by the Community Health Officers (CHOs) in a rural block of Madhya Pradesh. Our findings highlighted several significant advantages of telemedicine in the context of rural healthcare. Telemedicine enhanced accessibility and continuity of care, providing patients in remote areas with the necessary medical attention. It empowered patients by offering timely medical advice and guidance reducing the burden of travel and wage loss^[3]. Moreover, telemedicine contributed to healthcare equity and inclusivity, ensuring that patients facing mobility challenges or lacking transportation options could still access quality healthcare services. Patient-centred virtual healthcare delivery through telemedicine fostered trust between healthcare providers and patients, bridging geographical barriers and improving healthcare access for underserved populations. Additionally, seamless collaboration and data accessibility facilitated more efficient healthcare delivery, allowing patients to review test results and modify treatments when needed.

Despite the numerous advantages, the study also identified several challenges associated with telemedicine implementation. Technical challenges and connectivity issues were reported as major hindrances to the smooth functioning of teleconsultations. Limited internet infrastructure in rural areas may lead to unstable connections and disrupt telemedicine appointments^[4]. The findings were similar to those as mentioned by [4,5]. Privacy and confidentiality concerns were raised, as some patients expressed doubts about the security of their medical information during virtual consultations. This highlights the importance of implementing robust data protection measures and ensuring compliance with privacy regulations.

The challenges in patient assessment and rapport building were also acknowledged by CHOs. Conducting comprehensive patient assessments in a virtual setting can be challenging, as some patients may find it difficult to explain their symptoms accurately over a video call. Building rapport and trust with patients virtually require healthcare providers to adapt their communication styles and employ effective engagement strategies. Additionally, some CHOs felt that virtual interactions cannot completely replace the value of inperson consultations, as physical touch and face-to-face talks are essential for certain aspects of patient care⁶.

To address these challenges and maximize the potential of telemedicine, the study participants offered insightful suggestions for the future. Providing specialized telemedicine training and education for healthcare professionals was identified as a critical step in ensuring the successful implementation of teleconsultations. Equipping CHOs with the necessary skills and knowledge will boost their confidence and competence in delivering virtual care. Establishing a well-defined telemedicine policy and regulatory framework was highlighted as essential to maintain patient trust and data confidentiality. A clear policy will set standards for teleconsultations and provide a sense of

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security for both patients and healthcare providers.

Expanding telemedicine services to include mental health support was also suggested as a way to leverage telemedicine's transformative potential in addressing mental health issues. By providing discreet and convenient access to counselling services, telemedicine can reduce the barriers to seeking mental health help. Lastly, fostering patient digital literacy emerged as a crucial aspect to ensure smooth teleconsultations. Educating patients about virtual healthcare tools and technologies will enhance patient engagement and satisfaction with telemedicine services⁷.

Overall, this qualitative analysis underscores the importance of telemedicine as a valuable tool in improving healthcare access, continuity, and equity. While there are challenges to overcome, the suggestions provided by CHOs offer practical solutions for optimizing telemedicine implementation. Policymakers and healthcare institutions should pay attention to these insights to create a conducive environment for telemedicine's successful integration into the healthcare system, ultimately benefiting patients and healthcare providers alike.

CONCLUSIONS

Telemedicine presents a promising solution to overcome geographical barriers and enhance healthcare accessibility and inclusivity. However, challenges related to technical issues, privacy concerns, and patient assessment must be addressed to maximize its effectiveness. To harness the full potential of telemedicine, healthcare providers should receive specialized training, and robust policy frameworks should be established to ensure patient trust and data security. By embracing telemedicine and addressing its challenges, we can enhance healthcare delivery and bridge the gap in healthcare access for underserved populations in rural areas.

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