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Video Group Clinic Case Study

Supporting people pre-chemotherapy in
Velindre, Cardiff
Specialist cancer care

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Ymddiriedolaeth GIG
Prifysgol Felindre

Velindre University
NHS Trust

Redmoor Health
ELC Partnership
Person-centred digital care



Our Challenge

Prior to COVID 19, we ran group clinics to provide information about and ensure patients were well prepared for chemotherapy. During Lockdown, this switched to individual phone consultations, which took 45-60 minutes - a lot of clinician time per patient. The team was enthusiastic about video group clinics (VGCs) and although they felt they lacked digital confidence, decided to join the Welsh Government programme.

Our Group Clinic Design

VGCs replaced 1:1 pre-chemotherapy telephone appointments. We focused initially on patients with colorectal cancer, and broadened our inclusion criteria early on. We recruited new patients for every VGC; usually at very short notice. The administrative team reached out to eligible patients; collected their emails and sent VGC joining details, including, a link to a video, explaining chemotherapy and inviting patients to watch it before the VGC.

Patients also received a leaflet, with details of the helpline and how to get help if they needed it.

The VGC was 90 minutes long, with the clinician present for 45 minutes. It worked best with six patients. There was no obvious candidate to act as Technical Facilitator. We approached our Macmillan team to see whether care navigators could support. They make great facilitators and this fits well with their role within the team. The clinician role is fulfilled by a chemotherapy nurse.

Discussion Board

The Discussion Board was broad and not tumour specific. The headings were:

- COVID
- Risk of infection
- Managing diarrhoea
- Managing side effects
- Checking my temperature
- Looking after myself
- Reactions to the infusion
- Helpline
- What happens at the hospital



**"The discussion board provided focus.
My head is like spaghetti just now"**



What Changed & Improved?

Efficiency and Access

- Velindre now requests email addresses routinely to facilitate electronic communication about VGCs
- The VGC realised nurse time efficiency gains of at least 85% compared to telephone one to one consultations. Fewer phone calls has freed clinician time for other priorities

Experience of Care

- Patients valued their VGC highly
- Patients are able to ask the questions that mattered to them and benefitted from hearing the answers to other peoples' questions, which they would not have thought to ask
- People's goals and learning was highly personalised. For example, one patient said he would remember to bring a scarf with him to hospital after learning about possible side effects affecting the throat
- 100% of patients surveyed felt more confident about their treatment
- VGCs provide patients with choice and the convenience of not needing to travel
- Adult children were able to join from other parts of the country; one son joined from London; helped his parent with technology an appreciated learning about her treatment

Top Tips

- It is useful to have a named person whom patients can contact if they are having technology challenges when they join on the day
- Despite national guidance, it is important to get the local IT and information governance leads on board
- Training helped overcome the team's lack of confidence with technology
- A dry run helped prepare the team for going live



**"VGCs are a great way to bring together 6
patients, accompanied by a friend or family
member; two heads are better than one"**

