

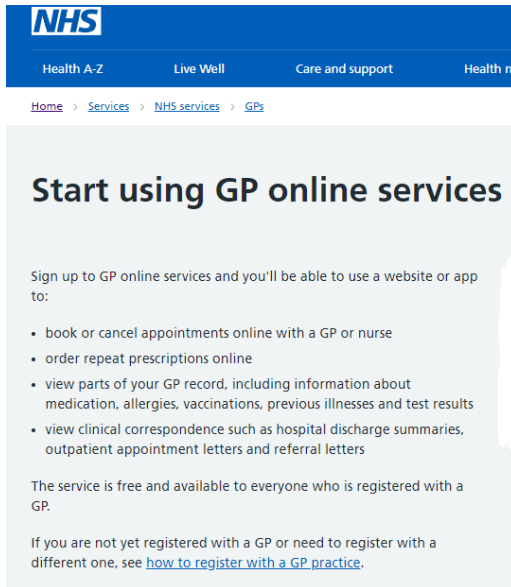
Digital Primary Care: An evidence free zone?



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What is Digital Primary Care?



NHS

Health A-Z Live Well Care and support Health ne

Home > Services > NHS services > GPs

Start using GP online services

Sign up to GP online services and you'll be able to use a website or app to:

- book or cancel appointments online with a GP or nurse
- order repeat prescriptions online
- view parts of your GP record, including information about medication, allergies, vaccinations, previous illnesses and test results
- view clinical correspondence such as hospital discharge summaries, outpatient appointment letters and referral letters

The service is free and available to everyone who is registered with a GP.

If you are not yet registered with a GP or need to register with a different one, see [how to register with a GP practice](#).

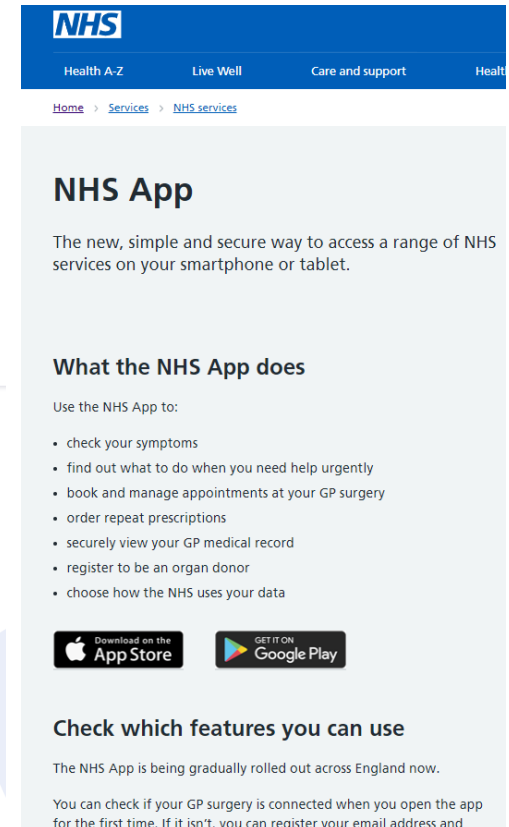


Get online help from our GPs

askmyGP

Start >

About



NHS

Health A-Z Live Well Care and support Health

Home > Services > NHS services

NHS App

The new, simple and secure way to access a range of NHS services on your smartphone or tablet.

What the NHS App does

Use the NHS App to:

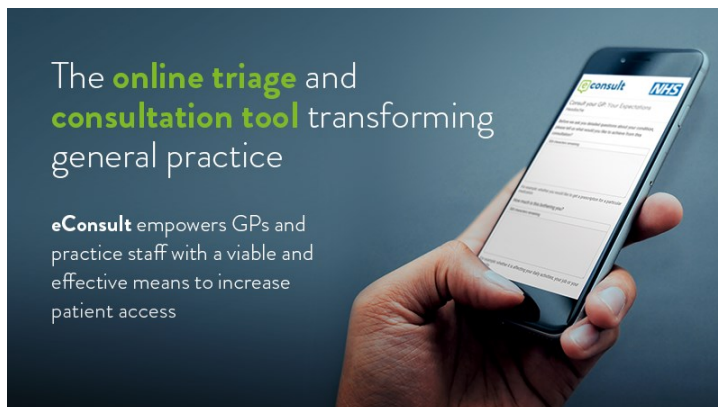
- check your symptoms
- find out what to do when you need help urgently
- book and manage appointments at your GP surgery
- order repeat prescriptions
- securely view your GP medical record
- register to be an organ donor
- choose how the NHS uses your data

Download on the App Store GET IT ON Google Play

Check which features you can use

The NHS App is being gradually rolled out across England now.

