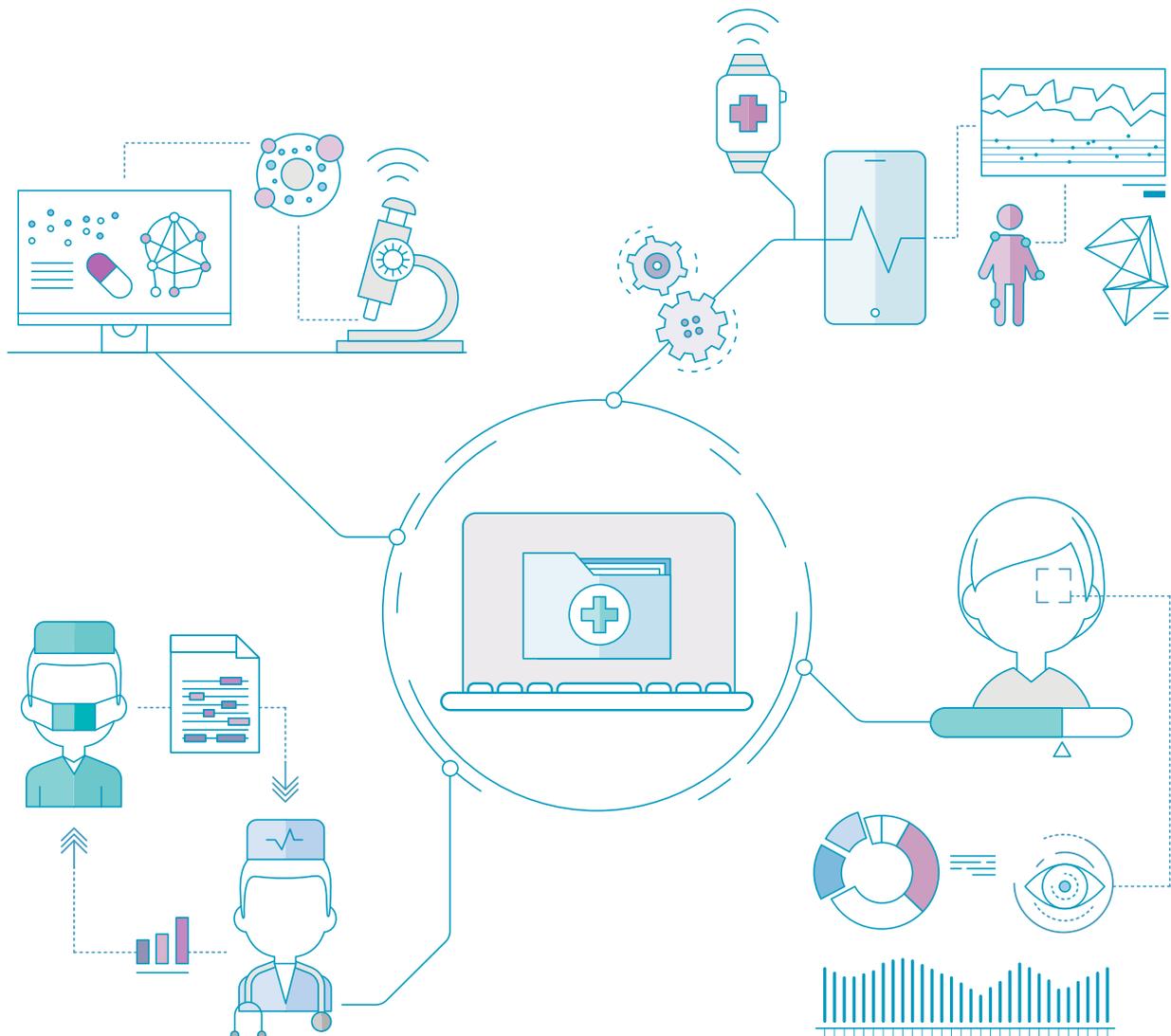




ehealthmonitor 2019

NURSING ASSISTANTS



Authors: Anouk Verhellen, Charlotte Jewell, Michelle Van Gils, An Jacobs and Eva Steenberghs

Data collection: Eva Steenberghs, Gilles Wuyts, Sofie De Lancker and Keshia Vleminx

Project management: Eva Steenberghs and Katelijne Vervaeke

For questions regarding the eHealthMonitor, contact eva.steenberghs@imec.be

Project leads: Prof Dr. An Jacobs, Program Manager Data & Society and Roger Lemmens, Director Digital Innovation

TABLE OF CONTENTS

INTRODUCTION	5
KEY CONCEPTS AND DEFINITIONS	7
CHAPTER 01: SOCIO-DEMO OF OUR SAMPLE	10
CHAPTER 02: EHEALTH SERVICES	13
1. MANAGING THE PATIENT FILE	13
2. USE OF EHEALTH SERVICES	14
3. INTEREST IN THE USE OF EHEALTH SERVICES	15
4. NEED FOR SUPPORT WITH THE USE OF EHEALTH SERVICES	16
5. GENERAL ATTITUDE TOWARDS THE USE OF DIGITAL APPLICATIONS	17
6. KEY FINDINGS	18
CHAPTER 03: EXCHANGE OF HEALTH DATA AMONGST HEALTHCARE PROFESSIONALS	20
1. COMMUNICATION CHANNELS USED TO EXCHANGE HEALTH DATA	20
2. SATISFACTION WITH DIGITAL COMMUNICATION CHANNELS	21
3. KEY FINDINGS	21
CHAPTER 04: ONLINE COMMUNICATION WITH PATIENTS	23
1. ONLINE CONSULTATION	23
2. RESPONSIBILITIES HEALTH PORTAL AWARENESS	25
3. ATTITUDE TOWARDS ONLINE COMMUNICATION WITH PATIENTS	26
4. KEY FINDINGS	27
CHAPTER 05: SELF MANAGEMENT AND ONLINE TREATMENT	29
1. USE OF DIGITAL APPLICATIONS IN PATIENT CARE	29
2. KEY FINDINGS	29

LIST OF GRAPHS

CHAPTER 01: SOCIO-DEMO

CHAPTER 02: EHEALTH SERVICES

Graph 1.	Managing patient file	13
Graph 2.	Use of Belrai 2.0	14
Graph 3.	Support with the use of ehealth services	16
Graph 4.	Digital applications	17
Graph 5.	Use of AI	17

CHAPTER 03: EXCHANGE OF HEALTH DATA AMONGST HEALTHCARE PROFESSIONALS

Graph 6.	Communication channels used to exchange health data	20
Graph 7.	Satisfaction with digital communication channels	21

CHAPTER 04: ONLINE COMMUNICATION WITH PATIENTS

Graph 8.	% of nursing assistants that are aware of online consultation	23
Graph 9.	Recommend use of health portal	24
Graph 10.	Request for online consultation via health portal	24
Graph 11.	Online access for patients	25
Graph 12.	Online communication with patients	26

CHAPTER 05: SELF MANAGEMENT AND ONLINE TREATMENT

Graph 13.	Use of digital applications	29
-----------	-----------------------------	----

INTRODUCTION

The eHealthmonitor 2019 is a two-phased mixed-methods study (structured survey and focus group interviews). It was assigned by the federal and regional Belgian governments, and RIZIV/INAMI, and executed by imec and imec-SMIT-VUB in collaboration with WeLL.

