

RSTNCOVID Hand Surgeon Survey

Thank you for taking the time to complete this survey.

The COVID-19 pandemic has changed the way we care for patients and deliver services. The Reconstructive Surgery Trials Network, is conducting a survey to help learn from these unprecedented times.

The aim of this survey is to describe how services have been modified during COVID-19 and consider which changes may improve patient care in the future. For the purposes of this survey, the Before COVID period has been defined as prior to 23rd March and the COVID period as 23rd March to 1st June.

The survey was developed by a group of hand surgeons and hand therapists. It was piloted at four sites and amended in response to feedback. See the website for further details:
<http://reconstructivesurgerytrials.net/covid-19/>.

We ask that one consultant from each unit completes this survey. It might take up to 30 minutes to complete. A copy of the survey instrument is available on the website. It is worth reviewing this first to ensure you will have the answers. If you wish to be recognised as a PubMed cited collaborator, please add your name and email address.

Data protection statement

We will store your name and email address for the purposes of contacting you about the #RSTNCOVID survey and service evaluation. Your data will not be shared or used for other purposes. At the end of the study your details will be erased. You can withdraw at any point by emailing rstncovid@gmail.com. Full documentation will be on RSTNCOVID webpage.

Your information

Your full name

(First name, initials and surname as would appear in a journal article)

ORCID ID (if available)

Name of hospital

Name of NHS Trust

I would like to be recognised as a collaborator

Yes No

I am happy to be contacted to conduct an interview (no obligation)

Yes No

Email address

General Information

Background of hand surgeons at your hospital

- Plastic surgeons
 Orthopaedic surgeons
 Plastic and orthopaedic surgeons

During the COVID period plastic surgeons and orthopaedic surgeons worked more closely together.

- Strongly disagree
 Disagree
 Neutral
 Agree
 Strongly agree

During the COVID period did the plastic or orthopaedic service extend the scope of the trauma service to cover minor injuries?

- Yes, took over running of minor injuries
 Yes, worked with ED to cover minor injuries
 No, continued separate trauma service

Availability of hand surgery services in your unit

	Before COVID	During COVID	N/A
Adult elective	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult trauma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paediatric elective	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paediatric trauma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other hand surgery services routinely available

Availability of imaging in outpatient clinic (elective or trauma)

	Before COVID	During COVID	Never available
Mini C arm (permanent)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mini C arm (on demand)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ultrasound machine (permanent)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ultrasound machine (on demand)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Elective Hand Service

Who triages NEW elective hand referrals in your department?

	Before COVID	During COVID	N/A
No triage of referrals (directly booked)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consultant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registrar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapy services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administrator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other staff member triaging new elective hand referrals _____

Type of elective hand clinics available (can be delivered in any format)

	Before COVID	During COVID	N/A
Consultant hand clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registrar or equivalent clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advanced practitioner led hand clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hand therapy led hand clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injection clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One stop carpal tunnel clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Format of elective hand surgery appointments BEFORE COVID

	Never	Rarely	Sometimes	Very often	Always
Face to face	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telephone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Video	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other format of elective hand surgery appointment _____

Format of elective hand surgery appointments DURING COVID

	Never	Rarely	Sometimes	Very often	Always
Face to face	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telephone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Video	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other

Other format of elective hand surgery appointment _____

Setting for elective hand surgery operating BEFORE COVID

	Always	Very often	Sometimes	Rarely	Never
Main operating theatres (standard ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main operating theatres (laminar flow)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Minor operating theatre (AC or natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinic room (natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Setting for elective hand surgery operating DURING COVID

	Always	Very often	Sometimes	Rarely	Never
Main operating theatres (standard ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main operating theatres (laminar flow)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Minor operating theatre (AC or natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinic room (natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Trauma hand service

Who triaged / accepted referrals to the trauma service BEFORE COVID?

	Never	Rarely	Sometimes	Very often	Always
Consultant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registrar or equivalent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SHO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma co-ordinator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Advanced practitioner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nurse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other staff member triaging/ accepting referrals

Who triaged / accepted referrals to the trauma service DURING COVID?

	Never	Rarely	Sometimes	Very often	Always
Consultant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registrar or equivalent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SHO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Advanced practitioner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma co-ordinator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other staff member triaging/ accepting referrals

Format for triaging new referrals to the trauma service

	Before COVID	During COVID	N/A
Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Video	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No triaging (direct booking into trauma clinic by referrers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Type of trauma hand clinics available (can be delivered in any format)

	Before COVID	During COVID	N/A
Consultant led trauma hand clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registrar or equivalent led	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHO or equivalent led	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advanced nurse practitioner led	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Hand therapy led

Format of trauma hand surgery appointments BEFORE COVID

	Never	Rarely	Sometimes	Very Often	Always
Face to face	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telephone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Video	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other format of trauma hand surgery appointment

Format of trauma hand surgery appointments DURING COVID

	Never	Rarely	Sometimes	Very Often	Always
Face to face	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telephone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Video	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other format of trauma hand surgery appointment

Setting for trauma hand surgery operating BEFORE COVID

	Always	Very often	Sometimes	Rarely	Never
Main operating theatres (standard ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main operating theatres (laminar flow)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Minor operating theatre (AC or natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinic room (natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Setting for trauma hand surgery operating DURING COVID

	Always	Very often	Sometimes	Rarely	Never
Main operating theatres (standard ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main operating theatres (laminar flow)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Minor operating theatre (AC or natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinic room (natural ventilation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

For the following injuries in adults, what was the predominant anaesthetic technique used BEFORE COVID?

