

The speed at which primary care has adopted virtual consultation during the Covid-19 pandemic highlights the ability of digital to disrupt existing models of healthcare delivery - not just during the crisis but for good. **Dr Michelle Tempest** partner, Candesic, **Dr Thuvarahan Amuthalingam** Candesic expert and practicing GP, and **James Towner**, Candesic consultant, examine the extraordinary speed of new digital adoption and the potential long term impact



# Digital transmission

## how Covid-19 is transforming primary care



**W**hat matters in global pandemics is to act fast to reduce viral spread. The Covid-19 black swan event has changed healthcare forever. While newspaper headlines were filled with testing capabilities, track and trace apps, ICU capacity, provision of ventilators and PPE, few spotted that primary care seamlessly accelerated into the digital era at breakneck speed.

Make no mistake, the lockdown presented unprecedented challenges for primary care. The monthly 26 million GP appointments suddenly needed to be re-fashioned. The needs of patients with Covid-19, as well as the millions of others who require additional and ongoing support, had all to be met.

At the same time, GPs had to avoid face-to-face contact to reduce

Covid-19 transmission.

The response from GPs across the UK to revolutionise the way they work to meet these requirements has been remarkable; they embraced telehealth technologies in every domain of primary care, from patient triage to video consultations. The ratio of teleconsultations to face-to-face has basically inverted (Figure One).

To gain a grass root analysis of this

seismic shift, Candesic surveyed over 200 GPs at the start of May. Prior to the pandemic, only 28% performed more than ten telephone consultations per day compared to 97% now. Moreover, just 10% of GPs performed video consultations prior to lockdown, whereas now they nearly all do (Figure Two).

Covid-19 has also invoked a cultural shift in how customers are choosing to interact more digitally, evidenced by NHSX/NHS Digital data for April (compared to February).

The number of visits to NHS website peaked at 3.4 million, the highest daily total ever, NHS 111 online users increased by more than 50 times and registrations to use the NHS app increased by 111%. Meanwhile, pharmacies have seen a five-fold increase in the number of electronic prescriptions.

Since new functionality has been added to the NHS App allowing patients to use it to nominate their pharmacy, the number of prescriptions made via the NHS app increased 97%.

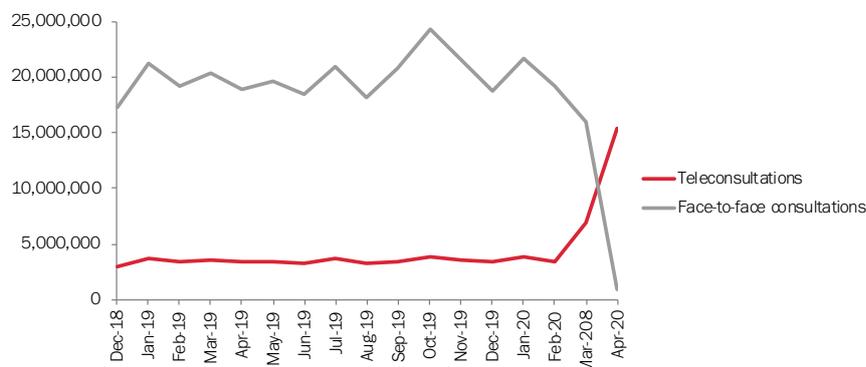
Both GPs and their customers identify key benefits from going digital, including improved time efficiency, improved access for those in remote locations or with other barriers to access, such as mental health conditions, and a way to overcome the first-come, first-served booking system. Kayleigh Hartigan, Chief Commercial Officer at Zava remarked: 'We've seen a huge uptick in the digital out of pocket pay market with people wanting advice, consultations and medication. This was particularly the case for patients suffering from long term conditions who were physically avoiding the GP, but searching for routine support.'

Of course, some teleconsultations subsequently require a physical visit for examination and care that cannot be performed remotely.

In 2018, Babylon found that just 15% of its video consultations went on to require a physical visit.

Similarly, eConsult noted that between 2012 and 2014, GPs were able to close 60-70% of their online two-way messaging consults without a physical follow-up. This theme continues to hold true amidst the

**FIGURE ONE**  
TELEHEALTH VS FACE-TO-FACE CONSULTATION RATIO HAS INVERTED



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pandemic.

