Welcome to our webinar
Digital first: moving to online triage and consultations

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• Please ensure you have muted your microphone
• Please use the chat function to submit any questions

Please note this webinar is being recorded
Digital first: moving to online triage and consultations

Dr Minal Bakhai
Deputy Director and National Clinical Lead for Digital First Primary Care, NHS England and NHS Improvement
General Practitioner, Brent CCG
@MinalBakhai #PrimaryCare

Dr Murray Ellender
CEO eConsult
General Practitioner

Dr Ross Dyer-Smith
Co-Founder eHub Hurley Group
General Practitioner
Digital primary care

All practices should move to a triage first model (online, phone, video) as rapidly as possible to protect patients and staff from possible infection.

Rapid procurement for those practices that do not currently have an online consultation and/or video solution will be supported through a national bundled procurement.

There is national work underway to address known barriers to digital access.

Practices should manage patients remotely unless face to face care is clinically required, in order to minimise infection risk.

NHSE/I are working with local commissioners on implementation resources to help practices to deliver the changes required to deliver a successful total triage model.
The National Commercial and Procurement Hub

commercial.procurementhub@nhs.net
Steps to take: moving to total triage and online consultations

- Current pre-booked appointments should be converted to remote management unless face-to-face contact is clinically necessary.

- Turn-off online pre-bookable appointments if all triage is handled through an online consultation system.

- If online pre-bookable appointments are being turned off, practices must not turn off other patient facing services, e.g. repeat prescription ordering and patient access to medical records.

- Appointments made available to NHS 111 for direct-booking should be set up as remote appointments not face-to-face.

- Practices should enable record sharing across PCNs (as a minimum).
Patient submits an enquiry in their own time through a structured online consultation form via the practice website.

Administrative staff filter admin requests and send clinical queries to the most appropriate clinician flagging urgent requests.

The clinical history is presented in a way that is quick and easy to assimilate. Clinician reviews and responds through the most appropriate channel.

Or, patient phones the practice and administrative staff complete an online consultation form on behalf of the patient.

Online message

Video consultation

Telephone consultation

Face-to-face consultation
Virtual hubs

Resident is able to access a platform which allows them to consult online with eHub clinicians

- eHub provides digital and possible F2F services.
  - Where eHub appointment is not in patients’ best interest, capacity at registered GP is sought.

eHub could be set up as:
1. Separate entity
2. Part of access hub
3. Linked to UCC/UTC if applicable

Online consultations are managed centrally by a group of clinicians working on behalf of a group of GP Practices
Example of a Local COVID-19 Pathway

Consider
- Using buddyng and/or huddles where difficult decisions need to be made and to make a decision for face to face or home visits (2 or more clinicians)
- “Face to face” should be reserved for only when the benefit outweighs the risk e.g. suspected acute abdomen

Consider
A virtual hub/ward for remote monitoring of patients with moderate symptoms in case they deteriorate
Top tips for online consulting

• Aim to respond promptly

• Don’t be daunted if you see a lot of requests

• Be clear about who is responding

• Check the patient’s understanding

• Make sure that patients are able to ask questions

• Consider wording of messages

• Be alert to written cues

• Avoid jargon and acronyms

• Pass the online consultation to the patient’s regular clinician

• Quick wins

• Try to do today's work today
Support offer

- Total Triage Blueprint
- Digital Primary Care FutureNHS workspace
- Video Consultation Guide
- Demand and capacity tool
- Implementation toolkit
- Network of Champions Peer-Peer Learning
- Tailored Hands on support
- Webinars and Recordings
- eLearning
- Videos
- FAQs
How to create a ‘Total Triage’ model

Dr Murray Ellender MRCGP MRCEM
Patient flow through the eConsult system

- **Patient or parent/guardian**
  - **NHS app or GP practice website**
    - Uses NHS login
    - Common journey
    - Available 24/7

- **Self care**
- **Pharmacy**
- **Local services**

- **Online consultation** (35% select this option)
  - Triage by team
    - Care navigator
    - Pharmacist
    - Admin
    - Physio
    - MHT
    - Physician Associate
    - GP

- **Remote closure 70%**:
  - Message 40%: Prescription / advice
  - Phone or Video 30%

- **F2F appointment 30%**
What is ‘Total Triage’?

Online Consult is the preferred **route** for accessing help or an appointment.

