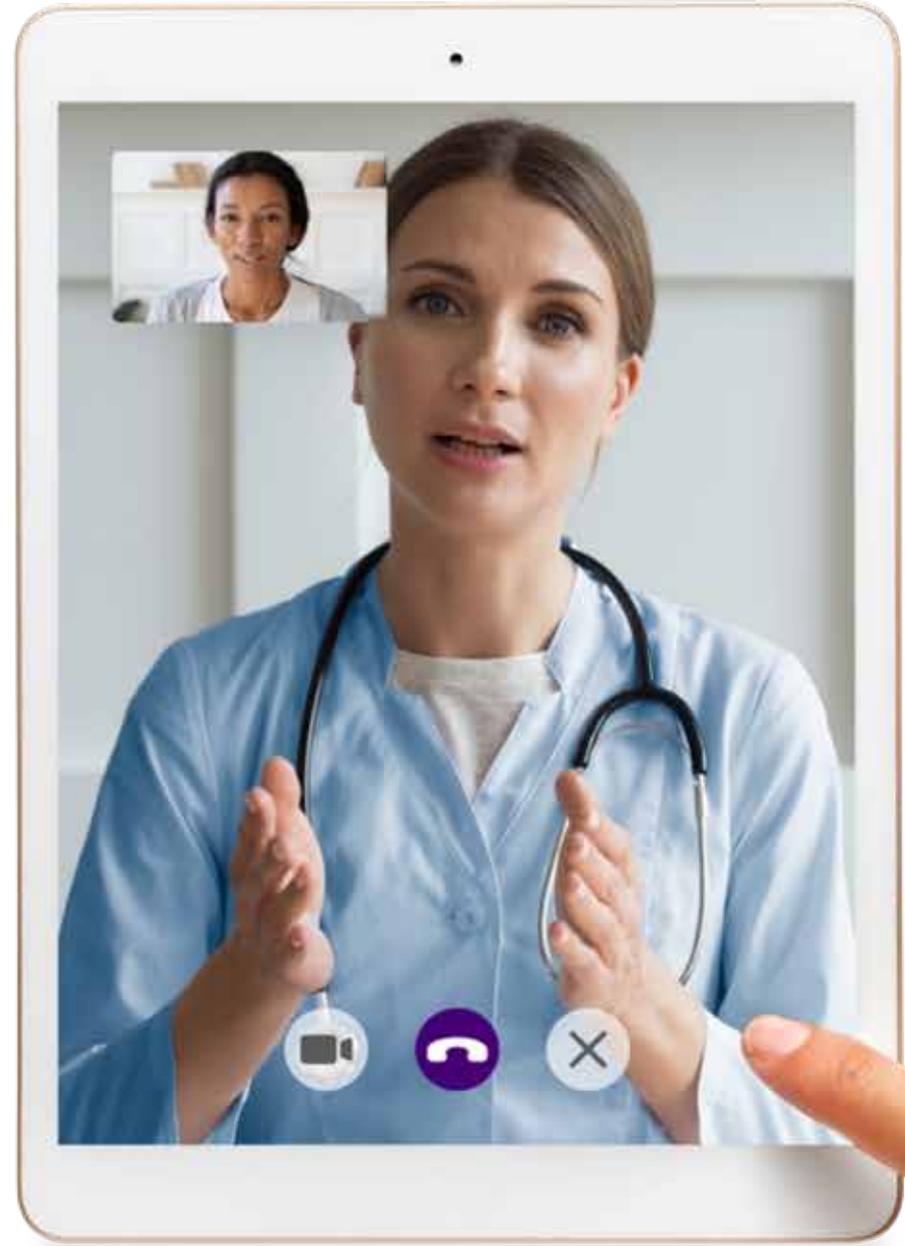




SUSTAINING THE GROWTH OF DIGITAL HEALTH

**Re-Examining the Accenture 2020
Digital Health Patient Survey**

ENGLAND FINDINGS



Executive summary

Digital healthcare has exploded in England during the pandemic.¹ With most in-person doctor visits on hold, virtual care experiences have become common. But turning forced adoption into adoption by choice will be challenging. The Accenture 2020 Digital Health Patient Survey reveals that before COVID-19 just 12% of patients in England had received healthcare virtually. English patients also had significant concerns around data privacy and security, and doubts about the performance of digital tools. Our research confirmed, however, that as many as 60% of patients, regardless of age, would willingly switch to virtual healthcare if it were more convenient, accessible and could meet their care needs.

