



digital first

Connected Primary Care

Dealing with increasing demand
for online consultations

KEY THINGS TO CONSIDER

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Foreword

Since the onset of the Covid-19 pandemic, there has been acceleration along the path to remote working and total triage. The effect on individual practices has depended on which point of the journey they were at the time, with some yet to promote online consultation and others more experienced in its use. Even so the rapid uptake of online consultation has caused upheaval for many of us, regardless of our stage in its implementation.

On the other hand, online consultation is a patient friendly product which has the potential to improve access to care for those unable to attend the surgery, without inconvenience to their job or childcare. As one of these patients, I find it difficult to find spare time during the day to complete an eConsult, therefore it is really useful to be able to complete an enquiry during the evening or at the weekend.

As a GP, I value the information contained in eConsults as this that helps my staff to determine the most effective response, giving us the opportunity to confer and maximise use of the skills of the wider clinical team. Although the workload can be high at times (and we have had to shuffle staff around in order to manage) we find this approach more effective than simply 'manning the phones'.

This document has been developed in partnership with Redmoor Health and is part of the approach we are taking to support practices, and encourage tips and ideas, then to be shared, so that we can make online consultation work better for us and our patients. Online consultation results in a high level of satisfaction among our patients and is therefore here to stay. Our aim is to adapt to its demands and ensure that it works in a way that benefits our team, even with 24 hour access while promoting ways to support self-care for our patients.

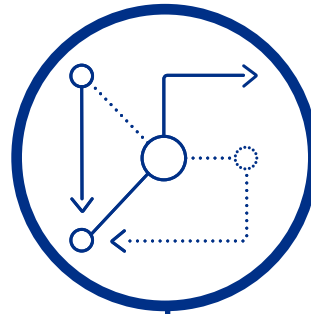
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Introduction



Stages of practice
planning for readiness



Online Consultation
Planning and Deployment



GP Online Services



Workforce Planning and
Staff Training



Preparing your Patients

Introduction

Care provision in GP practices has dramatically changed due to COVID-19. Online consultation has been rapidly introduced to protect patients and staff from the risks of infection. If you've been heavily promoting the use of online consultations during Total Triage, you may now be finding the demand challenging.

Why Online Consultations?

- Ensures that GP/Nurse appointments are used appropriately
- Based on clinical needs and signposts to appropriate alternatives
- Offers us real opportunities to ensure the patient is dealt with by the right person at the appropriate time based on their clinical needs
- Offers patients alternatives that they can use for self-care and management
- Improved access to the wider practice team
- Encourages self-care & increases digital health literacy due to an increased awareness of alternatives

As a practice your aim is to enable your patients to submit health and admin enquiries when convenient but without urgency, so that the right person can respond in a timeframe based on clinical need, not just patient demand. An online consultation system will support your digital offer.

Used well and as part of a range of online services, an online consultation system is a tool to help practices use all the skills at our disposal rather than just the GPs including for example mental health teams, clinical pharmacists, orthopaedic practitioners etc.

At the same time, you are trying to achieve a service which promotes self-management, through appropriate education and signposting but also provide timely support; all whilst improving access for patients.



Introduction

Each practice may be in a different place on their online consultation journey:

1. Practices who have embedded online consultation and it is working well for them and their patients
2. Practices who are now experiencing an increased demand and wish to refine their process and support patients with advice on usage
3. Practices who have only started to use online consultations and have low levels of utilisation at this point

In practices where online consultation is embedded and working well, online consultation has been promoted as one part of the full online service offer. This requires explaining to patients and staff, so that staff modify language to avoid slipping back into traditional ways of working (“We will **be in contact with you**” rather than “The doctor will call you”) and patients know which choice of online service to make and when.

Triage and online consultation can be extremely helpful in the prioritising of those with greatest clinical need, whilst managing less urgent requests over a longer timeframe. Remember - the commitment is to respond within the agreed timeline, **not necessarily** to resolve every enquiry by then.

