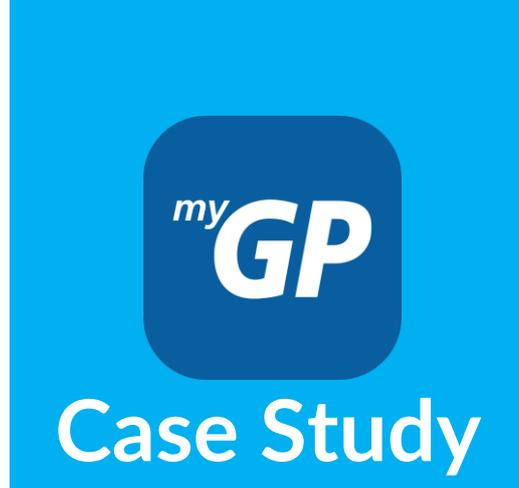


# iPLATO Online Consultation Service, preGP®: initial findings show successful demand reduction in Liverpool.



## Summary

Data from a 4-month testing of preGP has shown significant demand reduction for GP appointments in Liverpool CCG. The initial findings revealed that nearly 20% of appointments requested by patients could be moved to alternative services, such as practice nurses, or transferred from a face to face GP consultation to a telephone consultation.

## Background

Demand for GP services has been increasing at a rate of nearly 3% per year for the last 5 years<sup>(1)</sup> in the total population and by 3.8% in those over 85 years old. At the same time the number of GPs has fallen by 1,340<sup>(2)</sup> over the past 2 years, which is a 4% reduction. This has created a supply/demand imbalance that is adding workloads and stress to practices and creating issues for patients to access the necessary services they need. In addition, studies<sup>(3)</sup> have highlighted that up to 27% of GP appointments are inappropriate and that up to 51 million GP appointments are effectively wasted.

## preGP

SBRI<sup>(4)</sup> and NHS England funded the development of preGP, an online consultation tool that aims to move patients to the right care at the right time by signposting them to local services, identifying service gaps and providing relevant information services to patients. In comparison to the numerous systems aiming to replace GPs with clinical check-lists and robotic answering of requests, preGP was designed not to increase clinical risk and not to expose practices to litigation or CQC/GMC scrutiny from potentially providing inappropriate medical advice.

preGP was launched in May 2018 as a base version with the purpose of moving 12% of demand away from GPs. When patients book an online appointment at any time of the day, the system detects whether this is a new request and triggers the signposting engine. CCGs and GP Federations populate the local alternatives available, and the iPLATO team helps practices organise their appointment book to allow patients to see more slots than just a single, simple online GP appointment.

preGP gathers information on why patients want an appointment which allows for appropriate intervention by clinical staff in advance of any scheduled appointment, if needed.

The next preGP version is also funded by NHSE and SBRI. In addition to the signposting service, it will be able to offer video consultation and the capability for practices to dialogue in-app with patients.

preGP is already contracted to nearly 3 million patients in England and version 2 will be released by end 2018.

## Method

preGP was installed in Liverpool for a selected population and data about uptake and usage gathered over a 4-month period from 1 May 2018 to 31 August 2018. Information was recorded on demographics, usage, triggering, effectiveness, and financial savings. Data was automatically captured on the iPLATO Connect system, stored on a secure cloud database and analysed in house before presenting to Liverpool CCG.

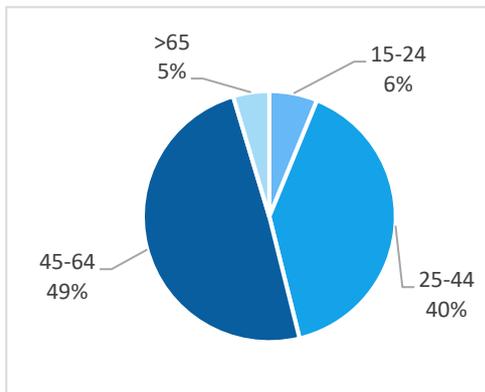
## Results

Initial results from Aintree Park Practice (N82053) are shown below and indicate the success of the project. Nearly 23% of patients in the practice could access the preGP service, and the system was triggered into action in over 40% of occasions when the patient booked a GP appointment. In those 'triggered' bookings, preGP was able to offer alternatives that the patients were happy with in nearly 20% of all the bookings.

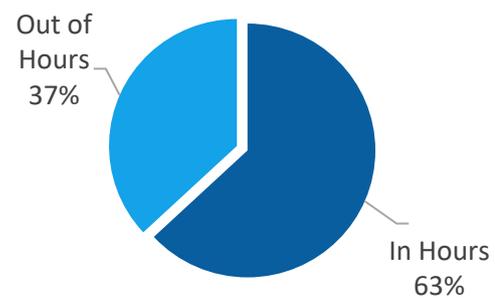
	To 31/08/18	Percentage
preGP users	2206	
Online Bookings	585	
preGP triggered	237	40.1%
preGP successful	116	19.8%

*Table 1: Bookings triggering preGP*

As the evaluation period continued the success of the system rose to nearly 31% in signposting alternative healthcare services for patients.



*Chart 1: Demographics*



*Chart 2: Access and Out of Hours*

The bulk of users of the system were surprisingly the 45-64-year-old age group. The initial premise that this was a technology service that would be used by a younger population was not borne out.

Another consideration in using systems like preGP is the ability to provide services for patients outside the normal hours of operation of a practice. The data was recorded based on time of day of access, with the assumption that 08:00 to 18:30 is in hours and from 18:30 to 08:00 is out of hours.

Over one third of patients were using the preGP system to book and manage their appointments outside of the normal working hours of the practice. This would impact directly on the switchboard availability and pressure on practice staff as hundreds of calls are managed online.

## Conclusions

The Liverpool data matches that collated in other areas around the UK and found that preGP has the ability to move 20% of demand away from standard face to face GP consultation to more appropriate and more timely care, accessed at a time that the patients want. The system is simple enough to be age agnostic and easy to use.

If the system was to be deployed in all of Liverpool there could be savings of nearly £1m per year as predicted in the original modelling carried out by SBRI and NHSE when funding the project.

## References

1. Source NHS. GP appointment data 2017.
2. Source NHS Digital 2018
3. Making Time in General Practice report 2015
4. The Small Business Research Initiative