How can recent gains in digital healthcare be made permanent?

As in-person care resumes, healthcare organisations and patients can seize the opportunity to maintain the momentum created and address the pre-crisis issues that have previously inhibited digital health adoption.

For instance, working to increase trust in virtual services as healthcare organisations incorporate new tools into business and care models, addressing security and privacy concerns and increasing access to technology for all patients.

Our analysis focused on patient behaviours regarding:



Virtual healthcare

Includes services and support needed for wellness, diagnosis and treatment; care is available regardless of a patient's location. The provider and patient are in different locations, with support and care provided through video, mobile apps, secure email, text/SMS messaging or online social platforms.



Digital healthcare

Which includes tools and technologies such as electronic health/medical records, mobile solutions, wearables that track fitness, lifestyle and vital signs, smart scales and chatbots.

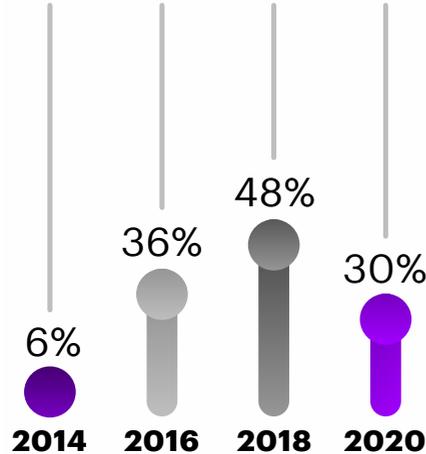
Before COVID-19, growth in patient digital health adoption had stalled

Patients’ use of digital tools to manage their health had declined before the pandemic. In fact, almost two-fifth of patients in England surveyed (43%) were not using any digital tools to manage their health (highest amongst countries surveyed). Use of mobile devices and applications fell from nearly half (48%) using these tools in 2018 to 30% in early 2020. Use of wearable technology—for instance, devices that collect health data such as fitness and vitals—has decreased from 31% in 2018 to just 17% in 2020.

Figure 1. Fewer patients were using digital tools to manage their health

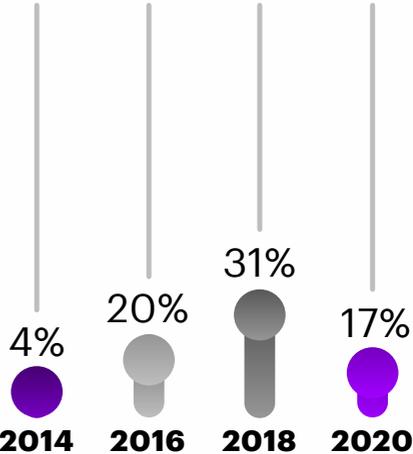
Mobile phone/tablet applications

(e.g., tracking personal activity/diet/fitness/weight loss/etc.)



Wearable technology

(e.g., patient or medical devices that collect information about an individual’s health, such as fitness, vitals and lifestyle)



Q: Which of the following technology or electronic health management tools have you used to manage your health in the past year?
 2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

AN EXPLOSION IN VIRTUAL CARE

Prior to the pandemic, adoption of digital healthcare tools and services in England was low, partly because digital solutions were simply not integrated into existing care pathways. Just 14% of respondents told us that their GP had recommended digital tools to manage their health. The pandemic, however, has forced adoption on a massive scale—for both doctors and their patients—giving healthcare organisations an unprecedented opportunity to ensure that digital is here to stay.

Patients have avoided in-person doctor visits to such an extent that by the second week of April 2020, GPs were conducting only 7-8% of consultations face-to-face—versus 80% in 2019.² There has also been a surge in use of the NHS App, which gives online access to GP appointments and electronic prescriptions. The popularity of previously under-used digital services including online triage and video consultations has soared as well.³



In an experiment with significant future potential to enable the digitally disconnected, NHSX has teamed with Facebook and Accenture to connect family and friends with several thousand isolated relatives in care homes.⁴

NHS Digital, meanwhile, rolled out a virtual collaboration platform to a remarkable 1.25 million members of its workforce in the “fastest-ever roll-out of any such platform across the health service.”⁵



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Beyond the urgency that drove adoption during the pandemic, patients want virtual care services

If given the choice, most patients would choose virtual for basic care services, and even for specialty care. They “definitely” or “probably” would receive health and wellness advisories (58%) and remote monitoring of ongoing health issues through at-home devices (52%), and nearly half (52%) would choose virtual for routine appointments. Some are open to receiving diagnoses virtually—37% for illnesses, diseases and disorders and 38% for appointments with medical specialists for diagnosis or acute care.

