COVID 19 – rapid adaptation to deliver renal dietetics services across MNHHS
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Introduction
COVID-19 necessitated a rapid switch to telephone delivery of clinical outpatient services at RBWH.

Aim
To evaluate the use of telephone as a mode of delivery to provide renal dietetics services across MNHHS during the COVID-19 pandemic.

Methods
• A patient experience survey comparing in-person versus telephone service delivery was developed from the MNHHS COVID-19 service evaluation framework and conducted over the telephone.
• 40 patients who had a recent telephone consult and a previous in-person dietetic appointment were contacted: 23 of these patients agreed to participate.

Results
Compared to a face to face appointment the telephone consult was:

- 87% as convenient or more convenient
- 87% as easy or easier to ask questions
- 83% detailed enough
- 83% as easy or easier to understand
- 95% relevant and tailored
- 87% as easy or easier to set goals and discuss intervention

Reasons for convenience
• Reduced travel and waiting time
• Not having to arrange transport
• Less appointment burden
• Easier to fit around work/other commitments

Those who found the telephone consult to be less convenient had traditionally seen the dietitian face to face whilst on in-centre dialysis.

Conclusion
• These findings support a decision to not fully revert back to our traditional face to face outpatient model of care.
• Patients will be offered face to face or telephone consults according to their preference.