GP Practices taking ‘control’ of appointment offer

**Managing** patient demand and improving **efficiency**
Benefits of Total Triage

✓ Easiest model to introduce for practices / simple message for patients
✓ Improved access for patients without internet access
✓ Reduced appointment waiting time
✓ Increased continuity of care
✓ Utilising the full practice team
✓ Appointments for patients who *need* to be seen
✓ DNAs reduced to zero
✓ Protects workforce in Covid-19 crisis by significantly reducing footfall
Total Triage – key message

Your practice needs to consider 3 Cohorts of patients...

1. Those who cannot complete an eConsult - no internet, blind, language issues, learning difficulties, aged under 6 months etc

2. Those who have started their eConsult journey but unable to complete for “safety concerns”

3. Everyone else
Change in Practice

- All online bookable appointments for triage trained clinicians turned off

- Procedure for patients unable complete an eConsult (cohorts 1 & 2)
  Navigation utilising clinical system templates

- Mandate all administration requests through eConsult
Patient Journey
Protect workforce in current climate – Covid-19

Important information about coronavirus (COVID-19)

If you live alone and have either a high temperature or a new continuous cough, do not leave your home for 7 days. If you live with other people, keep everyone at home for 14 days. To check if you need medical help, use the 111 coronavirus service. Only call 111 if you cannot get help online. DO NOT go to your GP surgery, hospital or pharmacy.

We're about to ask you a few questions about your request. Your answers will be sent securely to your practice.

To get started, please agree to the privacy notice and tell us if we can share your data with your practice.

I have read the privacy notice, and I consent to eConsult Health Ltd (an NHS-approved, third party organisation) using my personal and health data to provide an online consultation. I can withdraw my consent at any time by abandoning the form.

I consent to eConsult Health Ltd sharing my personal and health data with Docklands Medical Centre.

You need to stay at home. Do not go to a GP surgery, pharmacy or hospital.

- If you have symptoms of coronavirus, you'll need to stay at home for 7 days.
- If you live with someone who has symptoms, you'll need to stay at home for 14 days from the day the first person in the home started having symptoms.
- If you live with someone who is 70 or over, has a long-term condition, is pregnant or has a weakened immune system, try to find somewhere else for them to stay for 14 days.
- If you have to stay at home together, try to keep away from each other as much as possible.

If you have been told to self-isolate because of coronavirus and you need a note for your employer, you can get an isolation note from NHS 111.

Find out more from GOV.UK guide to staying at home.

Use the NHS 111 online coronavirus service if:
- you feel you cannot cope with your symptoms at home
- your condition gets worse
- your symptoms do not get better after 7 days

Use the 111 coronavirus service: only call 111 if you cannot get help online.
Impact on numbers
Your incoming eConsults will increase... but you will cope!

Both practices have around 40,000 patients

Beacon Medical Group & Brownlow Health Central Dashboard

Both practices have around 40,000 patients
What do our current total triage practices think?

What a week! Here it is in numbers: 2500+ contacts, over 1000 @econsult_thinks, 55% of contacts by eConsult, 10% less phone calls, 16% less average wait time on phones, 1.5% DNA (6 hours less DNA time), and 65% saved a trip to the surgery. But it isn't about numbers...

3:24 PM · Nov 15, 2019 · Twitter for iPhone

13 Retweets 34 Likes

...it's about people. Staff in all areas reporting a greater positive working environment, greater capacity to tackle other workload, ability to manage demand and patient queries being answered and/or offered appointment only hours after submitting an eConsult or phone call.

1 Reply 6 Retweets 27 Likes
Promotion is key; patient-focused messaging is important!

Launch day!
From 16th September all appointment requests should be made using eConsults via our website.
No more phone queues
No more unnecessary trips
No more seeing the wrong person
With eConsults we'll make sure you get the right help, from the right person, at the right time.

Need an appointment?
Submit an eConsult via our website and we will contact you by the end of the next working day at the latest.

Your eConsult will help us ensure you get the most appropriate help, whether it’s by email, telephone, or a face to face appointment with the right person at the right time.
How does this all fit together?
111 Online + eConsult: work has started to link journeys

Use cases:

1. Patient starts journey in primary care online setting (NHS app or practice website), completes eConsult and it is routed to GP for closure/management.

2. Patient starts journey in 111 Online setting, completes triage and it is routed to most suitable part of the IUC for closure/management, according to disposition.

