



2 New consultation types

E-consultations

Online consultations at Docklands Medical Centre

Patients are encouraged to use the practice website as their first point of contact when they want medical advice or help. This provides online symptom checkers, signposting to self help information and options to request a call back from a 111 nurse or to complete an online consultation with the GP.

The idea

Patients at this inner city practice are encouraged to make the practice website their first point of contact. This includes a prominent link to the e-Consult system. The patient is provided with a range of options for finding out more about their symptoms, a particular condition or treatment. They can also enter details of their problem and either request a call back from a nurse at 111 or send their details as an online consultation to the GP.

The GP receives the patients request as a task. They can deal with it entirely online, sending a reply or leaving a prescription, or call the patient back to talk further, or make a face-to-face appointment.

After testing different approaches, the practice settled on a system in which online consultations are included as part of the usual GP surgery template in the appointment system. Three online consultations are fitted into a single face to face slot.

Impact

In the first six months, 18% of patients used the online system. 91% said they were extremely satisfied with the service. The top ten conditions were cystitis (female), depression, contraception, knee pain, earache, asthma, sore throat, rectal bleeding, shoulder pain, and cough. There were no significant events associated with use of the system. Nine out of every ten users did not make contact with the practice, with 5 using self help, 2 choosing to visit a pharmacy, 1 requesting a nurse call back and 1 using the symptom checker.

40% of online consultations were completed by the GP entirely remotely, for example by replying through the online consultation system, leaving a prescription or initiating tests for the patient. These took an average of 2.9 minutes. In a further 20% of cases, the GP phoned the patient and resolved the matter, taking an average of 5.5 minutes. For 40% of cases, the GP asked the patient to make a 10 minute face to face appointment. In these, patients and GPs report having a higher quality consultation because the nature of the problem is already known to the GP.

Implementation tips

Not all patients will want to consult in this way, but, once they try it, the majority of patients from a range of different backgrounds are positive about the experience. Explanation is therefore key. Consider making the online options very prominent on the website, giving lots of information in the waiting room and personally recommending the system when speaking to patients in person or on the phone.

Providing a prompt response is important for maintaining patients confidence in the system. Ensure you are able to spot any problems with timeliness of response.

GPs generally need only about 10 minutes training to start consulting in this way. Some may be reluctant at first, so it is worth providing lots of information beforehand. You may also want to consider introducing the new way of working with more enthusiastic GPs initially. Encourage GPs to discuss their experience of the system with one another, and to share tips. Consider whether anyone would benefit from learning to touch type to reduce their consulting time further.

A good rule of thumb is to book three online appointments in a typical 10 minute slot. It is important to watch changes in demand and adjust the blend of online and face to face slots as more patients switch to online consultations.

As soon as you start freeing up noticeable amounts of GP time, encourage GPs to consider offering more longer face to face appointments to people with complex needs.

Link(s)

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