You can check if your GP surgery is connected when you open the app for the first time. If it isn't, you can register your email address and



The **online triage** and **consultation tool** transforming general practice

eConsult empowers GPs and practice staff with a viable and effective means to increase patient access



Welcome to the new Patient Access

In partnership with **NHS**

If this is your first visit to the new Patient Access, sign in with your User ID as normal. You can then confirm an email address for future sign ins. More can be found in this [article](#) and [video](#).

No User ID?

Email or User ID

Password [Show](#)

Remember Email or User ID

Sign in

Why Digital Primary Care?

- Pressure to modernise the health service – industry does it, everyone has a smartphone, etc
- Claims that it provides a way to manage workload and save time.
- Claims it improves efficiency and reduces pressures on other NHS services.
- Written into new contract, funding allocated to implementation.
- Part of the NHS Long Term Plan

‘All practices will be expected to offer online consultations by April 2020’
New GP contract

What about evidence?

'Without a clear framework to differentiate efficacious digital products from commercial opportunism, companies, clinicians, and policy makers will struggle to provide the required level of evidence to realise the potential of digital medicine. The risks of digital medicine, particularly use of AI in health interventions, are concerning. Continuing to argue for digital exceptionalism and failing to robustly evaluate digital health interventions presents the greatest risk for patients and health systems.'

"Is digital medicine different?" The Lancet 392(10142): 95.

How much digital primary care?

Online consultation platforms:

- As few as 44 patients using online consultation in a 10 week period, largest number of patients using it in a 10 week period being 3236. (Eccles et al 2019)
- Other studies have shown a mean of 2 consultations per 1000 patients. (Edwards et al 2017)
- 800 UK general practices offering online consultation (over 7000 practices in England)

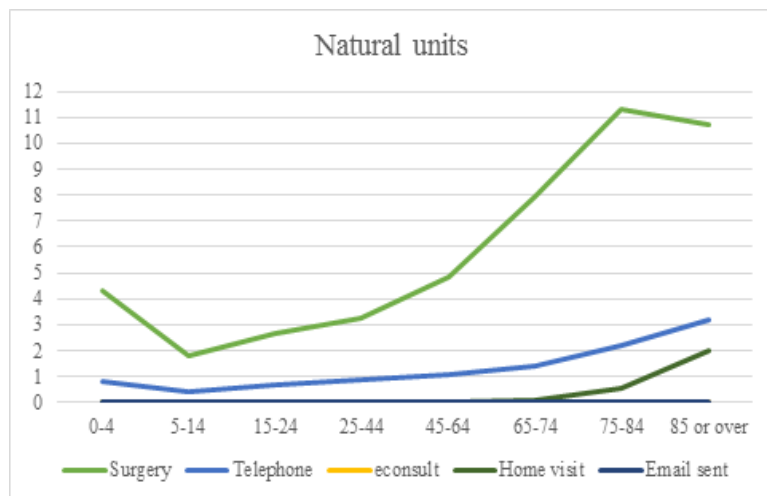
Digital services:

- National levels of registration for online appointment booking (27.18%), repeat prescriptions (26.94%) and record access (7.24%).

Private online general practice:

- Over 1000 survey responses from across the West Midlands, no one reporting that they have used a private supplier.

Who is using digital primary care?



Atherton et al 2018

	% (n=5447)
Sex of patient	
Female	65.5 (3570)
Male	34.5 (1877)
Age of patient	
<16	11.6 (634)
16-24	12.0 (655)
25-34	22.7 (1234)
35-44	17.6 (958)
45-54	15.0 (819)
55-64	8.5 (461)
65-74	4.8 (263)
75-84	1.7 (95)
>85	0.7 (36)
Not reported	5.4 (292)

Eccles et al 2019

Face to face consultations: higher in children and older patients, women, those from non-white ethnic groups and those with multimorbidity. Little relationship with deprivation.

Telephone consultations: Similar to above, no relationship with ethnicity

Online consultations: More use by women, those in their 30's, white patients and more affluent areas.

GP online services

- Appt booking, prescriptions, records.
- Next to no evidence on online appointment booking or prescriptions.
- Growing evidence base around patient records especially in vulnerable groups.
- But no work to tell us anything about uptake or patient wants and needs.