The eHealthmonitor 2019 offers insight in the use of and experience with different eHealth services and digital applications in Belgian healthcare. Data was collected via **online questionnaires** (October–December 2019) from **six target groups**: General Practitioners (N=849), Specialists (N=941), Pharmacists (N=692), Nurses (N=1095), Nursing Assistants (N=118) and Citizens (N=5046). **It is important to keep in mind that the data was collected previous to the COVID-19 sanitary crisis.**

This report describes the **survey results** for the group of **nursing assistants**. All other reports, including a more detailed methodological section and the executive summary of all results (in French and Dutch), can be retrieved via www.ehealthmonitor.be. Before we present the results a short overview of the followed methodological procedure for all surveys is described.

QUESTIONNAIRE DEVELOPMENT AND DATA COLLECTION

The final questionnaires were iteratively developed with feedback from experts and representatives of the target group, with a focus on current use and experiences with the available eHealth services. This resulted in **6 different questionnaires** with comparable questions where relevant. **All questions focused on the experience of health care professionals and citizens in the past year (October 2018–September 2019) and our results therefore reflect the situation before the COVID19 sanitary crisis.**

We **recruited participants via several approaches**. The cabinet of the federal and regional health ministers and the RIZIV/INAMI communicated through their different channels and sent out a press release that was picked up by specialized press. Also, an invitation to participate was sent to all Belgian health professionals via the eHealthBox. Furthermore, we mobilized the help of many regional and federal health organizations, such as our project partners, unions, professional associations and interest groups to spread the questionnaires to their members. We want to thank them for their efforts. Citizens were reached through commercial panels such as imec.Maakdatmee and Bilendi Belgium.

DATA CLEANING AND ANALYSIS

Partially completed surveys were not systematically removed during **data cleaning**. Only respondents with unusual and/or inconsistent responses were removed by verifying open questions. Thus, the **N for each particular question is provided** under the table/graph, showing lower response rates for some of the items.

The **obtained sample** of each target group of healthcare professionals was **compared to the national statistics of healthcare practitioners 2019¹** for representativeness by region, age and sex. For the **citizens** the obtained sample was compared to the **statistics of the Belgian population** for representativeness by region, age, sex and education level². For each profession, as well as for the citizens, detailed information of the samples demographics is provided at the start of each report. In addition, disclaimers are added to the reports where the percentages of groups in our sample do not accurately represent the size of this group in society.

The **quantitative data was analyzed** using SPSS Statistics version 26. Due to the sample sizes, very small differences often still reached statistical significance³. The findings presented represent the **total sample** and cover the **Belgian trends** and attitudes. However, **when distinctive regional variations** are noticed these are **pointed out**.

1 Steinberg, P. (2019). Jaarstatistieken met betrekking tot de beoefenaars van gezondheidszorgberoepen in België. Cel Planning van het Aanbod van de Gezondheidszorgberoepen

2 Statbel (Algemene Directie Statistiek – Statistics Belgium). Kerncijfers Belgische bevolking 2019. FOD Economie, KMO, Middenstand en Energie.

3 Lantz, B. (2013). The large sample size fallacy. Scandinavian journal of caring sciences, 27(2), 487–492.

For each target group the **most relevant open-ended questions** with regards to the services (e.g. services with lowest usage, services with highest dissatisfaction) and the feedback question at the end of the survey were analyzed. All selected questions were first coded inductively (open coding) using MAXQDA 2020. When no new information was detected and saturation was reached, these codes were categorized. These categories were then used to complete focused coding of the rest of the data. **The main categories are reported.**

Recruiting exclusively via a digital questionnaire might limit the external validity of the results. The findings provide an **indication** of the trends, barriers and possibilities with regard to eHealth in Belgium for people of the target groups **who are already active online**. Therefore, the results presented in this report are limited to our sample and do not represent all segments of the entire Belgian population.

KEY CONCEPTS AND DEFINITIONS

This section provides an overview of the **key concepts and definitions** that are used throughout the report.

The definition of eHealth by the European Commission was adopted for the eHealthmonitor 2019, namely “... *tools and services that use information and communication technologies (ICTs) to improve prevention, diagnosis, treatment, monitoring and management of health and lifestyle*”¹. This definition is interpreted and applied in a broad sense to avoid a too restrictive scope, which could be unwanted to evaluate and monitor evolution over time.

AI / Artificial intelligence. A system which can, to a certain degree, feel, observe and think like human beings and which can act in a rational way. For example, artificial intelligence is used in self-driving cars or in health care to offer support with decisions regarding medical treatment (e.g. wound care).

BeRAI 2.0. eHealth services that allows the evaluation and/or follow-up of the health condition and care needs of a vulnerable patient or a patient with a complex care situation.

Care robot. A robot that can perform certain domestic tasks or care tasks. For instance, having a conversation with a patient, showing specific exercises and accompanying a patient in executing them or giving patient education. This includes hugging robots or telepresence robots (a tablet on wheels that is controlled remotely).

CEBAM. eHealth service that allows online access to independent, scientific medical information. This eHealth service is currently not available to nursing assistants.

Digital applications. The total offer of apps, programs or digital devices that can be used to comply with the care needs of a patient. These can be provided by the public sector or the private sector.

e-birth. eHealth service that allows online submission of an electronic birth notification and/or the medical details with regard to the birth. This eHealth service is currently not available to nursing assistants.

Electronic drug dispenser. An electronic device that automatically offers the right medication at the right time to the patient and reminds the patient to take his/her medication.

Electronic Medication Record. eHealth service that provides an electronic overview of the medication of the patient. This eHealth service is currently not available to nursing assistants.

Electronic monitoring techniques. Electronic devices that allow care takers to keep an eye on their patient (e.g. movement sensors, a personal alarm in the form of a necklace or watch, an interactive buzzer system, an electronic bed pad, video and/or audio surveillance).

Government health portal (official national or regional health portal). A secured website/application, provided by the federal or the regional government, that stores and makes personal health data accessible to healthcare professionals involved in the patient's care. For instance, Mijgezondheid/Masanté, MyHealthViewer, CoZo, Vlaams Ziekenhuis Netwerk, Réseau Santé Bruxellois/Brussels Gezondheidsnetwerk and Réseau Santé Wallon.

Insisto. eHealth service that allows to treat questions regarding not directly accessible youth assistance for a minor, in particular granting an access certificate and effectively allocating an offer of support of a facility. This eHealth service is currently not available to nursing assistants.