Our survey found GPs could resolve 82% of their teleconsultations without the need for physical follow up (Figure Three) and 72% of GPs say teleconsultations save them time overall (Figure Four).

two years ago, delivered 400,000 consultations in April 2020. Its online triage and consultation service is now

### Speed of technology adoption

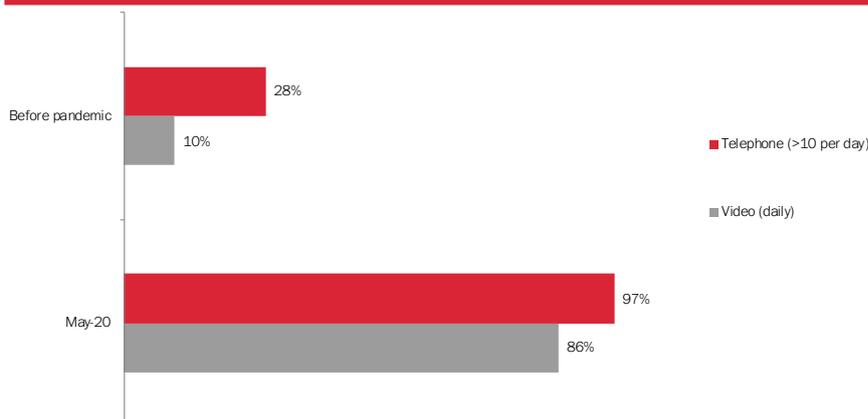
To allow this seismic shift, the red tape holding digital change has been cut. NHSX moved quickly to expand and procure services, including an additional 11 video consultation systems, at the end of last month to allow nationwide access to teleconsultations in primary care.

eConsult, for example, which performed 500 consultations per month

**BOTH GPs AND THEIR CUSTOMERS IDENTIFY KEY BENEFITS FROM GOING DIGITAL**

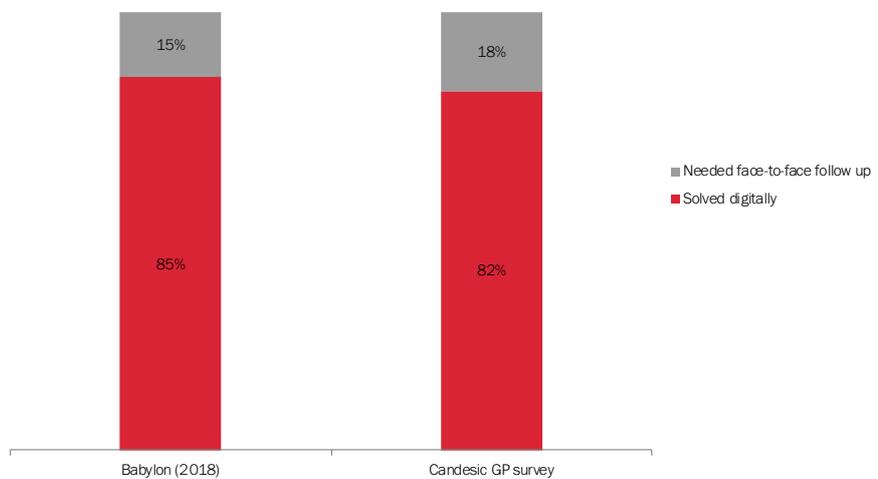
being used by over 2,700 general practices, covering over 22 million of the UK population, with 50 practices

**FIGURE TWO**  
GPs DELIVER MORE TELEPHONE AND VIDEO CONSULTATIONS POST COVID-19



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**FIGURE THREE**  
CANDESIC SURVEY FOUND 82% OF INITIAL CONSULTATIONS COULD BE CLOSED VIA TELEHEALTH WITHOUT NEED FOR FACE-TO-FACE FOLLOW UP



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being added each day.

The infrastructure requirements to support this change have been enormous and here again years' worth of change has been achieved, with more than 21,000 laptops and VPNs being distributed in April to support GPs video and online consultation needs.

Technology companies have been racing to capitalise on the new regulatory and infrastructure support made available during the coronavirus crisis. It has become clear that AccuRx, which began life four years ago with a text-messaging service, has captured the video and online consultation

THE UK HAS NOT BEEN ALONE IN THE PROVISION AND ADOPTION OF TELEHEALTH SERVICES AMID THE PANDEMIC

market, being used for an average of over 35,000 consults per day and climbing, according to NHS Digital.

From GPs we surveyed, AccuRx had been used by 91% of GPs during the pandemic (Figure Five) and, furthermore, 99% of GPs that used AccuRx said they would like to use its services long term.

EMIS launched its video consultation system, Video Consult, last month. It can integrate seamlessly with the existing EMIS Web and Patient Access systems, which are already used in over 4,000 GPs and have just this month hit ten million NHS patient downloads, respectively.

This service is available free to practices for a 12-week period.

