

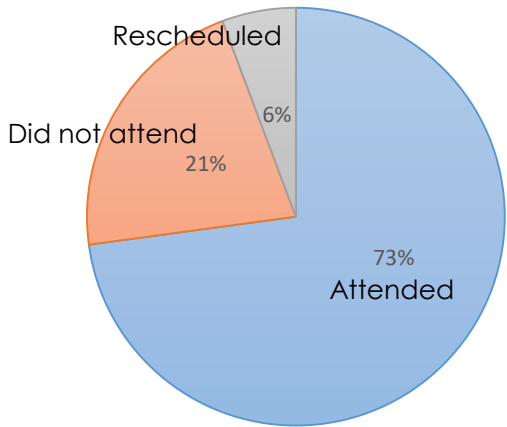
# Virtual clinics for Paediatric Epilepsy during the Covid-19 pandemic – is this a successful model for service delivery?

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The Covid-19 pandemic disrupted all non-emergency health care services, including children's epilepsy clinics. Telephone consultations were implemented in March 2020. Non-attendance rates from March-August clinics in 2020, were compared with March-August face to face clinics the preceding year. The results were as follows:



Attendance of Face to Face clinics 2019



**27% non-attendance of face to face clinics in 2019**

**vs**

**17% non-attendance in virtual clinics 2020**

**Telephone clinics resulted in 37% reduction in DNA rates**

## So, what does this mean for the service?

Improvements in attendance rates for patients, and good feedback from parents indicates this has been a positive improvement for paediatric epilepsy clinics.

Parents found many advantages to the new format and felt it is a good alternative to face to face appointments. Going forward, would a mixture of virtual and face to face clinics be a good way to run this service?

Areas to consider in future include:

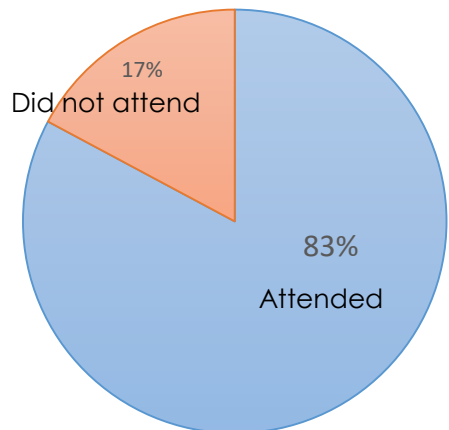
Which patients are eligible for this type of review?

Should we develop a screening criteria when booking telephone clinics?

Are other clinics amenable to telephone format?

These considerations could help shape and develop the Paediatric epilepsy service within the BHSCT.

Attendance of telephone clinics 2020



**Parents gave their thoughts:**