Benefits:

Online consultations can:

- Reduce risk of cross infection to staff and patients
- Provide clinical staff with a higher level of control of the workload
- Provide a mini ‘history’; to enable other members of the team to deal with enquiries
- Online consultations mean that patients can be managed remotely but, in some cases, e.g. physical exam or for a child, they may be called in to practice for a face to face consultation. Initial data pre-covid suggested up to 40% of online consultations could be closed remotely.
- Patients can submit an enquiry in their own time through a structured online consultation form via the practice website, or with support from administrative staff



Stages of practice planning for readiness

Have a look at our readiness checklist [here](#).

No matter where you are on your journey with online consultations, there are four main areas of focus:



**Online
Consultations
Planning and
Deployment**



**GP Online
Services**



**Workforce
Planning and
Staff Training**



**Preparing
your
Patients**

Online Consultations Planning and Deployment

Your planning can be separated into:

- **Dealing with appropriate clinical requests**
- **Dealing with appropriate admin requests**
- **Clinical requests that could be resolved via self help**

Dealing with appropriate clinical requests:

PCN focus

- Discuss and agree within your PCN your approach so that all patients in a neighbourhood receive a consistent service offer. This avoids 'post code lottery' service provision
- Have a robust plan and protocol for triaging clinical online consultation and allocating named individuals
- If you haven't got enough clinician time, could you work with other practices in your PCN to allocate resources more effectively?
- Understand the relationship between NHS111, GP online services and online consultation
- Keep the same clinical forms/templates enabled, as patients with new symptoms can fill in at their leisure and think about the answers rather than being rushed during a telephone consult
- Signpost to specific clinical templates using SMS, website or social media. Especially helpful for patients with mental health problems; anxiety, stress, depression.

Practice focus

- Have a clear rota of people, rather than using all your resource. Perhaps share your GP rota on your website so that patients know when clinicians are working
- Spread the work between the clinical team, considering not just workload but continuity of care for patients
- Have clear plans for both 'on the day services' and 'requests for less urgent help' (i.e. help needed within the next week)
- It is useful to have a mechanism in place to 'flag' patients, so the practice staff know who should by-pass the usual process. This could be a patient with a specific known need e.g. cancer and this may be over the phone, in person or online
- Identify the digital processing of key clinical problems e.g. for symptoms of a UTI, clinician responds with prescription, arrange test if needed (communicating via SMS), links to patient information leaflet and using EPS to prescribe – all online contact
- Some online consultation systems are very effective at identifying and signposting patients to 111/999 therefore can be used for urgent requests. The benefit to the practice is having comprehensive information for their triage. If you choose to use online consultation for 'On the Day' services, make sure the online consultation system is connected to NHS111/999 services
- If you've been using online consultation for a while, know (audit) the volume(s) of your incoming online consultations (clinical vs admin). This will allow you to redirect to other GP Online services if easier i.e. move medication requests to GP online services
- Ensure the appointment book has clear slot types for online consultation enquiries for clinicians and ask admin to note if it's a new problem or a follow up. Signal to clinicians as much information as you can about the online consultation in the appointment system
- Consider using a 'hybrid' triage model rather than total (Digital) 1 triage – Many patients choose to ring if they are concerned that the problem is more urgent than an online consultation would be appropriate for (or if they are physically unable to use it). Educate your patients about when to use online consultation and when to telephone. If the patient would benefit from continuity with the same clinician, ensure that patients know to state this on their online consultation
- Online consultation can provide clinicians with a better idea of the patient's problem than working merely from a 'comment' in the appointment book. If the patient is unable to use the system, then ideally admin should help the patient and use a 'light' version of the online consultation template to gather the similar levels of information

¹ NB: The main difference between Total Digital Triage and Total Triage is Total Digital Triage uses an online consultation solution (either the patient or their carer uses the system or the practice admin staff take the patient through it over the phone or in person) to capture all incoming requests digitally. Total Triage is every patient is triaged before being offered an appointment but not necessarily using online consultation or digital. Both may result in consultation taking place

Online Consultations Planning and Deployment

Dealing with appropriate admin requests:

Online consultation is also available via the NHS App if your practice uses eConsult, with more suppliers to follow. The NHS App is a front door to services such as online consultation, GP Online services etc. Some online consultation may be better managed through other channels. Remember, before online consultation was introduced many practices successfully processed medication requests online via workflow. Can you revert these back to GP online services?

