RURAL PATIENTS' EXPERIENCE WITH SURGICAL CONSULTATIONS IN BRITISH COLUMBIA

A COMPARISON BETWEEN VIRTUAL AND IN-PERSON MODALITIES IN THE CONTEXT OF THE RURAL SURGICAL OBSTETRICAL NETWORK INITIATVE

MAIN TAKEWAYS

Findings from a province-wide survey (n=163) revealed the majority of participants indicated that virtual appointments **saved them time travelling, energy,** and **money** and made them less dependent on others.

One in **four** participants reported they would have **cancelled or delayed their surgery** if they would not have had access to virtual surgical consultations; this increased to **38%** in the site-level cohort.

Most participants **(84%)** would **recommend a virtual surgical consultation to family and friends** who face similar circumstances.

OBJECTIVES & BACKGROUND:

Rural patients face travel and distance-to-care challenges when accessing surgical care. Although adaptation to the COVID-19 pandemic has demonstrated the efficacy of virtual care for pre- or post-surgical appointments, there is minimal data available to evaluate patient satisfaction with this modality. This study endeavored to comprehensively consider nuances to patient satisfaction when comparing virtual and in-person surgical consultations in rural British Columbia, thereby increasing understanding of the appropriate care modality.

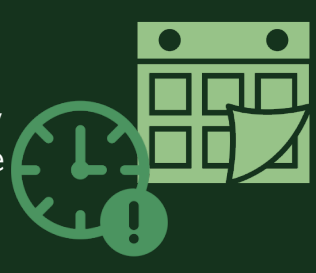
METHODS:

An online survey was conducted with participants living in rural British Columbia, Canada who had undergone surgery in the previous 12 months and had either virtual or face-to-face pre or post surgical consultations. This was augmented by a community-level survey administered in two rural sites in Revelstoke and Smithers. Quantitative and qualitative data were collected and analyzed.

RESULTS:

Findings from the province-wide survey (n=163) revealed there were **no significant differences in average satisfaction ratings** between people with and without virtual surgical consultations (8.03 versus 8.38, p = 0.26) and most (73.3 %) agreed that the **technology was easy to use.**

When asked whether the option of a virtual visit improved access to care, **21.1 %** of respondents to the provincial survey said that they would have **delayed the procedure** without the option of a virtual visit. This was higher in the community-level survey group **(38%)**.



Patients in Revelstoke and Smithers travelled an average of 427 kilometres (range 0-2200) round trip to have the procedures and really appreciated having the option of a virtual consultation. Patients saved an average of **9 hours** (range 1-90) by being offered a virtual consultation.

The theme of patient preferences revealed some respondents' desire for in-person pre-surgical appointments to develop rapport with their providers while the majority appreciated the convenience of virtual visits

> *"I think it's very important to meet in person with a surgeon prior to allowing them to do any procedure on you"*

IMPLICATIONS:

Data from this study reveal cost saved and reduction in time required to access care due to the introduction of pre and post operative virtual care visits. Based on patient reported satisfaction, further investments in virtual care are warranted. Findings tentatively suggest value in continued support for and improvement in virtual care options for presurgical screening and post-surgical follow up for rural residents. This will contribute to promoting equitable access to health care for rural residents.

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