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Development of videoconferencing group educational program for patients with heart failure: A Delphi study.

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Funding Acknowledgements: Type of funding sources: None.

Background: During the COVID-19 outbreak, videoconference technology can help people avoid physical contact and minimise the exposure of healthcare providers to sick people as well as respiratory secretions. Videoconferencing can be beneficial for people with chronic conditions (such as heart failure) who have restricted mobility, live in remote and rural areas, or experience social loneliness. However, evidence for the effectiveness of using internet videoconferencing and its components accounted for the positive outcomes (such as knowledge, quality of life, self-care, healthcare utilization) is still lacking.

Purpose: To develop a feasible videoconferencing program for patients with heart failure that meets patients' needs and preferences in Jordan.

Methods: The study involved two Delphi survey studies of three rounds each. The first Delphi survey involved 32 healthcare staff, with heart failure clinical experience, to obtain a consensus of opinion on a proposed group videoconferencing program for patients with heart failure. The second Delphi study involved seven staff of the information technology center, with experience in videoconferencing and using supporting applications, to obtain their consensus on the current capabilities, needs, barriers and facilitators of the healthcare system (providers) and patients (users) about information technology. For both Delphi studies, content analysis was used to analyze responses of participants in the first-Delphi round. Items resulting from the first-round analysis were summarized, listed, and rated (5-point Likert scale) in order to provide input and develop the second-round questionnaire. The percent agreement of participants was defined to be 80% or above to indicate their consensus.

Results: Healthcare providers prefer sessions to be led by the cardiologists and cardiac nurses, moving from simple to a complex topic, and the dose of information and frequency should be varied according to the needs and severity of heart failure. Videoconferencing strategy could improve patients' satisfaction, knowledge and self-care, and adherence with their therapy plans. Jordan healthcare system has a capability to use videoconferencing strategy in Jordan.

Conclusion: This study addresses the equivocal evidence for the effectiveness of using internet videoconferencing between healthcare provider and patients. Establishing an effective videoconferencing program assists with meeting patients' needs and preferences, accessing healthcare during COVID-19, reducing travel burden/costs as well as the risk of exposure to the virus, and ultimately improving clinical outcomes. This study will capture attention of healthcare providers to perform further studies targeting videoconferencing heart failure management programs