Figure 2. Patients are open to virtual care—from basic to specialty services



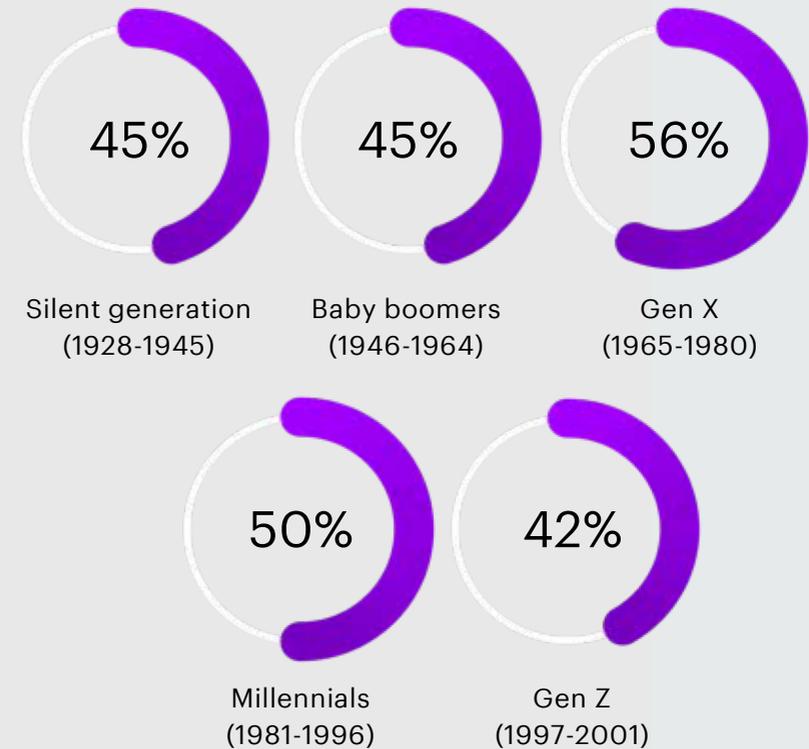
Q: Which of the following would you do virtually if given the choice? “Definitely” and “Probably would do virtually” responses n=926
2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

Digital adopters aren't only the young

Importantly, age is no barrier to digital acceptance in England. Our pre-pandemic research showed that 45% of Baby Boomers and the same proportion of over-75s were willing to receive virtual healthcare from traditional providers, even more than the 42% of Gen Z who said they would do so.

Figure 3. Age is no barrier to digital adoption

% of those who answered yes



Q: Are you comfortable with interacting with a chatbot, computer, or digital device?
2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

Doubts about data privacy & security

Technology has played a critical role in the response to COVID-19, with chatbots emerging as a key tool. However, before the pandemic patient doubts about data privacy and security were remarkably high in England. 42% of patients ranked concerns around privacy as the leading reason why they would not use chatbots, computers or digital devices, well above such issues as service effectiveness.