Alternatives to a face-to-face consultation

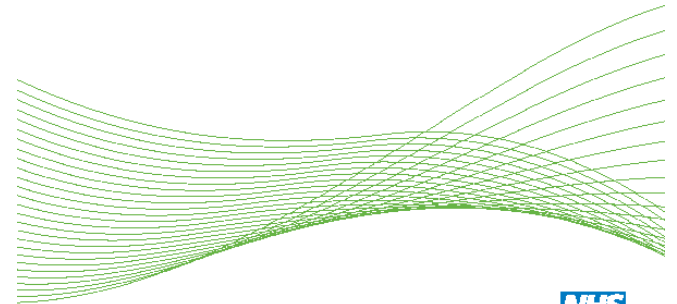
- There is not one vision - different rationales.
- Idea that not every patient is 'suitable.'
- Co-workers were often unaware of each other's practice.
- Patients reported benefits including convenience and access, but also reported frustrations and difficulties.
- Staff and some patients regarded the face-to-face consultation as the 'gold standard.'

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The potential of alternatives to face-to-face consultation in general practice, and the impact on different patient groups: a mixed-methods case study

Helen Atherton, Heather Brant, Sue Ziebland, Annemieke Bikker, John Campbell, Andy Gibson, Brian McKinstry, Tania Porqueddu and Chris Salisbury



DOI 10.3310/hsdr06200

NHS
National Institute for
Health Research

Online consultation platforms

- Females (65.5%, n = 3570) and aged 25–34 years.
- Highest use between 0800 and 0959, and on Mon and Tue.
- Use outside of opening hours low.
- Common reasons: medication enquiries, admin requests, report a specific symptom.
- Comments left by patients suggested advantages, e.g. convenience and the written format, but these did not extend to all users.

Research

Abi Eccles, Michael Hopper, Amadea Turk and Helen Atherton

Patient use of an online triage platform:

a mixed-methods retrospective exploration in UK primary care

Abstract

Background

Recent years have seen the introduction of online triage allowing patients to describe their problems in an online form. Subsequently, a GP telephone the patient, conducting a telephone consultation or arranging a face-to-face consultation.

Aim

This study aimed to explore patterns of use and patients' experiences of using an online triage system.

Design and setting

This retrospective study analysed routinely collected data from all practices using the 'askmyGP' platform for the duration of the study period, 19 May 2017 to 31 July 2017, using both quantitative and qualitative approaches. Data originated from an online triaging platform used by patients in nine general practices across the UK.

Method

Data from 5447 patients were quantitatively analysed to describe characteristics of users, patterns of use, and reasons given by patients for using the platform. Free-text comments left by patients ($n=5619$) on their experience of use were qualitatively analysed.

Results

Highest levels of use were observed in females (65.5%, $n=3570$) and those aged 25–34 years. Patterns of use were high between 0800 and 0959, and on Mondays and Tuesdays. Use outside of GP practice opening hours was low. Common reasons for using the platform were for medication-related enquiries, for administrative requests, and to report a specific symptom. Comments left by patients suggested advantages to using the platform, for example, convenience and the written format, but these did not extend to all users.

Conclusion

Patterns of use and patient types were in line with typical contacts to GP practices. Though the age of users was broad, highest levels of use were from younger patients. The perceived advantages to using online triage, such as convenience and ease of use, are often contact dependent.

Keywords

electronic mail, general practice, primary health care, remote consultation, triage, workload.

INTRODUCTION

The number of consultations in NHS general practice increased by 10% between 2007 and 2016, and the number of full-time equivalent GPs has decreased by 1% in the same period.¹ This is contributing to increasing workload pressure,² and affecting GP morale and job satisfaction.³ Alternatives to face-to-face consultation are increasingly encouraged by policymakers as a way to help manage demand and workload, and patients are now able to contact their GPs using a range of methods, including phone, email, and online triage systems.⁴ Such vision is driven by underlying assumptions that alternative routes are more convenient and accessible for patients, and an efficient use of practitioners' time.^{5,6} However, there is limited evidence to support these assumptions and, apart from increased use of telephone consultations, most practices have been slow to adopt these approaches.^{1,6,7}

A lack of supporting evidence is a particularly salient issue for more novel methods of contacting GPs, such as online triage platforms. Such platforms allow patients to use an online form to enter information about their query. The general practice will respond to the patient based on this information, normally conducting a telephone consultation or arranging a face-to-face consultation. NHS England has supported the roll-out of these online triage platforms, providing *£4.5 million for a national programme to simulate uptake of online consultation systems for every practice*.⁸ Currently, there are various online triaging

platforms available within the NHS general practices: 'askmyGP': <http://askmygp.uw.ac.uk>, eConsult: <https://econsult.net/>, and eGin Online Triage: <https://www.egin.net/all-services/online-triage/>.