Management of eHealth certificates. eHealth service that provides the possibility to submit an online application or renewal for a eHealth certificate. This eHealth service is currently not available to nursing assistants.

¹ European Commission. eHealth: digital health and care [Web page] (2019) [cited 22 June 2020]. Available from: https://ec.europa.eu/health/ehealth/overview_en

MediPrima. eHealth service that allows the consultation of decisions by CPAS/OCMWs concerning the financial coverage of medical assistance. This eHealth service is currently not available to nursing assistants.

MyCareNet/CIVICS. eHealth service that allows the consultation of a database with the commercialized medication in Belgium and the conditions of remuneration of the medication in Chapter IV. This eHealth service is currently not available to nursing assistants.

MyCareNet – Medical administration. eHealth service that allows the transfer of medical-administrative documents amongst medical professionals from the home care sector and the insurance institutions. This eHealth service is currently not available to nursing assistants.

Private health portal. A secured website/application, provided by a healthcare professional/health care institution (e.g. hospital, doctor's practice, nursing service) or another private partner (e.g. a company), that stores and makes personal health data accessible to healthcare professionals involved in the patient's care.

SAM v2. eHealth service that allows the consultation of a reference database regarding medication. This eHealth service is currently not available to nursing assistants.

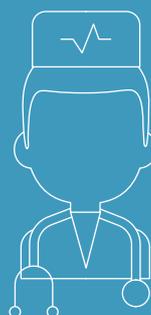
Telemonitoring. A method that allows healthcare professionals to monitor patients remotely. A patient measures a health parameter (e.g. blood pressure, blood sugar level) with a measuring instrument, sensor or another device, possibly stores these parameters digitally and possibly shares them with a healthcare professional. Furthermore, telemonitoring allows healthcare professionals to ask additional questions to the patient in a digital way.

UPPAD. eHealth service that allows the consultation of administrative information which the government has about you as a medical professional. This eHealth service is currently not available to nursing assistants.

Video calling. A form of care where the healthcare professional and the patient communicate remotely via a screen (e.g. Skype, FaceTime). The patient and the healthcare professional can see each other and talk to each other.

CHAPTER 01

SOCIO-DEMO



SOCIO-DEMO OF OUR SAMPLE

The table below provides an overview of the **socio-demographic characteristics** of the nursing assistants included in our sample. The percentages between brackets reflect the percentages in the **Belgian population**¹.

Given the **small sample size** (N=118) and the **uneven distribution between the regions**, the results in this report will only be presented on a national level and need to be **interpreted with care**.

		Belgium
REGION (N=110)	Flanders (N=96)	87,3% (60,6%)
	Wallonia (N=13)	11,8% (33,8%)
	Brussels (N=1)	0,9% (5,6%)
AGE (N=112)	< 25 years	9,1% (13,0%)
	25-34 years	30,0% (25,0%)
	35-44 years	28,2% (22%)
	45-54 years	19,1% (22,1%)
	55-64 years	12,7% (15,4%)
	65+ years	0,9% (5,1%)
LANGUAGE (N=118)	Dutch	87,3%
	French	12,7%
SEX (N=112)	Female	94,5% (91,9%)
	Male	5,5% (8,1%)
	Other	0%
WORK EXPERIENCE AS NURSING ASSISTANT (N=102)	0-4 years	24,0%
	5-9 years	29,0%
	10-14 years	15,0%
	15-19 years	7,0%
	20-24 years	12,0%
	25-29 years	2,0%
	30-34 years	6,0%
	35-39 years	3,0%
	40-44 years	2,0%

¹ Steinberg, P. (2019). Jaarstatistieken met betrekking tot de beoefenaars van gezondheidszorgberoepen in België. Cel Planning van het Aanbod van de Gezondheidszorgberoepen.

TYPE OF WORKPLACE (N=110)	
Elderly care	61,4%
Care for the disabled	1,8%
Mental healthcare	0,9%
Home care	11,4%
Hospital	19,3%
Rehabilitation care	1,8%
Multidisciplinary practice	0,9%
Other	2,7%

Compared to the Belgian population:

- Nursing assistants in **Flanders** are **overrepresented**
- **Male** nursing assistants are **slightly underrepresented**
- The **youngest** (<25 years) and **oldest** nursing assistants (65+ years) are **slightly underrepresented**, whereas the nursing assistants between **25 and 44 years old** are **slightly overrepresented**.²

² The percentages in the reference statistics (Stenberg, 2019) reflect the number of nursing assistants that are allowed to practice their profession. However, in the eHealthmonitor 2019 we only included nursing assistants who are still actively working as a nursing assistant, which might explain the big difference in the 65+ category.

CHAPTER 02

EHEALTH SERVICES



EHEALTH SERVICES

In this part of the report we will focus on how nursing assistants **manage patient files**, the **use of eHealth services**, and the **general attitude** of nursing assistants **towards the use of digital applications** in their professional life.

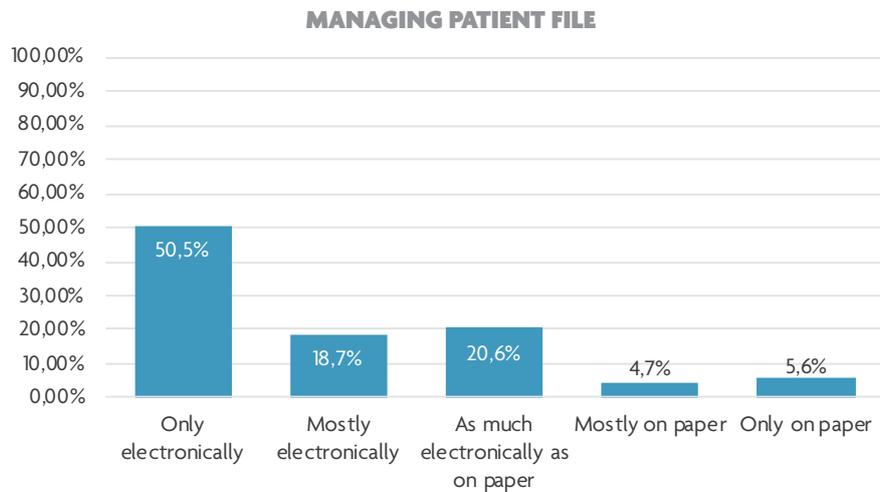
1. MANAGING THE PATIENT FILE

Nursing assistants were asked to indicate how often they used one of the listed digital devices in their daily job. A **computer** was used daily by 76,9% of nursing assistants in our sample. A **smartphone** and **tablet** were generally **less used** in patient care: 61,1% of nursing assistants never used a smartphone and 66,7% of nursing assistants never used a tablet.