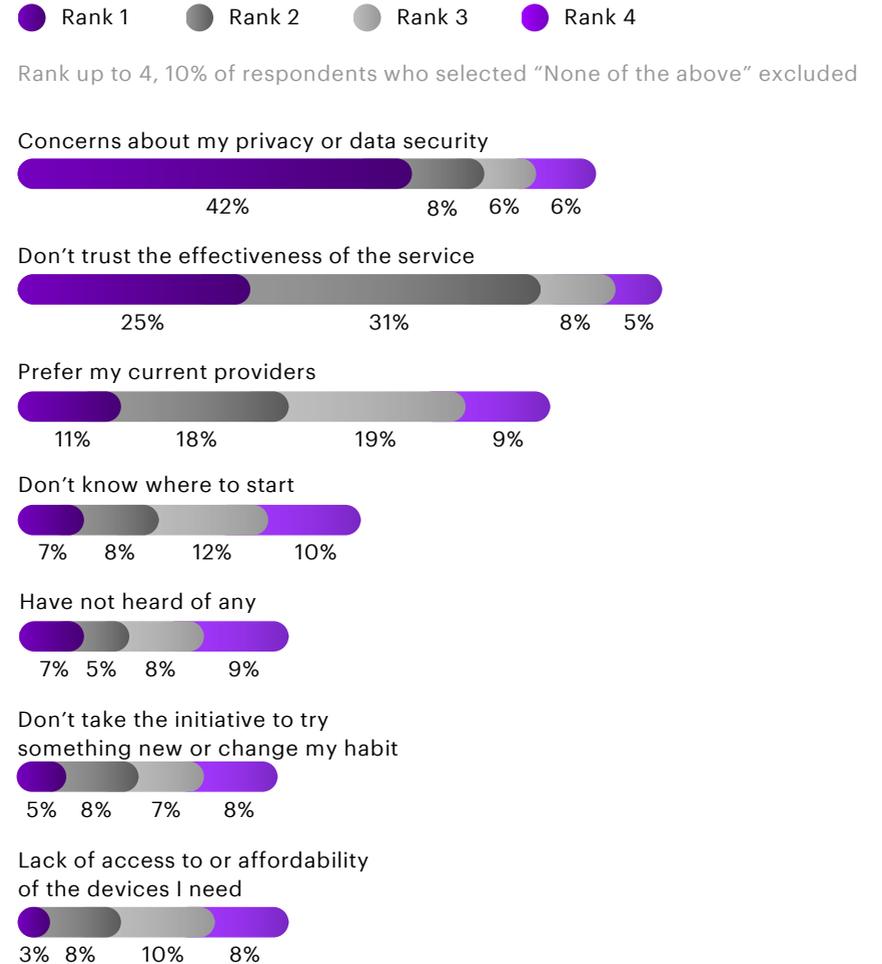
Fear of COVID-19 has not eliminated these concerns. Post pandemic, we believe that patients will continue to prioritise the security of their health data.

Recommendations for healthcare organisations

Digital healthcare developed in collaboration with patients and healthcare professionals will reveal the specific causes of data privacy concerns, help address them and thus drive adoption. If patients understand that their data is being used for healthcare improvements (e.g. research) and if clinicians can help ensure transparency around security protections, patient confidence in digital health will increase.

Typing...

Figure 4. Lack of trust in data privacy stalls chatbot growth



Q: What might keep you from using chatbots, computers or digital devices for your health questions and care? n=904

2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

Trust in clinicians remains high

Our pre-pandemic research confirmed that English patients, regardless of age, trust healthcare professionals significantly more than any other source of care advice, including diagnoses or treatments made by a physician supported by an intelligent machine, and well above social media accounts from healthcare brands.

Figure 5. Doctors and nurses still command the most trust (by age)

● Baby boomers/Silent generation ● Gen X/Millennials/Gen Z

“Strongly” and “Moderately trust” responses

Medical doctors



Nurse practitioners and physician assistants



Diagnoses or treatments determined by a physician supported by an intelligent machine/AI



A health and wellness service offered by a retailer or patient brand



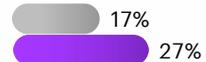
A health and wellness service offered by a healthcare start-up company



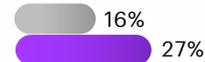
Diagnoses or treatments determined entirely by an intelligent machine/AI



Product claims made by pharmaceutical companies



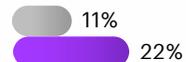
A health and wellness service offered by a technology company, rather than from a traditional provider



Responses to health questions from my phone or home device



Health advice from articles and videos shared on social media



Social media accounts from healthcare brands



Q: To what extent do you trust the following?