Survey-based evidence indicates that patients find the timeliness, quality, and experience of care to be acceptable when using online triage platforms.⁹ However, studies to date have shown that anticipated reductions in workload associated with the use of online triage have not been realised.¹⁰ The limited evidence base available suggests that an online triage platform is most frequently used during the working week, with overall low levels of use.¹¹

This study is the first to focus on a particular platform, 'askmyGP',¹² with all UK studies to date focusing on a different platform, eConsult. Both platforms are incentivised in England for use by general practice.⁸ This study aimed to explore use of the 'askmyGP' online triage platform by describing the characteristics of, and patterns of use by, patients, and by obtaining insight into patients' perspectives and experiences of the platform at the point of use.

METHOD

This was a retrospective analysis of routinely collected data from 5447 patients, taking both qualitative and quantitative approaches.

Online triage platform

Users access the 'askmyGP' Version 2

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Video consultation

- Lots of small pilots in individual practices (Cavendish St in London).
- GP Access Fund projects unable to demonstrate use where intended.
- In-depth work by Trish Greenhalgh on video, from secondary care settings.
- Difficult to implement.

lay.co.uk/home/finance-and-practice-life-news/patients-give-thumbs-up-to-gp-skype-pilot/20009161.article#.VcoIPIVhBd

The screenshot shows a news article on the Pulse website. The page header includes the Pulse logo and navigation links. The article title is 'Patients give thumbs up to GP Skype pilot', dated 9 February 2015. The main text reports that a central London GP practice saw high patient satisfaction but less-than-expected demand for Skype consultations. A survey of 95% of patients showed that 94% were satisfied or better, and 78% were satisfied with the wait time. However, 83% of patients were concerned about the security of Skype. The article also mentions that the practice had plans to extend the number of Skype sessions, but these were scrapped due to a lack of demand. A sidebar on the right features a 'MOST POPULAR' section with four articles, including one about NHS recruitment in India and another about GMC doctors with mental health problems.

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HOME → FINANCE AND PRACTICE LIFE NEWS

Patients give thumbs up to GP Skype pilot

9 February 2015 | By Caroline Price

share Print Save Comments (16)

SHARE ON FACEBOOK GPs piloting Skype consultations at a central London GP practice saw high patient satisfaction but less-than-expected demand.

SHARE ON TWITTER Almost all patients surveyed about their experience of the remote consultation service said they 'would use it again' (95%).

EMAIL TO A FRIEND

A further 94% said they were 'satisfied or better' than the consultation had met their medical needs and 78% were satisfied with how long they waited for the appointment.

Although patients were warned that 'the security of Skype isn't 100%', 83% also said they were happy with the safeguarding of their privacy.

GPs at the practice were also positive, reporting that Skype was better than phone consultation for making a diagnosis. However they found it was less time efficient than phone consultations, taking up 10 instead of five minutes.

However plans to extend the number of GP sessions held via Skype each week from two to five were scrapped due to a lack of demand.

RELATED ARTICLES

GPs offered £150k to provide online consultations from home
28 Aug 2015

MOST POPULAR **MOST COMMENTED**

- 1 NHS looking to bring in GPs from India to alleviate recruitment crisis
- 2 GMC to spare doctors with mental health problems from a full investigation
- 3 Two-thirds of GP appointments 'don't need a doctor'
- 4 'Average GP earnings' at prominent GP's practice is £23k per year

Video consultation

The ViCo Study

Comparing the content and quality of video, telephone and face-to-face consultations: an exploratory study

Prof Brian McKinstry, Led by University of Edinburgh

- ▶ VC as an alternative method of follow up consultation.
- ▶ Using 'Attend Anywhere' a web based platform currently being piloted by NHS Scotland.
- ▶ Applying both qualitative and quantitative approaches
- ▶ Many of the advantages of video come from it being remote.
- ▶ Video offers advantages over telephone consultation in relation to visual element and rapport.
- ▶ Technical and logistical issues need to be sorted before this can work.

Evidence free zone?

- Not an evidence free zone.
- But we do need to do more (and we are).
- We see similar findings across the different digital approaches – this is not coincidence.
- Work to be done in persuading decision makers to listen.
- For clinicians, don't be afraid to ask for evidence to back up what you are being asked to do.



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- NIHR RfPB programme
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- RCGP Scientific Foundation Board
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