	Daily	Weekly	Monthly	Yearly	Never
DIGITAL DEVICE					
Computer	76,9%	8,3%	1,9%	0,9%	12,0%
Tablet	27,8%	4,6%	0,0%	0,9%	66,7%
Smartphone	32,4%	3,7%	0,0%	2,8%	61,1%

Table 1. How often do you use the following digital applications during your job as a nursing assistant? (N=108)

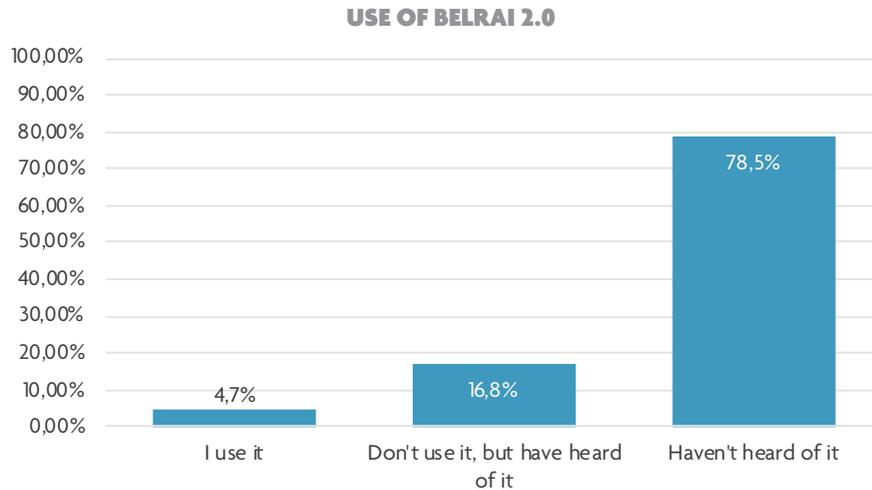
Nursing assistants were also asked how they managed the patient files. The majority of nursing assistants in our sample (69,2%) indicated that they managed the patient files **mostly or only electronically**.



Graph 1. How do you manage patient files? (N=108)

2. USE OF EHEALTH SERVICES

Nursing assistants were asked to indicate whether they used the eHealth service **BelRAI 2.0**, that is currently available to their profession. Only a small percentage of nursing assistants in our sample (4,7%) **used** BelRAI 2.0. The vast majority of nursing assistants (78,5%) had **never heard** of this eHealth service.



Graph 2. Do you use the following eHealth service? (N=107)

A. QUALITATIVE FEEDBACK ON THE USE OF BELRAI 2.0

The main reason for not using the BelRAI 2.0 was that the eHealth service **was not available/used in the workplace**.

Resp 118. "Is nog niet van toepassing in onze dienst momenteel."

Resp 6. "Het wordt nog niet gebruikt, misschien in de toekomst."

3. INTEREST IN THE USE OF EHEALTH SERVICES

As most eHealth services are currently not available to nursing assistants (except BelRAI 2.0) they were asked whether they would be **interested to use** the **eHealth services** that are **currently available to nurses**.

Nursing assistants in our sample were **most interested** in using the following eHealth services:

- Electronic Medication Record (77,8%)
- UPPAD (60,0%)
- SAM v2 (53,5%)

EHEALTH SERVICE	I would like to use it	I would not like to use it	I don't know
Manage eHealth certificates	35.6%	18.9%	45.6%
CEBAM Digital library	51.1%	14.4%	34.4%
MyCareNet / Civics	50.0%	23.3%	26.7%
e-Birth	35.6%	26.7%	26.7%
SAM v2	53.5%	21.1%	25.6%
Insisto	22.2%	38.9%	38.9%
MediPrima	44.4%	25.6%	30.0%
MyCareNet - medical administration	44.4%	17.8%	37.8%
UPPAD	60.0%	11.1%	28.9%
Electronic Medication Record	77.8%	5.6%	16.7%

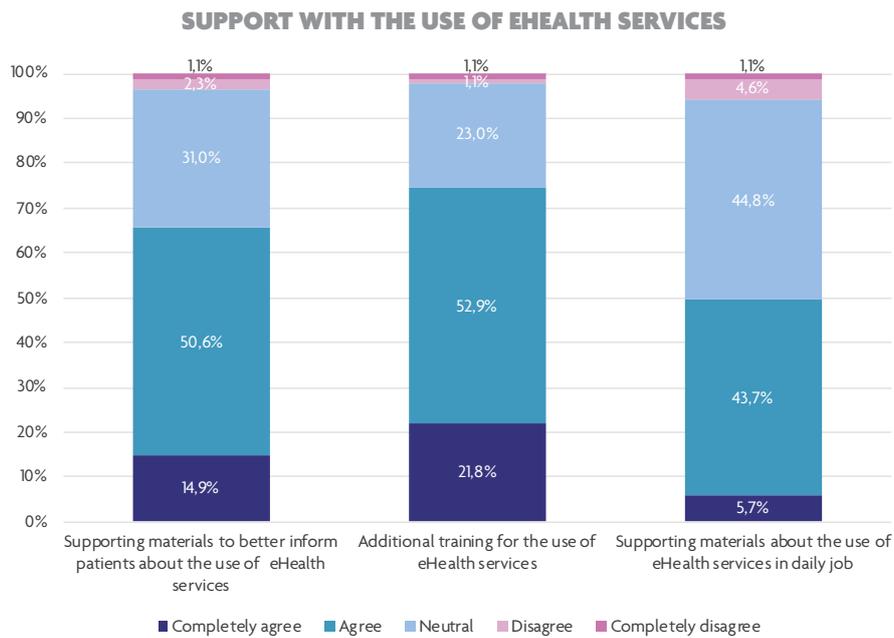
Table 2. Would you like to have access to these eHealth services that are currently only available to nurses? (N=90)

4. NEED FOR SUPPORT WITH THE USE OF EHEALTH SERVICES

The majority of nursing assistants in our sample expressed the need for additional training and supporting materials for the use of eHealth services:

- 74,4% of nursing assistants would like **additional training** regarding the use of eHealth services.
- 65,5% of nursing assistants would like supporting materials to better **inform patients** about the use of eHealth services.

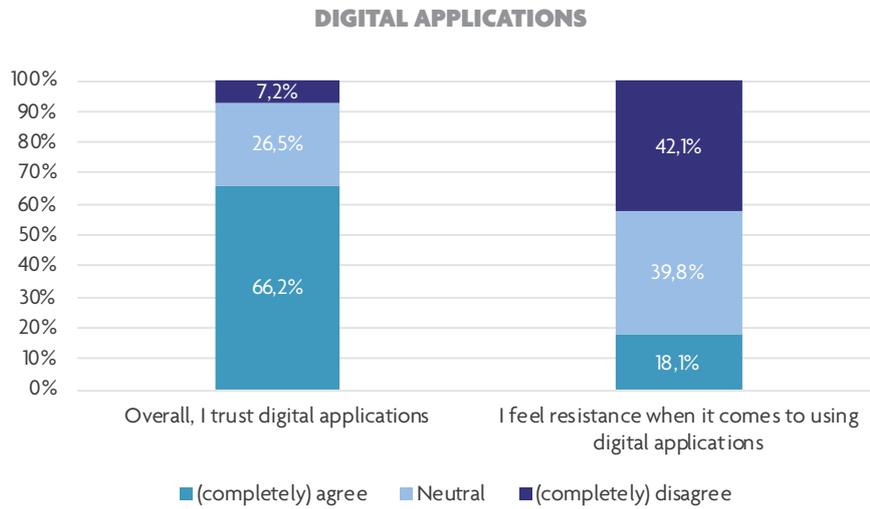
Just under half of nursing assistants (49,4%) would like supporting materials for the **use of Health services in their daily job**.