Baby boomers/Silent generation n=513; GenX/Millennials/Gen Z n=489

2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

Human/AI care combination erodes trust

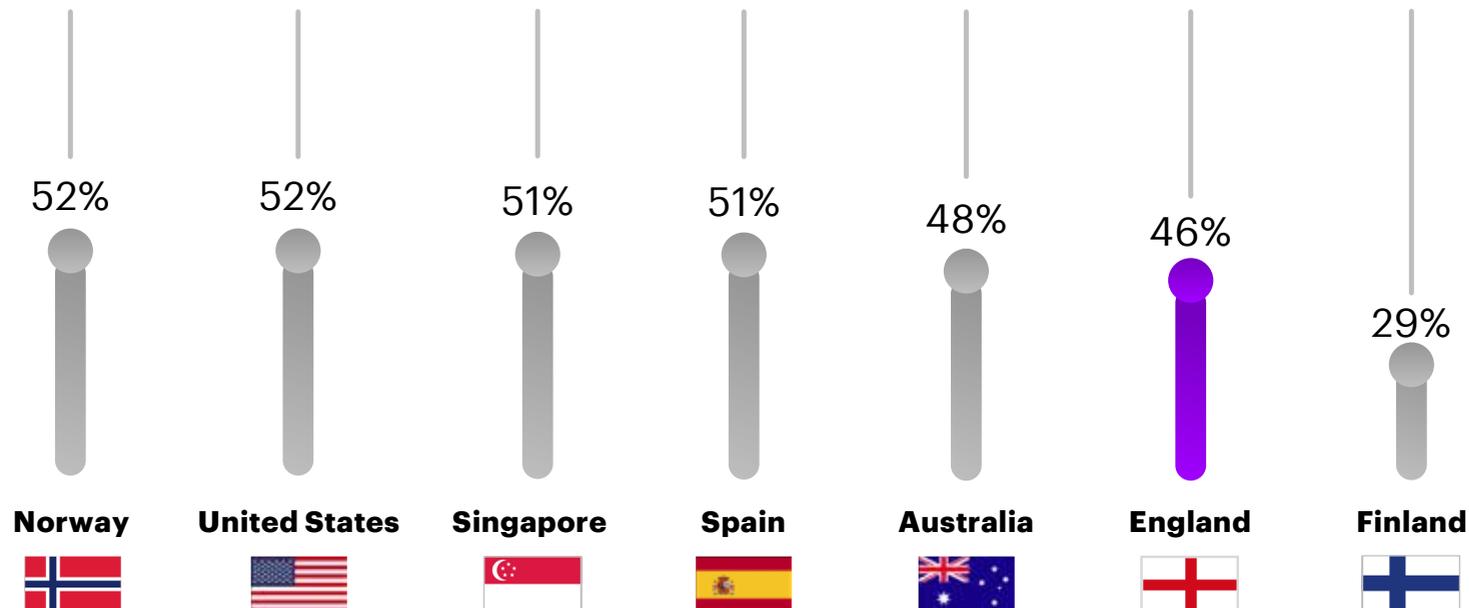
The human/AI combination caused trust in physicians to plummet among English patients overall—from 79% (for physicians alone) to 46% (for physicians supported by AI). When asked to what extent they trusted diagnoses or treatments determined entirely by AI, English respondents had less confidence (at 25%) than just about any other country we surveyed, except for Finland, at 11%.

These are not exactly ringing endorsements of digital healthcare as a system—though it’s likely that English patients’ heightened exposure to virtual care during the pandemic has shifted perceptions and that ongoing educational efforts can shift them further.

Figure 6. Trust around the world: Physicians supported by AI

“Strongly” and “Moderately trust” responses

Diagnoses or treatments determined by a physician supported by an intelligent machine/AI



Q: To what extent do you trust the following? England n = 1,002; Australia n = 1,000; Finland m = 800; Norway n = 800; Singapore n = 900; Spain n = 1,000; United States n = 2,302
2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

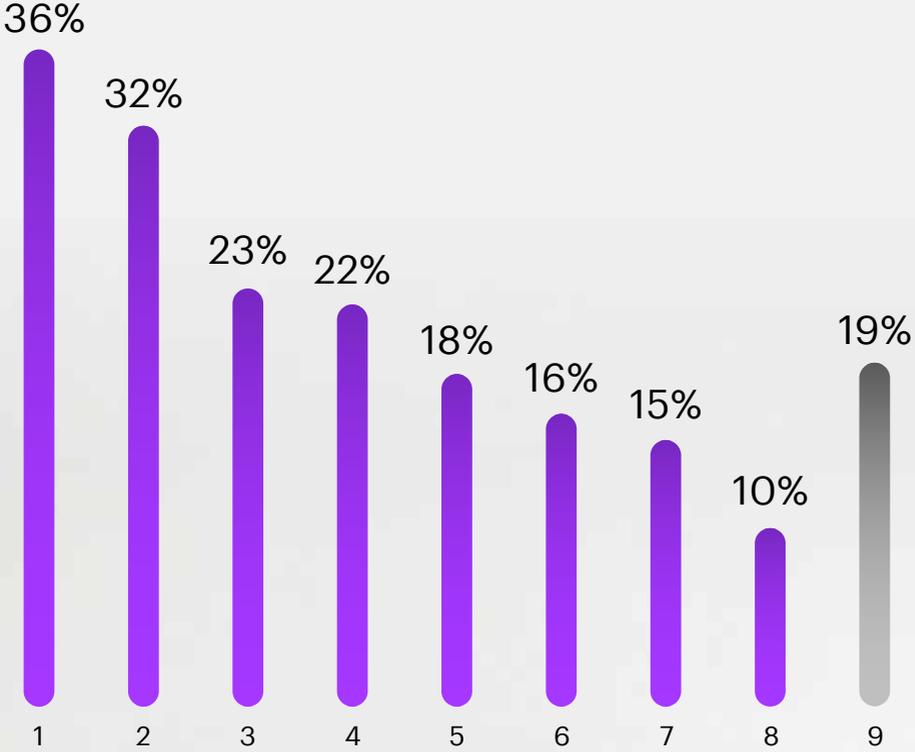
Meeting the targets of the NHS Long Term Plan will require trusted, patient-facing digital technology.