	Local anaesthetic	Wide awake local anaesthetic no tourniquet (WALANT)	Sedation	Regional	General +/- RA or LA	N/A
Nail bed repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Digital nerve repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skiers thumb UCL repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extensor tendon repair (Zn I-V)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extensor tendon repair (Zn V-VIII)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor tendon repair (zn I)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor tendon repair (zn II)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor tendon repair (zn III-V)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor sheath washout	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Terminalisation of digit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Phalangeal fracture K wire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Phalangeal fracture ORIF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Metacarpal fracture K wire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Metacarpal fracture ORIF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Scaphoid fracture percutaneous screw	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Distal radius fracture K wire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Distal radius fracture ORIF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

For the following injuries in adults, what was the predominant anaesthetic technique used DURING COVID?

	Local anaesthetic	Wide awake local anaesthetic no tourniquet (WALANT)	Sedation	Regional	General +/- RA or LA	N/A
Nail bed repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Digital nerve repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skiers thumb UCL repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extensor tendon repair (Zn I-V)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extensor tendon repair (Zn V-VIII)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor tendon repair (zn I)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor tendon repair (zn II)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor tendon repair (zn III-V)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexor sheath washout	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Terminalisation of digit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Terminalisation of digit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Phalangeal fracture K wire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Phalangeal fracture ORIF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Metacarpal fracture K wire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Metacarpal fracture ORIF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Scaphoid fracture percutaneous screw	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Distal radius fracture K wire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Information provided for hand trauma patients in your department

	Before COVID	During COVID	N/A
Trust produced paper leaflets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trust produced information leaflets via email	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trust produced electronic information (via internet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generic internet information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information via text message	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
App	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other information provided to patients

App provided for patient information

Before COVID, what was your department policy to prescribe prophylactic antibiotics for simple hand lacerations (including open flexor tendon injuries)?

During COVID, did your department policy to prescribe prophylactic antibiotics for simple hand lacerations (including open flexor tendon injuries) change?

- Increased use
 Stayed the same
 Decreased use

Did your department follow the revised COVID BSSH guidance for hand trauma?

- Yes
 Sometimes
 No

Which guidelines did you NOT follow?

Information technology in your department

	Before COVID	During COVID	N/A
Virtual access to hospital desktop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Video consultation software (e.g. AccuRx)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Video conferencing software (e.g. Microsoft Teams)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Image exchange software (e.g. Forward App)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Education and Training

Has the department maintained it's educational programme during COVID?

- Yes - educational programme same as planned pre-COVID
- Yes - with changes to format (e.g. virtual)
- Yes - with changes to content
- Yes - with changes to format and content
- Partly - reduced programme
- Partly - reduced programme with changes to format (e.g. virtual)
- Partly - reduced programme with changes to content
- Partly - with changes to format and content
- No - educational programme not continued during COVID

Have you used any of the following resources?

- Live webinar based training
- Recordings of webinar based training
- Online e-learning
- None used

Have any organisations or groups offered particularly useful webinars or training during COVID? (please list below)

Service provision during COVID

How did the following affect service provision during COVID?

	Never	Rarely	Sometimes	Very Often	Always
Guidelines to reduce patient contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospital resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff sickness (including isolation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff redeployment to other areas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of PPE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other factors affecting ability to deliver a service

Provision of PPE

Has your department experienced shortages of PPE?
[click those that apply]

- No shortage
- Masks
- Visors
- Gloves
- Aprons or gowns
- Other

Other shortages of PPE

Does the department CURRENTLY have sufficient PPE to
work safely?

- Yes, not limiting service provision
- Yes, with reduced service provision
- No

Post operative patient care

Predominant choice of suture for most surgeons

	Absorbable	Non-absorbable	Antimicrobial	N/A
Suture choice for elective hand surgery - BEFORE COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suture choice for elective hand surgery - DURING COVID (choose n/a if none performed during COVID)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suture choice for trauma hand surgery - BEFORE COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suture choice for trauma hand surgery - DURING COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Predominant location for suture removal (elective or trauma procedures)

	Before COVID	During COVID	N/A
Patient - self removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other location for suture removal

Predominant location for wound reviews (elective or trauma procedures)

	Before COVID	During COVID	N/A
Patient - self review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Virtual review (video/ email)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other location for wound check

The final word

What aspects of change have been a success?

What aspects of change have not worked so well?

What will be the biggest change post COVID?