Graph 3. To what extent do you agree or disagree with following statements regarding support in using eHealth services in your professional life? (N=87)

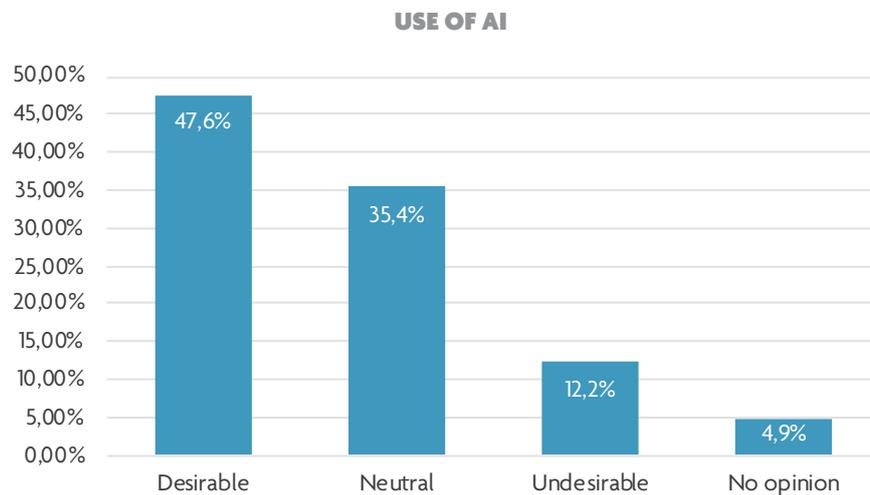
5. GENERAL ATTITUDE TOWARDS THE USE OF DIGITAL APPLICATIONS

Nursing assistants were asked for their opinion regarding the use of digital applications in their professional life. The majority of nursing assistants in our sample (66,2%) indicated they **trust** digital applications. 18,1% of nursing assistants indicated to feel a certain degree of **resistance** when it comes to using digital applications.



Graph 4. To what extent do you agree or disagree with following statements regarding your use of digital applications in your professional life? (N=83)

47,6% of nursing assistants in our sample found the use of digital tools in decision making, that use **AI** to make suggestions, **desirable**. 35,4% was **neutral** and 12,2% felt it was **undesirable**.



Graph 5. What is your opinion on using digital tools in decision making that use AI to make suggestions (e.g. selecting the most suitable measures for the prevention of pressure ulcers)? (N = 82)

6. KEY FINDINGS

MANAGING PATIENT FILES

- A **computer** was used daily by 76,9% of the nursing assistants in our sample. A smartphone and tablet were generally less used in patient care: 66,7% of nursing assistants never used a **tablet** and 61,1% never used a **smartphone**
- 69,2% of nursing assistants managed the patient files **mostly or only electronically**

USE OF EHEALTH SERVICES

78,5% of nursing assistants in our sample had **never heard** of BelRAI 2.0.

INTEREST IN THE USE OF EHEALTH SERVICES

The top 3 eHealth services that nursing assistants are **most interested** in using:

- Medication schedule (77,8%)
- UPPAD (60,0%)
- Sam v2 (53,5%)

NEED FOR SUPPORT WITH THE USE OF EHEALTH SERVICES

The majority of nursing assistants in our sample indicated the need for additional support with the use of eHealth services.

- **Additional training** regarding the use of eHealth services (74,7%)
- Supporting materials to better **inform patients** about the use of eHealth services (65,5%)

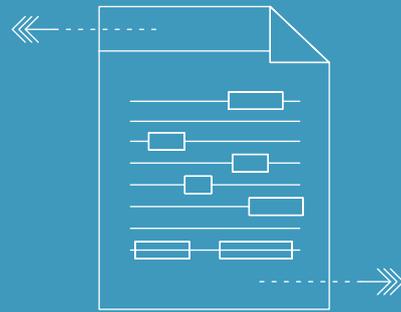
49,4% of nursing assistants indicated the need for supporting materials for the **use of eHealth services in their daily job**.

GENERAL ATTITUDE TOWARDS THE USE OF DIGITAL APPLICATIONS

- The majority of nursing assistants (66,2%) **trust** digital applications
- 18,1% of nursing assistants feel resistance when it comes to using digital applications
- 47,6% of nursing assistants found the use of digital tools in decision making, that use **AI** to make suggestions, **desirable**

CHAPTER 03

EXCHANGE OF HEALTH DATA AMONGST HEALTHCARE PROFESSIONALS

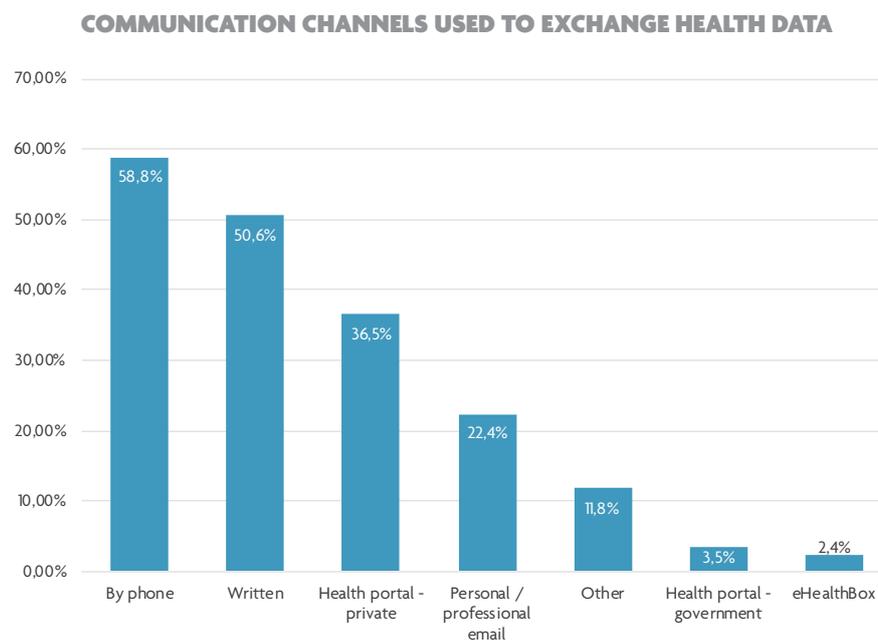


EXCHANGE OF HEALTH DATA AMONGST HEALTHCARE PROFESSIONALS

In this part of the report we will focus on the communication channels nursing assistants use to **exchange health data** with other healthcare professionals and/or healthcare institutions and their **satisfaction** with the **offer of digital communication channels** that are available for their profession.