The NHS should explore how to leverage digital technology to distribute validated information, in much the same way as it has worked with Google to combat “fake news” by ensuring that medically validated advice is prioritised in searches during the pandemic.⁶



Typing...

Figure 7. Room for improvement in performance of digital tools



- 1 Increased my focus on wellness and prevention
- 2 Given me a better understanding of my health
- 3 Reduced time spent with the doctor
- 4 Improved health outcomes
- 5 Increased convenience of accessing care
- 6 Lowered the cost of my insurance
- 7 Lowered my cost of care
- 8 Given my care team more information about my health
- 9 None of the above

Q: Think about the digital tools and services that you noted you use in the last question. To what extent has your use of digital tools and services benefited you, if at all? n=567 who reported using at least one digital tool or service in a previous question.
 2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

Engaging with digital tools

Pre-pandemic, English patients were significantly less likely than patients elsewhere to use digital technologies to manage their health: 43% said they did not use them, vs 29% in the six other countries surveyed. This may, of course, be largely because healthcare professionals were not convinced of their value to patients, or just too busy to engage with such tools themselves. However, just 18% of English patients who did use such technologies said that technology had made access to healthcare more convenient, far fewer than elsewhere (27%).



ACCESS AND INCLUSIVITY: THE KEYS TO SUCCESS

The pandemic has plainly reinforced patient willingness to engage with digital tools, offering the NHS an opportunity to seize the digital initiative. The keys to success will be access and inclusivity.

Our research has shown that age is no barrier to digital adoption, but some observers fear that the speed of digital change during the pandemic may deepen health inequalities and could disadvantage certain patient groups.⁷ Furthermore, trust in the confidentiality and intimacy of the patient/doctor relationship remains paramount in England.⁸ Virtual health should complement and reinforce it.

Healthcare organisations need to ensure that they have superior citizen engagement, which can be achieved by taking small steps (like the Facebook example) to make digital a permanent communications channel.

Doctors should be at the forefront of digital engagement and awareness promotion. Healthcare organisations should use doctors' authority and their position of trust to promote awareness of and engagement with digital health among patients, as they have done in response to COVID-19. Patient trust in traditional providers should give clinicians considerable leverage as they seek to build on recent gains in virtual healthcare.



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Practical recommendations to stimulate digital adoption

Many patients experience long wait times to see their GP so timely virtual access may be preferred in future.

Since over-65s account for a significant proportion of consultation hours in England, tools and services should be designed in collaboration with older adults, who are as ready to embrace digital as any other age group.

Marry digital/virtual care with physical care to provide effective, trusted, reliable services physically and at a distance. The new healthcare system will rely on seamless, coordinated care that provides people with the right attention, services, therapies and products anytime, anywhere, to instil confidence, safety and respect across all moments.

Fit services into clinical practice. COVID-19 has forced digital health to fit into daily clinical practice. More healthcare organisations have become comfortable with digital health. Healthcare providers should review data insights to analyse what worked and what didn't and adjust digital services accordingly. Care providers, especially doctors, do not want to waste precious time that they could be applying in other areas that add value to the patient experience. Digital and virtual health solutions can be part of processes, business models and workflows—fitting inside the way healthcare is delivered. Healthcare organisations can put in place systems that allow providers to recommend digital services to patients and collect and interpret patient data from these services.

