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Caregivers’ Role in Supporting Occupational Therapy Video Telehealth: A Qualitative Study

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Abstract

Background: Video telehealth increases access to care for patients living in rural communities and those whose functional status makes attending brick-and-mortar health care visits difficult. This includes many older adults whose accumulated health risks, due to age and chronic illness, may result in higher rates of disability. Older adults underutilize video visits due to decreased digital literacy and age-related impairments. While caregiver assistance may ameliorate such barriers, little is known about the role of caregivers to support patient participation in video telehealth, particularly for more hands-on clinical services such as occupational therapy (OT).

Objective: This project seeks to explore the role of caregivers to facilitate video telehealth from the perspective of occupational therapy (OT) practitioners at Veterans Health Administration, the largest integrated health care system in the United States.

Methods: In early 2021, we conducted semistructured interviews with Veterans Health Administration occupational therapy practitioners (n=27) about their experiences using video telehealth to deliver OT services. During the interviews, we asked OT practitioners to describe caregiver involvement in video telehealth. We analyzed the responses related to caregiver participation to better understand the caregivers’ support role in OT video telehealth sessions.

Results: Interview responses related to caregivers’ participation in video telehealth led to the following three broad findings: (1) caregivers participate in video telehealth sessions to varying degrees and fill a variety of technical and clinical roles; (2) the presence of caregivers allows patients who might otherwise not be able to access telehealth to do so; and (3) there are benefits and barriers to caregiver participation. Related to caregivers’ support roles, our findings revealed that caregivers assist with technical tasks such as logging onto the computer and operating the device to enable visualization during the sessions. The clinical tasks caregivers assist with include communicating with the clinician and taking measurements during home safety evaluations. Factors that appear to contribute to caregiver involvement include patients’ low technical literacy and age- or health-related impairments, such as hearing and vision loss, decreased mobility, or cognitive changes. Perceived benefits included increased caregiver involvement in patient care, while barriers included lack of available caregivers to assist.

Conclusions: This study improves our understanding of the caregivers’ role supporting patient participation in video telehealth. This foundational work suggests that more studies examining caregiver participation are needed, particularly larger studies and those from the perspectives of caregivers and patients. Elaborating caregiver participation in video telehealth should enable the identification of strategies to facilitate telehealth service delivery, particularly for patients who continue to face access challenges in a post–COVID-19 landscape.

Conflict of Interest: None declared.

(KEYWORDS: telemedicine; caregivers; occupational therapy)
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