1. COMMUNICATION CHANNELS USED TO EXCHANGE HEALTH DATA

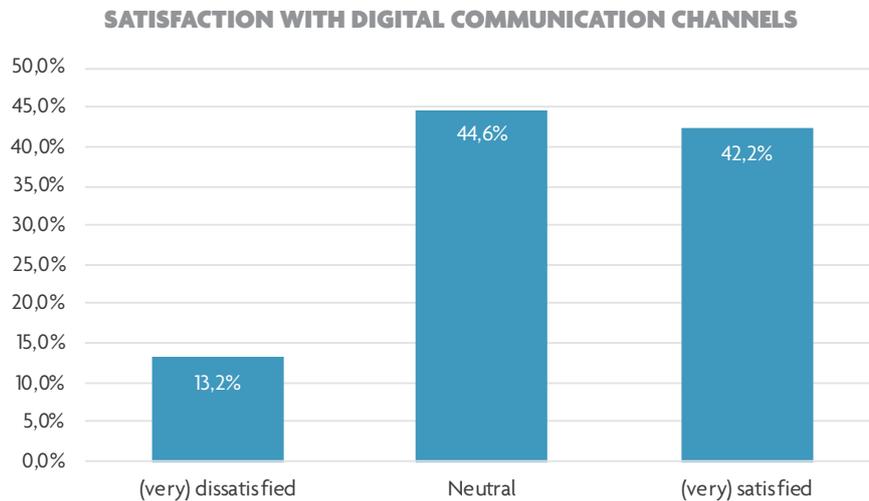
In general, nursing assistants in our sample mostly exchanged health data with other healthcare professionals by **phone** (58,8%), **written communication (paper)** (50,6%) and through a **private health portal** (36,5%). The **eHealthbox** was the least used method (2,4%).



Graph 6. How do you exchange health data with other healthcare professionals/health care institutions? (Multiple choices possible) (N=85)

2. SATISFACTION WITH DIGITAL COMMUNICATION CHANNELS

Just over 40% of nursing assistants in our sample (42,2%) are **(very) satisfied** with the offer of digital communication channels that are available for their profession.



Graph 7. How satisfied are you with the offer of all digital communication channels that are currently available for your profession? (N=83)

3. KEY FINDINGS

COMMUNICATION CHANNELS USED TO EXCHANGE HEALTH DATA

The **three most used mediums** to exchange health data with other health care professionals are:

- Phone (58,8%)
- Written communication (paper) (50,6%)
- Through a private health portal (36,5%)

The **eHealthbox** is the least used method (2,4%).

SATISFACTION WITH DIGITAL COMMUNICATION CHANNELS

42,2% of nursing assistants in our sample are (very) satisfied with the offer of digital communication channels that are available for their profession.

CHAPTER 04

ONLINE COMMUNICATION WITH PATIENTS

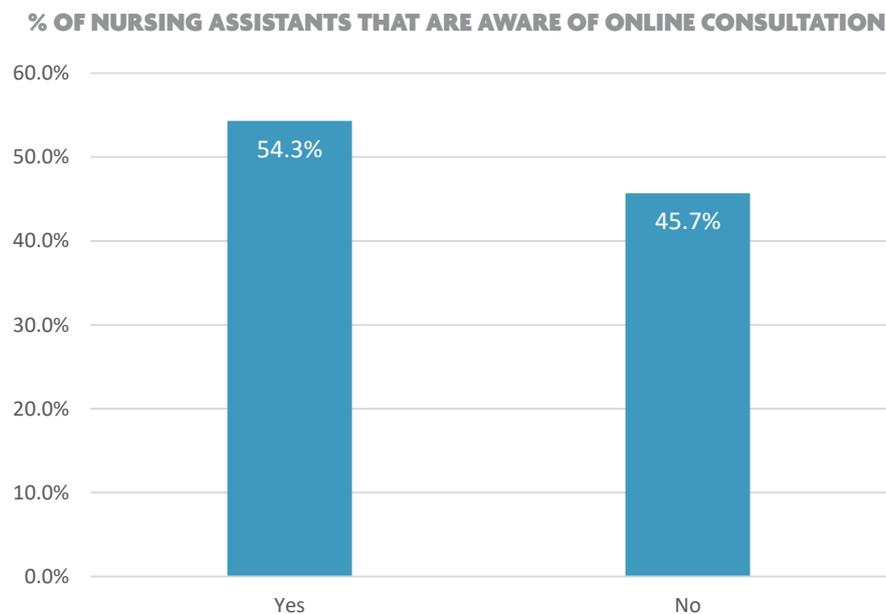


ONLINE COMMUNICATION WITH PATIENTS

In this part of the report we will focus on different forms of online communication between nursing assistants and patients. First, we will discuss the results regarding **online consultation** and the use of **health portals**. Secondly, we will provide an insight on the attitude of nursing assistants towards **online communication** with patients (e.g. making appointments online, asking questions online).

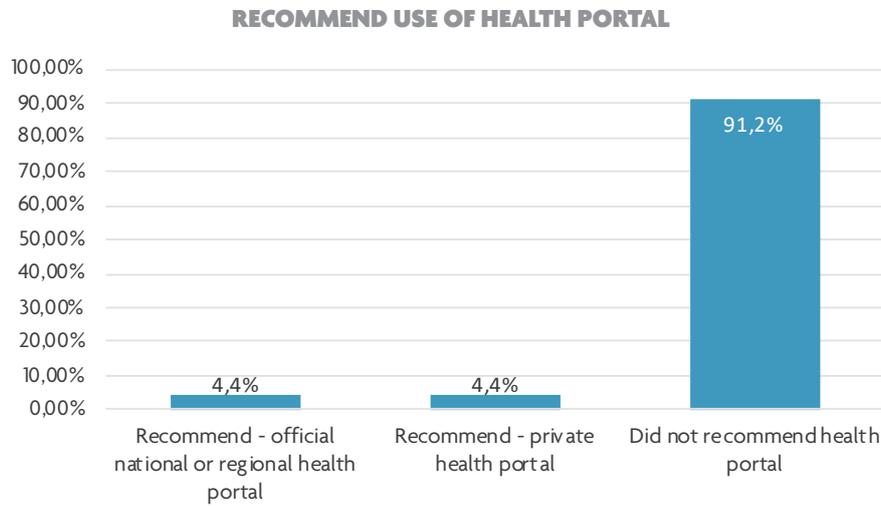
1. ONLINE CONSULTATION

Patients can use a health portal to consult the personal health data that is available for online consultation. 54,3% of nursing assistants in our sample were **aware** that patients can view their personal health data via a health portal.