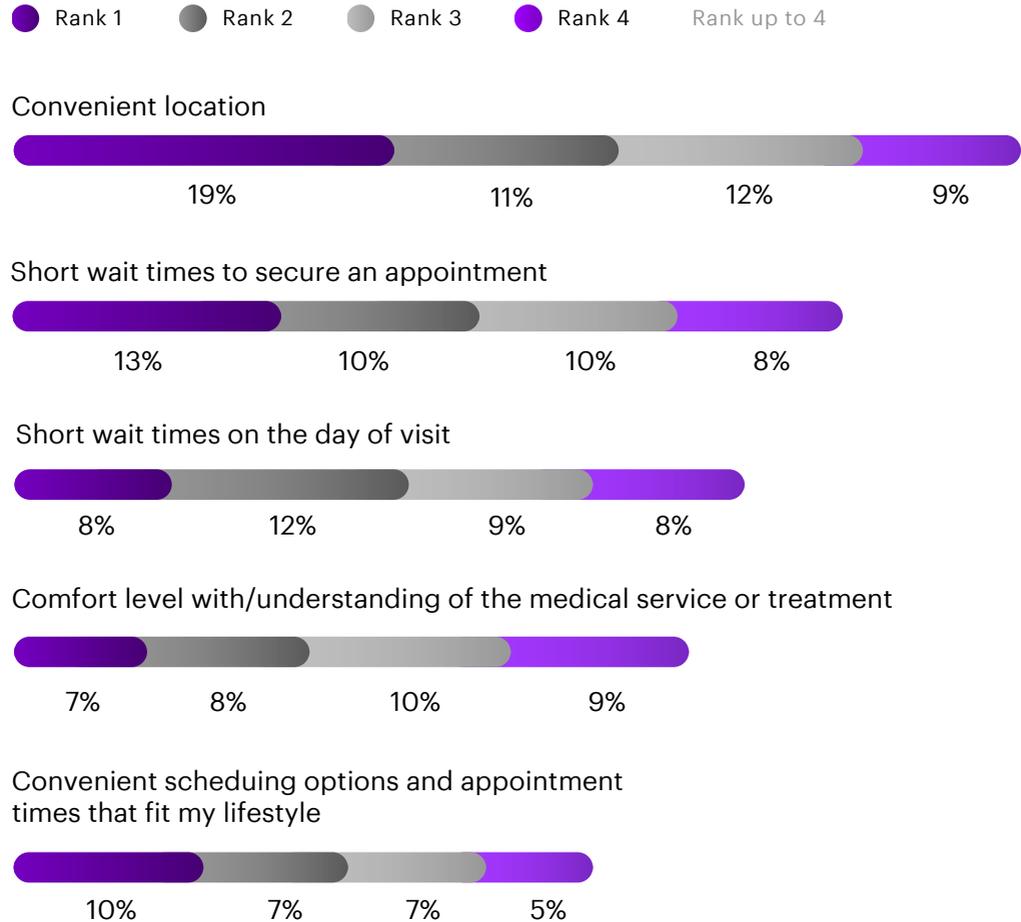


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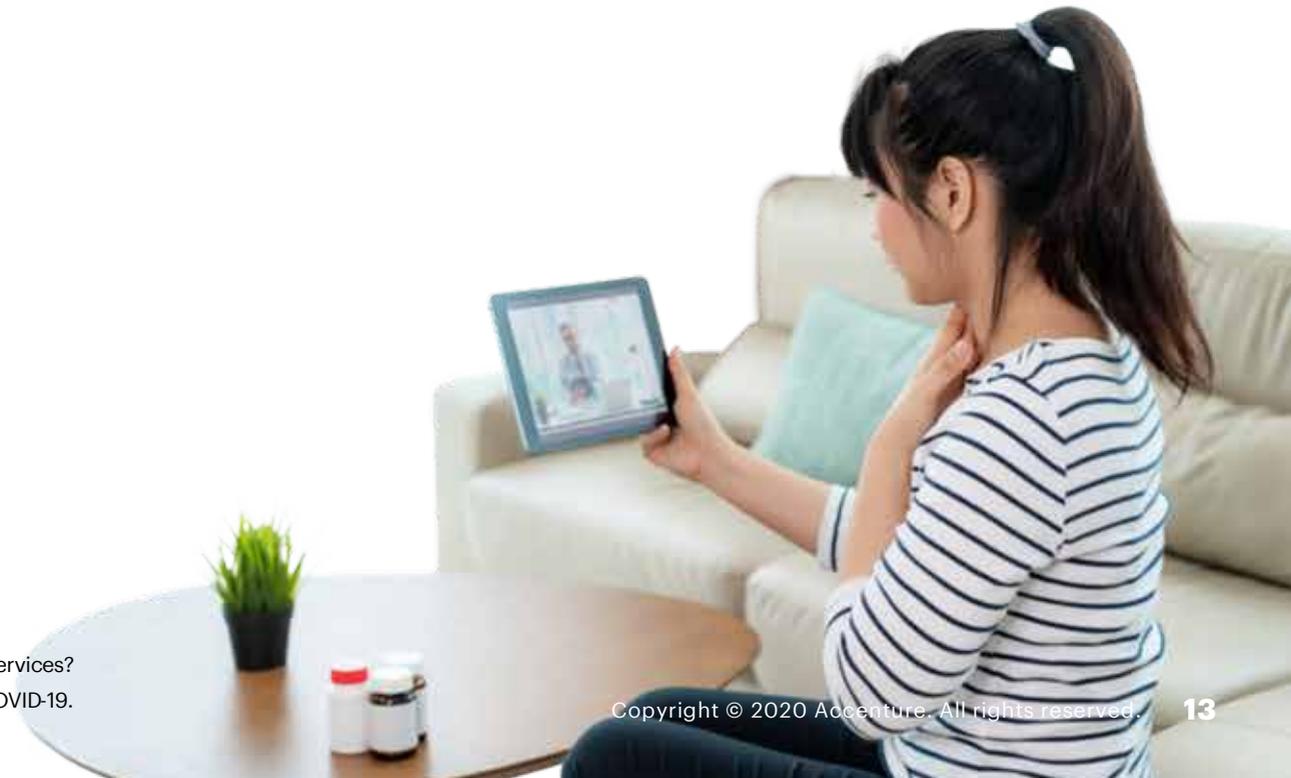
Patients want convenience, but also quality

