Evaluation for Digital Consultation Tools in Primary Care

Section 1: Introduction

1.1 Purpose

The purpose of this evaluation is to comprehensively assess the effectiveness, usability, patient impact, and overall integration of digital consultation tools within primary care settings. The assessment draws on both qualitative and quantitative data from a recent survey distributed among primary care practices. By identifying strengths, areas for improvement, and potential strategies for optimization, this evaluation aims to enhance the use of digital tools to improve patient care and streamline clinical workflows.

1.2 Scope

This evaluation examines several key aspects, including user satisfaction, technical performance, clinical effectiveness, and the integration of digital tools with existing systems. It also identifies challenges and suggests improvements based on user feedback. The tools under review include SystmConnect, Accurx, Patches, eConsult, and Footfall, which are commonly used in primary care settings.

1.3 Methodology

Data for this evaluation was collected through a survey distributed to all 87 primary care practices within the Bath, Swindon, and Wiltshire (BSW) area. The survey focused on the use of various digital consultation platforms. Out of the total practices, 13 responded to the Evaluation Survey, and 46 participated in the Consultation Tools Research Survey. The majority of respondents were Practice Managers, with some input from General Practitioners (GPs), providing a well-rounded view of the tools' impact across different roles. The data was collected using SurveyMonkey and analysed to draw meaningful conclusions about the functionality and effectiveness of the digital tools.

Section 2: Survey Results Overview

2.1 Response Rate

The Evaluation Survey received 13 responses, while the Consultation Tools Survey garnered 46 responses. The response rates, based on the total number of practices, reflect a significant interest in the subject matter, although there is room for improving engagement in future surveys.

2.2 Demographics of Respondents

The survey primarily captured the perspectives of Practice Managers, who are typically responsible for the operational aspects of digital tool implementation. A smaller number of GPs also contributed, offering clinical insights. Respondents were spread across the Swindon, Bath and North East Somerset (BANES), and Wiltshire regions, ensuring that the findings represent a broad geographic area within the BSW region.

Section 3: Detailed Evaluation

3.1 Usability

The survey shows that respondents overwhelmingly found the digital consultation tools easy to use, with 72.73% agreeing and 27.27% strongly agreeing that the tools were simple and user-friendly. This reflects a high level of satisfaction with the platforms' interfaces and workflows. There were no respondents who disagreed with this statement.

3.2 Communication

The tools also made a significant impact on communication with patients, as 66.67% agreed and 33.33% strongly agreed that their ability to communicate with patients improved through the use of digital tools. However, communication with other healthcare professionals and stakeholders such as interpreters or carers was somewhat mixed, with 16.67% of respondents disagreeing that the tools improved communication in these areas. In contrast, communication with patients received highly positive feedback.

3.3 Technical Performance

While most respondents felt that the tools performed well technically, some feedback on integration with other systems was provided. For example, 50% of respondents strongly agreed that the tools integrate well with SystmOne and other systems, while 33.33% agreed and 16.67% remained neutral on this point. No respondents reported any integration failures, suggesting that the tools are generally well-received in terms of their compatibility with existing practice systems.

3.4 Workload

Feedback on workload improvements varied slightly. 66.67% of respondents felt that the tool improved their daily workload, but 8.33% disagreed and 25% remained neutral on the matter. When evaluating the impact on the team's workload, 33.33% strongly agreed that it improved their efficiency, while 8.33% disagreed. Regarding the entire practice's workload, 25% strongly agreed, but 16.67% disagreed, indicating some variance in how different teams experienced the impact on workload.

3.5 Data Security

Most respondents felt confident that the tools protect sensitive patient data, with 33.33% strongly agreeing and 41.67% agreeing that the software securely processes patient data. Only 8.33% of respondents disagreed, highlighting a mostly positive perception of data security across the board.

3.6 Impact on Service and Job Satisfaction

The tools had a significant positive impact on the quality of service provided to patients, with 41.67% strongly agreeing and 58.33% agreeing that the tools enhanced service delivery. However, when it came to job satisfaction, responses were more varied, with 25% strongly agreeing and 16.67% agreeing that the tools positively impacted their job satisfaction. Some respondents (8.33%) expressed dissatisfaction, possibly due to workload challenges or tool limitations in certain contexts.

Section 4: Strengths and Areas for Improvement

4.1 Key Strengths

The evaluation highlighted several positive aspects of digital consultation tools, both from the practices' perspective and through patient feedback. Many practices have reported favorable patient responses regarding the shift to digital systems, particularly in relation to accessibility and ease of use.

Several patients have commented positively on the elimination of the need to wait endlessly on the phone only to find that appointments have already been taken. This change has significantly reduced frustration, with one patient stating, *"The new system of not having to wait endlessly on the phone only to be told all appointments have gone and to call back at 8am the next day is a great improvement."*

Another patient remarked on the convenience of online appointment booking, noting that it was not only easier but also improved the timeliness of care: *"I think the new system of booking appointments online is so much better! My appointment was earlier than scheduled, and I wasn't delayed."* The simplicity of the appointment request form and the clarity of the process were particularly appreciated, with patients finding the instructions clear and useful. One patient detailed their experience, stating: *"Easy to follow instructions on the initial appointment request form. Useful questions around preferred time and method of contact. Received a link with appointment availability via text. Booked appt and attended. Easy to follow and user-friendly."*

These comments illustrate how digital tools are not only streamlining practice workflows but also improving patient experience, contributing to a more efficient, patient-centred care model. For many patients, the ability to see a healthcare professional in a timely manner has improved: *"The new appointment system means I actually have a chance of getting to see someone in a timely manner, and once there, the medical staff are great."*

4.2 Areas for Improvement

Despite the positive feedback, some patients raised concerns about the new system, particularly regarding accessibility for elderly or disabled individuals who may not have access to the internet or mobile phones. One patient expressed frustration: *"The new appointment system, you can never get through because you close it. Not everyone's got mobile phone or internet access, especially the elderly and the disabled."*

Another negative sentiment came from a patient who found the new digital appointment system cumbersome, stating: *"The whole new system of booking an appointment is awful."* These comments highlight the need for practices to ensure inclusivity and education, providing alternative ways for patients to access care, especially for vulnerable groups who may struggle with digital tools.

