Objective: Remote consultations are quickly emerging to give more access to real-time, high-quality, efficient, and cost-effective healthcare in the current CO-VID-19 pandemic.

Objective is to investigate the changing experiences of remote consulting for patients in Latvia and plan effective health policies, to provide a full analysis of the policy for telemedicine applications and solutions based on the current conditions.

Design and method: Materials and approaches include an examination of normative documents as well as a variety of informational sources. The information offered is mostly based on national strategy papers, official reports, and scientefic publications on Tele-medicine implementation.

Results: Telemedicine's range will continue to expand, connecting patients and providers internationally as providers look to expand globally. This will not only help improve the long-term policies about health but may also provide patients with rare diseases alternative avenues to seek highly specialized care. Telemedicine strategy must react faster than ever during the COVID-19 epidemic. Latvia has reacted to Covid pandemics and have noticable implemented new possibilities to provide new approaches provided by telemedicine: providing remote consultations to patients in different sectors, using E-referrals that were implemented but not sufficiently used before, providing more possibilities to provide remote services also for consiliums, physician-physiscan online consultations. New ICT tools were used for patient remote monitoring. The normative regulation, stategical decisions and changes in long-term policy documents haven't been changed, so there are limitations to provide the telemedice expansion or stable use after the emengency situation ends. Health policies about telemedicine have another key role with to pursuing that.

Conclusions: Telemedicine is fast expanding, demand for this service is rising. Although not a replacement for face-to-face consultations, this study illustrates that remote consulting can be an acceptable adjunct to traditional face-to-face consultations. More research is required to identify overall safety and applicability. Digital Health Strategy in Latvia is still on developing stage. Changes or legislation to clarify Telemedicine are still in the process. It is important to provide a good environment for Telemedicine to expand, setting strategies and visions on how those new approaches will be regulating normatively and administratively.

LATVIA'S DOCTORS EXPERIENCE ON PROVIDING REMOTE CONSULTATIONS DURING COVID-19 PANDEMICS

Aleksandra Jeniceka^{1,2}, Dzintra Homka³, Ieva Bikava¹, Sevinç Elif Sen^{1,2}, Emma Sokolova^{1,2,4,5}. ¹Riga Stradins University, Riga, LATVIA, ²RISEBA, Riga,

LATVIA, ³VCA, Riga, LATVIA, ⁴University of Latvia, Riga, LATVIA, ⁵Pauls Stradins Clinical University Hospital, Riga, LATVIA

Objective: Major challenge for health care service became a situation of a pandemic caused by COVID-19 infection, when doctors continued to provide care switching to remote consultations when possible. This provided better accessibility to receive consultation form doctor, and those consultations where sometimes the only way to be consulted for the patient.

Aims of the study: To explore and analyze Latvia's doctors experience on providing remote consultations during COVID-19 pandemics.

Objective: 1) To detect the volume and type of work physicians are able to manage remotely. 2) To find out what technical, GDPR-associated and other difficulties face doctors during the process. 3) To define the general attractiveness of remote consulting.

Design and method: Two groups of doctors filled in the questionnaires in year 2021.

Results: In one group, which consisted of 200 general practitioners, most respondents consider they could provide remote medical consultation about healthy lifestyle - 89,0% (n = 178); regarding check-ups, screening results - 86,5% (n = 173); to manage recommendations of other healthcare specialists - 66% (n = 132). Difficulties faced: 54,0% (n = 108) were not satisfied with payment, 22,5% (n = 45) admitted lack of specific skills, 45,5% (n = 91) found it problematic to make e-referrals. 61,0% (n = 122) like the idea of implementing services in practice on a regular basis. Another group, which consisted of 62 doctors of different specialties working in Clinical University Hospital. All doctors (62) were consulting by phone, 18 doctors only by phone, however 44 were consulting via e-mails, social network on video-conference platforms as well.

Research revealed that the process of patient identification, search of patient's data and sensitive data transfer is complicated, time consuming and requires different approaches to manage.

Conclusions: Latvian doctors have experience in remote consulting. When consulting remotely Latvian doctors were facing technical, legal, social and other difficulties. Some Latvian doctors are interested in introducing remote consulting services in their practice, if the restrictive moments for their provision would be eliminated. As well as there is need for amendments in normative regulation for providing remote consultations, and challenges relates to payment system implementations especially for state paid services.