Convenience matters to patients in England. As many as 60% told us they would switch to a virtual service for faster or more convenient access to care provided were as good as in-person.

Figure 8. Convenience and speed are top motivators in England



A convenient location and scheduling, plus shorter waiting times, topped the wish list when patients were asked to name the factors that most influence their care choices—and these factors were significantly more important to English patients than to patients elsewhere: 42% ranked convenient location as a top-three factor, vs 32% of all others; 34% chose short wait times to secure an appointment, vs 25% of others.



Q: Which of the following factors most influence your decisions about when and where to seek medical treatment or services?
 2020 survey data is from November to December of 2019 and reflects patient attitudes prior to the global spread of COVID-19.

Key features of patient-engaging digital healthcare

To ensure the engagement of all citizens, digital healthcare tools and technologies should be:

Collaborative

Developed together with patients, including older patients, who are as willing to embrace digital as any other age group.

Robust

Respectful of patient privacy and resilient enough to meet rising data privacy and security expectations.

Transparent

Based on a mutually beneficial exchange of data for service.

Trusted, patient-facing digital technologies will be key to the ongoing adoption of digital health in England—and now is the moment to seize the initiative.

Clinicians need to prioritise data privacy and security, drawing patients themselves into the design of robust and relevant technologies. They also need to ensure the collaborative and transparent applications of digital and virtual health that will improve and enhance the patient experience. This is a pivotal moment for digital healthcare in England. There should be no going back.



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Ashish is a versatile leader who studied Chemical Engineering, and worked extensively across Life Sciences, Consumer Health and Retail. He is deeply passionate about the power of technology and digital in transforming healthcare and wellbeing. Ashish leads Accenture's health business in the UK. Prior to this, Ashish was the Global Technology Industry Lead for Accenture's Retail business and led technology business for consumer products industries in Europe. He has worked extensively with the British and international Pharma companies in delivering transformative patient outcomes.

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With thanks to our research partners, Oxford Economics, especially lead researchers Ed Cone, Adrianna Gregory and Sundus Alfi.

Accenture's 2020 Consumer Research on Digital Health

Accenture commissioned a seven-country survey of 7,804 consumers aged 18+ to assess their attitudes toward technology adoption, wellness management and their changing relationship with providers. It is the latest in a series of annual health technology surveys tracking the perspectives of consumers, with a particular focus this year on the shifting needs and desires of consumers and how they align with the trends that are redefining services provided by healthcare systems. The online survey included consumers across seven countries: Australia (1,000), England (1,002), Finland (800), Norway (800), Singapore (900), Spain (1,000) and the United States (2,302).

The survey was conducted by Oxford Economics on behalf of Accenture between November and December 2019. Where relevant, the survey uses select findings from the [Accenture 2019 Digital Health Consumer Survey](#), the [Accenture 2018 Consumer Survey on Digital Health](#), the [Accenture 2017 Consumer Survey on Healthcare Cybersecurity and Digital Trust](#) and the [Accenture 2016 Patient Engagement Survey](#).

For providing insights into consumers behaviour changes during COVID-19 crises, Oxford Economics conducted desk research in April and May 2020, leveraging public media and official government sources. Insights were compared against the initial survey findings to understand temporary forced versus long term voluntary digital health adoption chances.

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