Section 5: Recommendations

5.1 Immediate Actions

Based on the survey feedback, several immediate actions are recommended. First, the technical issues with SystmConnect, such as frequent crashes, need to be addressed urgently to prevent disruptions in patient care. The developers are responsive and receptive to working through issues which are inevitable when introducing a new package.

Additionally, providing clearer, more centralized guidance on funding and digital tool adoption would help practices make more informed decisions. Issues surrounding the delays in the Digital Frameworks have not helped this so far but the ICB are supportive and willing to engage with Practices to help them make the best decisions for them.

5.2 Long-term Strategies

To ensure the continued success and adoption of digital consultation tools in primary care, it is essential to focus on fostering a culture of shared learning and ongoing education, both for healthcare teams and patients. By adopting the following strategies, we aim to enhance patient access, particularly for those who may not be comfortable using technology:

1. **Promote Shared Learning Among Practices**: Establish a network for practices to share their experiences, challenges, and best practices with digital consultation tools. This approach can facilitate continuous improvement and adaptation of the tools, ensuring that they meet the diverse needs of all practices. Peer support, workshops, and collaborative learning sessions can help ensure that practices are learning from one another's successes and avoiding common pitfalls.
2. **Support and Educate Patients**: A key element of long-term success will be educating patients about the benefits of using digital consultation tools. This should be done through outreach programs, clear communication campaigns, and in-practice support, ensuring patients know how to navigate these systems. Providing accessible guides or in-person demonstrations for those less familiar with digital technologies can help increase confidence and uptake.
3. **Reassure Patients About Traditional Access**: It is crucial to emphasize that patients who are less comfortable with technology will still be able to access services via traditional methods, such as phone calls. Digital tools can alleviate pressure on phone lines, meaning that patients using non-digital methods will typically have quicker access and shorter wait times. It is important to communicate that these patients will continue to receive a high level of service, ensuring inclusivity for all demographics, especially the elderly and disabled.
4. **Tailored Patient Communication**: Provide tailored messaging for different patient groups, clearly outlining the various methods for accessing care. By emphasizing that digital access is an *option* rather than a requirement, and that traditional methods remain available, patients can feel reassured that they will still receive timely care, regardless of their technical capabilities.
5. **Continued Technical and Non-technical Support**: While digital tools will evolve and improve based on feedback, there will always be a need for practices to provide both technical and non-technical support to their patient populations. It is vital to regularly assess the ease of access across all methods to ensure that no patient group is disadvantaged.

Through these strategies, Practice's can create a more accessible, patient-friendly healthcare environment that supports both digital and traditional access methods. This approach ensures that digital consultation tools enhance overall care delivery without alienating those who prefer or need alternative means of communication.

Section 6: Conclusion

6.1 Summary

The evaluation indicates that digital consultation tools are increasingly valued in primary care, with many practices reporting improved daily operations and enhanced communication with patients. SystmConnect and Accurx, in particular, are popular among users. However,

significant areas for improvement remain, particularly in technical stability and system integration.

6.2 Next Steps

As the Admin Fellow role comes to an end in October 2024, it is important to ensure that the insights and progress made during the fellowship continue to benefit practices across BSW. To maintain the momentum gained from the evaluation of digital consultation tools, several legacy initiatives and resources will be put in place to support future decision-making and implementation:

1. **Evaluation as a Decision-Making Tool**: The findings from this evaluation will be made available to practices as a resource for ongoing decision-making. Practices can use the data to assess which digital consultation tools best meet their needs, while also identifying areas for further development and improvement based on peer feedback.
2. **Training Hub and TeamNet Resources**: To ensure that practices continue to have access to guidance and support, all resources, training materials, and toolkits developed during the evaluation will be uploaded to the Training Hub website and TeamNet pages. These platforms will serve as a central repository of information for practices looking to adopt or optimize their use of digital consultation tools, ensuring that key knowledge is preserved beyond the fellowship.
3. **Continued Support Through BEMS and ICB**: Both will retain the skills and expertise developed during the fellowship to provide ongoing support for practices in BANES. BEMS and the ICB will be available to help with the implementation and troubleshooting of digital tools, ensuring that local practices have a point of contact for further advice and assistance.
4. **Ongoing Collaboration and Learning**: Practices are encouraged to continue collaborating and sharing their experiences through local forums, peer learning groups, and workshops. This will help maintain a culture of shared learning and continuous improvement in the use of digital tools.

By implementing these legacy options, the work done during the fellowship will continue to have a lasting impact, ensuring that practices have access to the knowledge and resources they need to make informed decisions about digital consultation tools. These efforts aim to ensure ongoing support, training, and adaptation even after the fellowship concludes.

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