

# Online services in general practice across Surrey Heath CCG – a mixed methods study July 2017- May 2018

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# Context and aim

- Sharp rise in demand for GP services over recent decades
- National policy: provision of seven-day NHS services
- Supporting the adoption of digital technology is a key focus of the General Practice Forward View and the NHS Long Term Plan
- Multi-agency collaboration to explore use of GP online services across the Surrey Heath CCG population, and barriers to use
- Project aim: To achieve a better understanding of the needs of segments of the SHCCG population regarding GP online services



### Methods

- Review of the evidence
- Analysis of online transaction data for the Surrey Heath CCG GP-registered population
- Population segmentation using Mosaic
- Insight gathering work with patients, GPs and wider general practice teams



# Results 1 – Literature Review

- Good evidence that many patients like and want to use online services
- Advantages include ability to use the service out of hours and reduction in waiting times
- Access for certain groups enhanced
- Empowerment of patients through access to medical records
- Clinician reported experiences have been mixed: several concerns including workload (particularly patient access to full medical records and email), training, technology, confidentiality and governance



40,000 35,259 35,000 32,610 30,000 Number of people 25,000 20,000 15,000 10,000 7,751 4,901

Records access online

Service

3,311

Online messaging

Lab reports access

online

#### Number of people registered by individual service

Prescription request

5.000

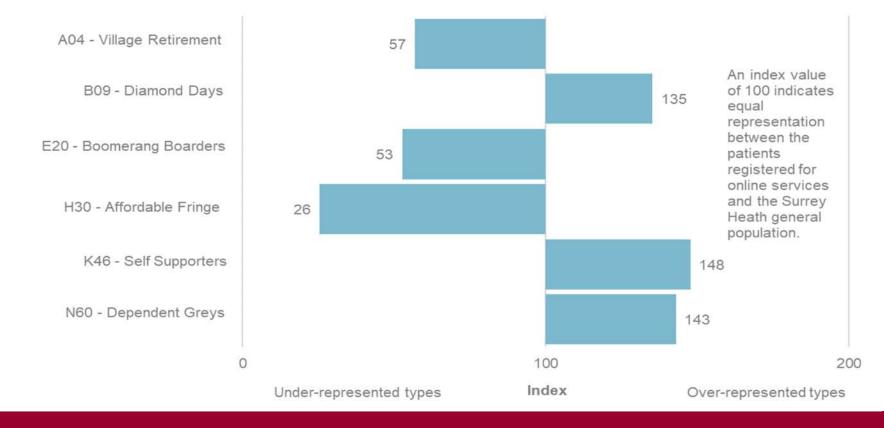
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Appointment

management



The most over-represented and under-represented Mosaic types of Surrey Heath patients registered for online services compared to the Surrey Heath general population





#### Results 4 – Insight Gathering

- System works well for routine appointments and standard online prescription ordering
- Limited scope of services
- Inappropriate appointment booking
- Narrative relating to health service use
- Variation between practices

"You cannot book a nurse's appointment. You can only book a doctor's appointment. I find that infuriating." "I put in for a prescription late last night. And I went into Superdrug at midday and it was there. I couldn't believe it! That was brilliant."

"A really important message that needs to get across to patients is that to keep our services free at point of access they have to be reasonable in their use of them."

"When I log in you can go into, like, blood pressure checks, diabetes checks, at least 10 options for appointments." Everyone laughs. "We'll all come to your practice!"



### Results 4 – Insight Gathering

- Online medical records
- Empowering patients & promoting self-management: signposting/navigation
- Frustrations with technology:
  - Registration and passwords
  - Lack of flexibility with software packages
  - Lack of IT support
- Continued need for telephone and face-to-face access for certain groups
- Continuity of care is valued but diminishing

".....if you look at your medical records, you might just as well not bother because there's nothing so it's not very helpful."

"I hope it doesn't mean that the GP, instead of talking to you, will say 'look it up on the internet'."

"I find it much easier to call for an appointment and let the pharmacy look after

repeat medicatic "...So, from the reception team...if we could work with EMIS and find a simpler way for the patients and a simpler way for the team to be able to re-register somebody if they've locked themselves out or they've forgotten their password..."

"Over 40 years we've seen the way the practice works change in a way we wouldn't have dreamed of. And seeing the same doctor, which was always such a valuable part of general practice, is now a virtual impossibility....."



# Summary

- Scope and flexibility limited for the majority of people
- Technical issues: major barrier to uptake
- Data safety: key concern for staff
- Demand is overwhelming capacity: many practices are reverting to the "tried and tested" to manage demand
- General practice not convinced about benefits of online services: further work on this is required
- Continuity of care is valued by clinicians and patients
- Investment in high quality GP online services is vital to ensuring access and workload is not perversely worsened through suboptimal access and use









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