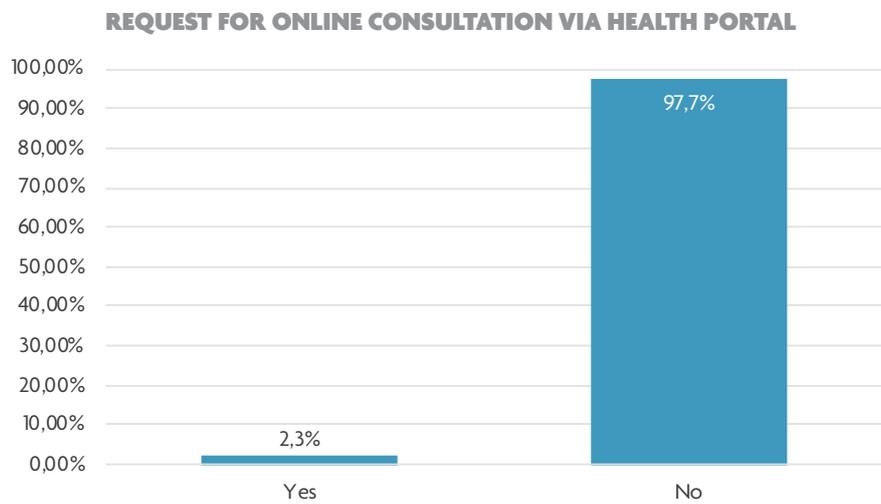
Graph 8. Did you know, before answering this questionnaire, that patients can view their personal health data through a health portal? (N=81)

Less than 10% of nursing assistants (8,8%) **recommended** one or more of their patients to use a health portal to consult their personal health data: 4,4% recommended the use of an **official national or regional health portal** and 4,4% recommended the use of a **private health portal**. The vast majority of nursing assistants (91,2%) **did not recommend** the use of a health portal for online consultation.



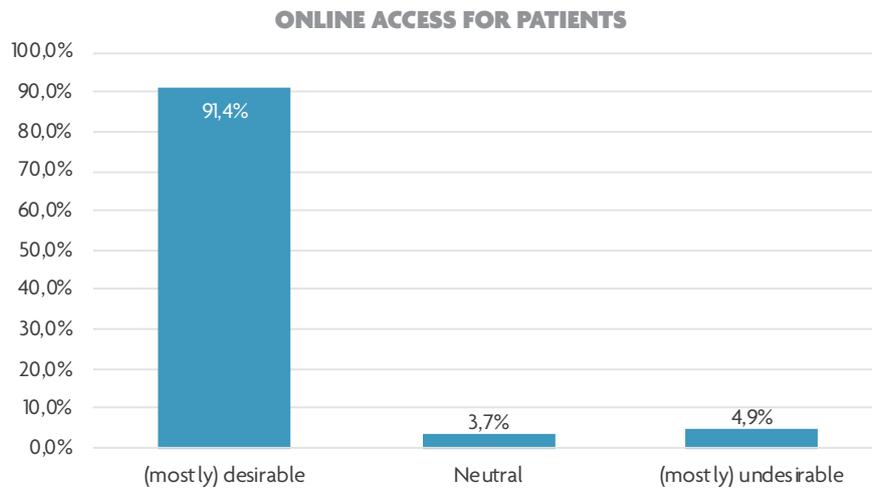
Graph 9. In the past year (October 2018 - September 2019), did you recommend to one or more of your patients to use a health portal to consult their personal health data online? (Multiple choices possible) (N=44)

A very small percentage of nursing assistants (2,4%) had one or more patients **asking** them to consult their personal health data through a health portal.



Graph 10. In the past year (October 2018 - September 2019), had one or more of your patients asked you to consult their personal health data through a health portal? (N=44)

The vast majority of nursing assistants in our sample (91,4%) find it **(mostly) desirable** that patients have online access to their personal health data through a health portal. 4,9% find it (mostly) undesirable and 3,7% is neutral.



Graph II. What is your opinion on patients consulting their personal health data, kept by a health care professional, online through a health portal? (N=81)

2. RESPONSIBILITIES HEALTH PORTAL AWARENESS

Nursing assistants were asked to indicate who they found mainly responsible for a number of tasks regarding the use and awareness of health portals.

Our results showed that nursing assistants believe the **public health insurance company** is the main responsible party to:

- **Inform** patients about the **existence** of a health portal with their personal health data (64,1%), nonetheless the government was a close second (62,8%)
- **Explain** patients how to **consult** their personal health data through this health portal (64,1%)
- **Ensure** that patients **use** this health portal to consult their personal health data (55,1%)

The government was indicated as the main responsible party to ensure that patients **understand the health-related information** on this health portal (62,2%).

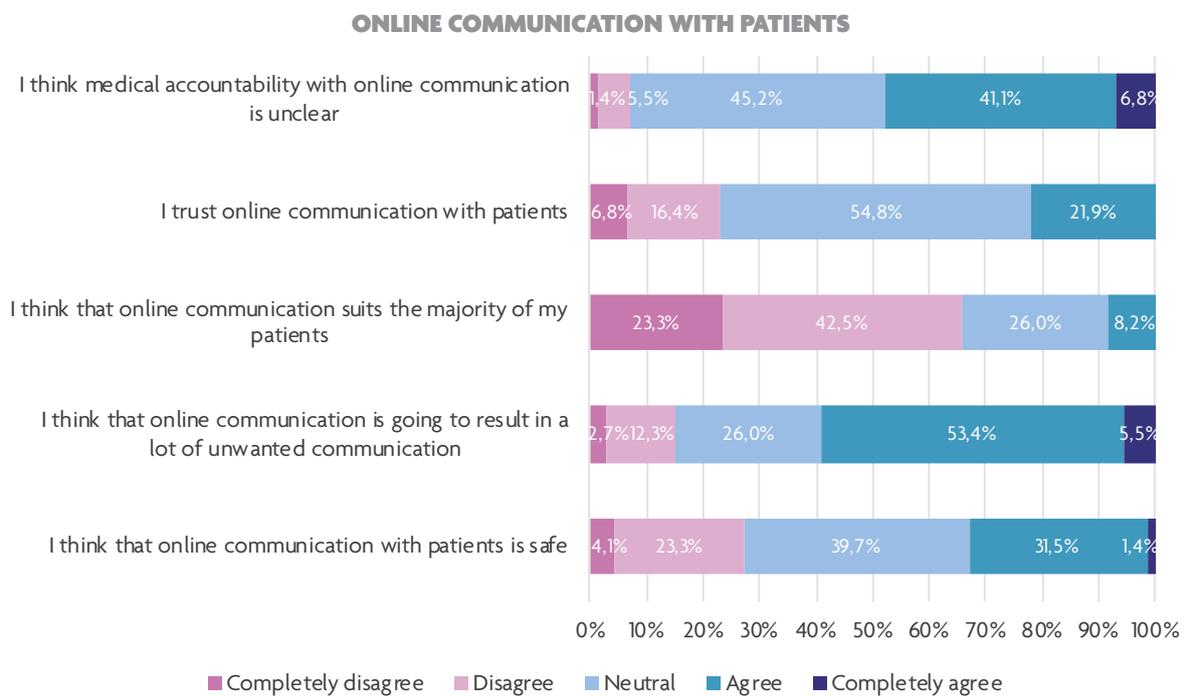
	Me	The patient	The government	The public health insurance company	Other
TASK					
Informing patients about the existence of a health portal with their personal health data	30.8%	3.8%	62.8%	64.1%	19.2%
Explaining to patients how they can consult their personal health data on this health portal	42.3%	2.6%	47.4%	64.1%	20.5%
Ensuring that patients understand the health-related information on this health portal	41.0%	7.7%	62.8%	47.4%	25.6%
Ensuring that patients use this health portal to consult their personal health data	32.1%	21.8%	42.3%	55.1%	21.8%