3. Patient starts journey in primary care online setting (NHS app or practice website), is identified as having a more urgent need and eConsult is routed to IUC hub and delivered via ITK for more urgent closure/management.

4. Patient starts journey in 111 Online setting, disposition is “GP” and rather than being signposted to call GP, they are directed to eConsult platform to complete stripped down version (no duplication) that is then routed to GP for closure/management.
How are practices reacting to the current situation?

Remote closure 95%:
- Message 50%
  - Prescription / advice
- Phone or Video 45%
- F2F appointment 5%

Virtual GP hub or site
- 'Cold' site
- 'Hot' site or a CCAS
  - Covid Clinical Assessment Service

Setting up an eHub
Dr Ross Dyer-Smith MRCS MRCGP MFCI
@dyersmith
@eHubGP
Objectives

- The eHub story
- Models of delivery at scale
- The impact of training
- Technical Set up
- Tips
What is an “eHub”?
What is an “eHub”

- GP Practice
- Physical Hub
- Home
17 GP’s + 2NP
3 Pharmacists
1 Paramedic Nurse
3 Administrators

UK
ITALY
GREECE
Key Facts

- 80000 online consultations
- 1600/week
- 80000 (EPS, documents, lab reports; standardised)
- 0% DNA
- Increased recruitment
- Skill mix development – Pharmacist, NP, ?physio
- 85-89% remote closure rate (97% during COVID19)
The impact of experience and training

TRAINING AND EXPERIENCE

Jan  Feb  Mar  Apr  May  Jun

Percentage Closed remotely

0  10  20  30  40  50  60  70  80  90
The impact of experience and training

Run chart of outcomes per quarter

<table>
<thead>
<tr>
<th>PERCENTAGE</th>
<th>Aug-Oct</th>
<th>Oct-Dec</th>
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<tbody>
<tr>
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<td>26</td>
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<tr>
<td>Message</td>
<td>28</td>
<td>43</td>
</tr>
</tbody>
</table>
eHub Models

Scale

CCG

PCN

GP

GP

GP

GP
eHub Models

In hours +/- extended hours

- Core Hours
  - Patient
    - eConsult
  - Practice
    - Triage
    - GP
    - Admin
    - GP
    - Pharmacist
    - NP
    - PA
    - Paramedic
  - eHub
    - Refer to eHub

- Extended Hours
  - GP

eConsult only Vs eConsult + admin

- Core Hours
  - Practice
    - Workflow
      - Admin
      - GP
      - Pharmacist
      - NP
      - PA
      - Paramedic
    - Refer to eHub
  - eHub
    - GP

- Extended Hours
  - GP
eHub to Practice

*Based on local agreed processes i.e. Private work requests, Med3's may be all directed to practice

¹This could be booked direct by the eHub or passed to admin at the practice site
Practice to eHub + OOH

This may be due to appropriateness, continuity required, failed encounter or lack of technology in MedS request
Technical Set Up

Delivery & Distribution Mechanism

1. eConsult submitted → Uploaded to Practice clinical system direct via IO → eConsult processed via Workflow System
2. eConsult submitted → Uploaded to eHub Shared system → eConsult processed via Workflow System or appointment book
3. eConsult submitted → Delivered to central eHub email → eConsult processed direct from email
Technical Set Up

- Shared Records Access modules Vs Direct Access
- DPIA/DSA
- Logins and Smartcard Set Up
- Hardware and Software – VPN, specification, policies
- Standard Operating Procedures
- Business Continuity Plans
- Data Collection - Templates
- Governance processes – IG, SER, meetings
- Communications – Microsoft teams, WhatsApp etc
Critical Success Factors

✓ Clinical Leadership & Belief
✓ Control
✓ IT system knowledge
✓ Data collection design
✓ Regular Monitoring & Evaluation
✓ ‘Boots on the ground’ Vs ‘too many cooks’
✓ Culture change
✓ Engagement – process mapping
✓ Training, Volume and Experience
✓ Rapid PDSA Cycling
✓ Treating your eHub like a GP practice
✓ Online Consultation Uptake
ross.dyer-smith@nhs.net
Contact us

england.digitalfirstprimarycare@nhs.net
england.empowertheperson@nhs.net
(for advice on patient facing services)

https://www.england.nhs.uk/gp/digital-first-primary-care

FutureNHS: Digital Primary Care
(if you are not a FutureNHS user please email us for an invitation via england.digitalfirstprimarycare@nhs.net)