The initial response might be sending an SMS acknowledging receipt of the online consultation enquiry, but ideally this should explain next steps.

There are common principles for all e.g., getting the messaging right from front line staff. So be specific about the alternate mode of contact if you can.

For example:

"expect a text from us before ..."

"we have looked at your online enquiry and booked you a telephone call with Dr xx on DD/Morning/Afternoon next week"

*"Dr X will be in contact" rather than
"Dr X will call you"*

"Your request has been sent to the Nurse for action, you will be contacted within a few days by"

- Depending on your online consultation supplier, ensure that patients understand to expect a response usually within two working days, even if you are advising of contact later in the week (eConsult expectation is by 18:30hr the following working day or same day with a phone call for paediatric cases) **2**
- Can your Reception/Admin use the SMS system to request photos if appropriate prior to the consult? Especially helpful for clinicians to see alongside the online consultation enquiry. NOTE: Think carefully around privacy and safe use of requesting images and follow [this link](#) MDU advice about receiving and storing patient images. You will need to register for an NHS Futures account to view 'Key principles for intimate clinical assessments undertaken remotely in response to COVID-19 V1 - Jul 20' [Click here](#)
- More admin pre-work allows more time for the clinician to discuss outcomes rather than fact finding. This gives your clinician more time to think before contacting the patient
- Can you disable elements of your online consultation system (where they overlap with existing online services provision) i.e. ordering medication or general questions forms (not clinical condition specific)? Check with your provider how much local tailoring can occur

2 Many practices reply within a couple of hours. Some online consultation solutions allow the practice to change this timescale. Align to 48hrs for standard acknowledgment and allow messages to incorporate extra time for weekends and bank holidays. In all cases messaging should be clear to patient that this is for non urgent/emergency care and provide a turnaround

Clinical requests that could be resolved via self-help:

- Ensure the signposting options to alternatives are set up correctly, if a problem can be resolved via self-help, respond with a link to the most appropriate [nhs.uk](#) resource. SMS templates are available for most common illnesses and can be configured to signpost to community pharmacy pathways in your areas for minor illness. A good example is the [Healthier Together](#) website, which gives clear information for a range of conditions affecting children, including a traffic light approach to judging severity of symptoms
- This is an opportunity to use NHS Symptom Checkers on your websites and signpost using social media to these via social media. For more information about social media best practice [see here](#)

GP Online Services -

Ordering repeat medication, booking appointments online, using online messaging systems, viewing detailed test results

Patients can easily be confused over the different ways to access online services. Make sure that you clearly explain which parts of the system is to be used for each purpose on your website. Have a robust protocol in place for ordering prescriptions etc, so that patients know exactly how they should be doing it. There is new NHSX website design guidance available [here](#). You will need to access the NHS Futures website to see these resources