Table 3. According to you, who is mainly responsible for the tasks below? (Multiple choices possible) (N=78)

3. ATTITUDE TOWARDS ONLINE COMMUNICATION WITH PATIENTS

Nursing assistants were asked their opinion on a number of statements regarding online communication with patients. Our results showed some **potential concerns** regarding online communication with patients:

- The majority of nursing assistants in our sample (65,8%) think that online communication **does not suit the majority of their patients**
- 58,9% of nursing assistants believe that online communication is going to result in **a lot of unwanted communication**
- 47,9% of nursing assistants believe that **medical accountability** with online communication is unclear
- Just under one in three nursing assistants (32,9%) think that online communication with patients is **safe**
- Only 21,0% of nursing assistants **trust** online communication with patients



Graph 12. To what extent do you agree or disagree with following statements regarding online communication with patients (e.g. asking questions online)? (N=73)

4. KEY FINDINGS

ONLINE CONSULTATION

54,3% of nursing assistants in our sample were **aware** that patients can view their personal health data via a health portal.

- A small percentage of nursing assistants (8,8%) **recommended** one or more of their patients to use a health portal to consult their personal health data
- A very small percentage of nursing assistants (2,4%) had one or more patients **asking** them to consult their personal health data through a health portal
- 91,4% of nursing assistants find it **(mostly) desirable** that patients have access to their personal health data online via a health portal

RESPONSIBILITIES EHEALTH PORTAL AWARENESS

The **public health insurance company** was most often indicated as the main responsible party to:

- **Inform** patients of the **existence** of a health portal with their personal health data (64.1%). The government is a close second (62,8%)
- **Explaining** to patients how to **consult** their personal health data through this health portal (64.1%)
- **Ensuring** that patients **use** this health portal to consult their personal health data (55.1%)

The **government** was indicated as the main responsible party to ensure that patients **understand the health-related information** on this health portal (62.2%).

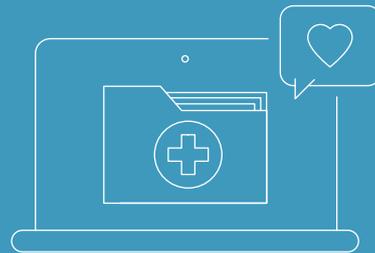
ATTITUDE TOWARDS ONLINE COMMUNICATION WITH PATIENTS

Potential concerns regarding online communication with patients:

- The majority of nursing assistants in our sample (65,8%) think that **online communication does not fit the majority of their patients**
- 58,9% of nursing assistants believe that online communication is going to result in **a lot of unwanted communication**
- 47,9% of nursing assistants believe that **medical accountability** with online communication is unclear
- Just under one in three nursing assistants (32,9%) think that online communication with patients is **safe**
- Only 21,0% of nursing assistants **trust** online consultation with patients

CHAPTER 05

SELF MANAGEMENT AND ONLINE TREATMENT

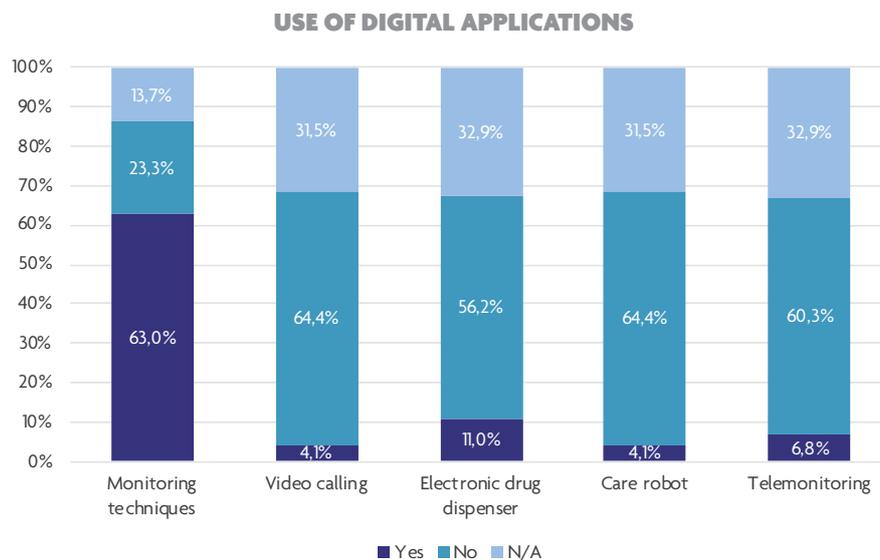


SELF MANAGEMENT AND ONLINE TREATMENT

In this part of the report we will focus on the **use of digital applications in patient care**.

1. USE OF DIGITAL APPLICATIONS IN PATIENT CARE

Nursing assistants were asked whether they used one of the listed digital applications in patient care. Our results showed that **monitoring techniques** (e.g. movement sensors, a personal alarm, an interactive buzzer system, electronic bed pads, video and/or audio surveillance) were used by the majority of nursing assistants (63%). The use of an **electronic drug dispenser** (11,0%), **telemonitoring** (6,8%), **video calling** (4,1%) and a **care robot** (4,1%) was remarkably lower.



Graph 13. In the past year (October 2018 - September 2019), did you use any of the following digital applications during your job as a nursing assistant? (N=73)

2. KEY FINDINGS

USE OF DIGITAL APPLICATIONS IN PATIENT CARE

- 63% of nursing assistants in our sample used **monitoring techniques** (e.g. movement sensors, a personal alarm, an interactive buzzer system, electronic bed pads, video and/or audio surveillance)
- 11,0% used an **electronic drug dispenser**
- 6,8% used **telemonitoring**
- 4,1% used **video calling**
- 4,1% used a **care robot**

