## RAPID Series Manual

# Telehealth – Series 35

### What is this series about?

The advent of COVID-19 has necessitated the rapid adoption of new models of palliative care delivery to facilitate remote healthcare access. Palliative care patients have complex care needs and require regular review that cannot be postponed. Telehealth consultations are therefore increasingly being provided by palliative care clinicians, with scope for this model of care to continue beyond COVID-19 if proven acceptable and effective in meeting patient needs. While telehealth appears to offer a number of advantages for patients, it is also likely that there are patient groups who are less well or even inadequately served by this approach.
This Rapid series will examine the acceptability and utility of telehealth, with a focus upon discerning if there are patient groups who may benefit from this approach and also if there are patient groups for whom other forms of consultation should be provided.

Each participating clinician has two options for the collection of data on patients they consult with via telehealth.

1. collect data at one telehealth consultation only **OR**
2. collect data at first telehealth consultation (**T0**) and then at subsequent telehealth consultations where possible - (**T1** and **T2**).

### Patient tracking

A log or spreadsheet should be developed in order track the patient medical record number and the study ID number allocated to each patient when medication/intervention commenced. This spreadsheet will be the only link between the data collected and the identity of the patient and remains the property of the participating site. This information should not be shared with the IMPACCT Trials Coordination Centre (ITCC/PaCCSC). The spreadsheet should also contain the date and time of the data entry at each time point.

| Patient PID | Patient name | Patient medical record number | Date of initial data entry | Time of data entry |
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### Allocating Patient ID number

**The ID number for each set of data collected is a composite number built up using a series of three codes:**

**i) Site identifier**
This is the number allocated by ITCC/PaCCSC to each participating site as a two or three digit number

**ii) Medication/intervention number**
The number for the **Telehealth series is 35**
**iii) Patient number**
This is usually a three digit number e.g. **001**
Therefore the full patient ID number will be:
*Site identifier/medication number/patient number e.g. 01/35/001*

## Time points

**OPTION 1:**
There are 2 main time points where data are required:
1. Initial telehealth consultation (baseline) (T0)
2. Adhoc adverse events/harm assessments (if and when they occur)

**OPTION 2:**
There are 3 main time points where data are required:
1. Initial telehealth consultation (baseline) (T0)
2. Subsequent telehealth consultations - (**T1** and **T2**) where possible
3. Adhoc adverse events/harm assessments (if and when they occur)

## Adverse event or Outcome Harm Assessments

Outcome harms/adverse events are assessed to attribute causality where possible.
The telehealth series has a number of pre-populated possible harms.

## Data entry

Login can be acquired by emailing RAPID@uts.edu.au and requesting the login to the series that is applicable to you.