- For medication ordering – signpost to use NHS App or other existing patient facing apps (Patient Access, Evergreen Life, myGP, S1 etc) – this will enable the request to flow directly into the clinical system workflow
- Remember – for patients who don't have GP online services registration, they can still access limited services via the website link to online consultation. This will help patients who do not already have patient online accounts
- Enable viewing of test results so that patients can see these as part of their detailed care records so that they don't need to use online consultation for results. This can be from the date of the most recent test (not historically unless you have a robust process for checking data quality). This will reduce multiple contacts
- Use [personal vouching and the NHS App for online registration](#) rather than asking patients to come into the surgery with identification
- A patient requiring a follow up doesn't always need to submit an online consultation enquiry. You could use messaging systems, e.g. GP/Nurse could message the patient directly with an action, ask for treatment feedback or if more complex, better to book an online 'follow-up telephone call'
- Create some slot types for 'Follow up/Test Results' for patients to book online to discuss blood results, scans, x-rays etc. If these are available to book online, they avoid further telephone calls
- Better still use GP online services to let patients view test results, immunisations as part of core Detailed Care Record offer. This will reduce multiple contacts
- For patients that are requesting an appointment with the nurse, consider putting some telephone appointments online. Good examples of bookable online appointments include cervical screening or smear, telephone appointments for pill check, asthma, diabetes reviews, alternatively use other remote monitoring templates. We appreciate that this may change depending on your current service requirements or as a result of the COVID pandemic and vaccination programme
- Can you use a practice nurse instead of an administrator to triage long term conditions and nurse queries, as this will avoid duplication in the team when processing requests?



Workforce planning and Staff Training

Have you considered teams; clinical and admin working across the PCN collectively? If practices can support each other especially for the extended roles like Pharmacist, this can relieve some individual practice pressure. You will need to ensure that you have arrangements in place for IG/DPIA to address access to & data sharing.

- Can the staff working flexibly/shielding/working from home support online consultation differently?
- Can some staff who were answering phones be moved to triage online consultation with a clear protocol?
- PCN options – have you considered an online consultation ‘hub’ model with a dedicated team to respond to all online consultation instead of practice based (especially for new problems that don’t require continuity)?
- Flexible working – some staff may be happy to do early or late shifts working from home to deal with late and overnight forms. Even weekends if isolating / home schooling. Think flexibility 24 – 48hr for a reply – not just standard day of 9-5 hrs working
- Have a consistent process across your PCN so that teams who work flexibly don’t have to learn different ways of working



Preparing your Patients

Patient engagement is crucial for continuous review and improvement. It's good to communicate to let patients know what's going on but equally good for practices to hear feedback.

This should be addressed at PCN/CCG/STP level for communications and shared out to practices – not delivered by Practices in isolation.

Redmoor Health have been commissioned to work with your CCGs and help you with patient communications. Get in touch with hello@redmoorhealth.co.uk to learn more about this offer.

- How are regions and CCGs communicating use of NHS111 to patients?
- Are a lot of patients asking the same questions?
- Can you post these enquiries weekly as an FAQ on your social media and website informing patients of common queries?
- Continue to broadcast updates about the COVID programme to social media but use your website for a more general weekly update. Make sure to advertise your social media on your website and vice versa
- Post on your social media and website the volume of enquiries that you are receiving and include that it may take longer to answer their enquiry
- Set patient expectations on timescale and how you will reply so they know when and how they will get a response
- Signpost more generally to the alternatives to General Practice – Community Pharmacy, NHS 111 etc.
- Are your self-referral options clear for patients? For example, physio, CBT, self-referrals. Are these self-referral options easy to access via your website? Advertise these and also how community pharmacies can help

Patient understanding and behaviours

Be clear with patients about the need for continuity, especially if it is for an ongoing problem that has already been dealt with. Many people are willing to wait longer for their usual GP, and so may be content for the same with online consultation. Switching off the online consultation system over the weekend could result in a peak on the Monday morning or it could be that patients decide to use the 111 service instead. Alternatively the problem is no longer a problem by the time Monday arrives. You will need to monitor your data to see the flow of requests throughout the week after any change. Also, if your signposting system is set up correctly, some weekend patients will be diverted to alternatives in the community i.e. pharmacy, NHS111 online etc. rather than wait until Monday.

- Individual and bulk communications will help
- Patients need to know how you operate
- Do your patients know about the other parts of the NHS available to them when you are closed?
- Do you have the online NHS 111 Symptom Checker on your website and are you sharing this over social media?



Please contact your CCG Digital Team or email england.dfpcsoutheast@nhs.net if you need support with any of the things you have seen in this document.