TPP expanded its ability to provide more ways for GPs to connect to their patients digitally by launching Airmid last month. The service was originally set for summer release, but like all things digital during the pandemic, this has been brought forward in the emergency.

Like the EMIS system, this temporarily free service allows patients to book and manage appointments, access video consultations and order repeat prescriptions via the app.

By mid-April, two weeks after launch, Airmid had amassed 60,000 users.

It's noteworthy that the UK has not been alone in the provision and adoption of telehealth services amid the pandemic. Kry (Sweden), Myclinic365 (Ireland) and Doctolib (France) have all offered free online and video consultation systems to support the requirement for remote health access across Europe.

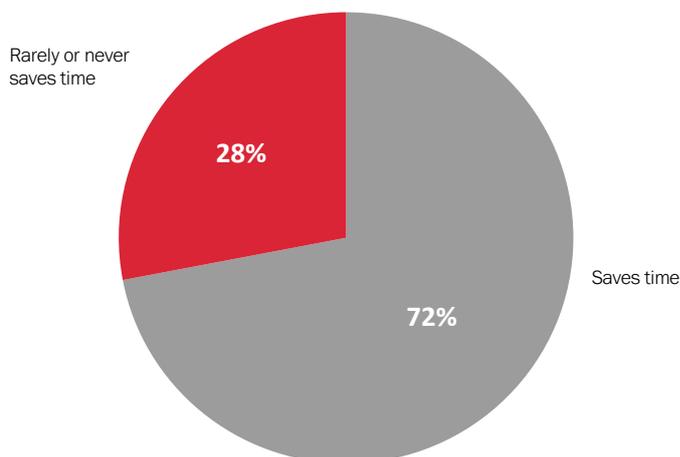
As a word of caution, amongst the newfound appreciation and enthusiasm for teleconsultations, GPs identify key concerns and believe improvements and iterations will have to occur before adoption of telehealth services long term (Figure Six).

Long-term impact

There are huge questions regarding the future of corner shop style general practices when remote working is proving so popular.

Even a 10% shift in consultation volume to tele-services would induce

**FIGURE FOUR**  
CANDESIC SURVEY FOUND 72% GPs THOUGHT TELEHEALTH CONSULTATIONS SAVED THEM TIME



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a dramatic reduction in the need for physical GP surgeries. Such shift to digital consultations will see 'bricks and mortar' surgery buildings transformed to have fewer consultation and waiting rooms and more self-service quick check/test kiosks.

In the GP surgery of the future, in addition to offering physical consultations which cannot be done digitally, we will see patients coming for testing ordered by their doctors digitally, such as blood taking, vitals checking, swabbing, etc, something that a nurse can do or may even be able to be done through a self-service kiosk in the future, similarly to how self-service check in kiosks have replaced traditional counter check-in at airports,

In the post pandemic world, GPs surveyed expressed an increased desire to work from home, with almost half stating they would like to work remotely at least one day per week. To allow such a dynamic to exist, teleconsultations will have to become a new norm in the way many GPs work.

Our survey found that most GPs thought that more than 50% of consultations will remain teleconsultations even after the pandemic,

The next issue becomes the ability

**FIGURE FIVE**  
ACCURX IS THE DOMINANT PLATFORM FOR VIDEO CONSULTATIONS



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for hospital care to be delivered more digitally and although that is the topic for another article – we have already evidenced this shift, especially in emergency departments where eConsult's triage solution is being implemented.

Dr Murray Ellender, CEO of eConsult commented: 'Our aim is to join up services by providing digital triage and consultation services across the whole of healthcare – building services around the patient that are more efficient and only use face-to-face consultations when necessary.'

Overall, the coronavirus pandemic is a worldwide disaster that will negatively impact the lives of billions of people for years to come. However, the pandemic has necessitated and sped up the adoption of many things digital, unleashing the disruptive potential of the digital health frontier.

Primary care as we know it will never be the same; the impetus is on us to invest in and get these services right and fit for the future.

After all, global pandemics are likely to be part of our future ecosystem.

**FIGURE SIX**  
GPs IDENTIFIED SOME CONCERNS WITH TELECONSULTATIONS

GP CONCERNS WITH TELEMEDICINE	CHANGES TO GP THAT MUST OCCUR TO SUPPORT TELEHEALTH
Missed diagnosis and lower quality care	CCGs must allow the GPs on the ground to have control over what services fit their needs best
Loss of the therapeutic nature of human contact	GPs must be able to determine their own proportion of consultation types to fit their patients and team
Eroded personal relationship with GP	Secondary care must catch up and adopt tele services that integrate with primary care
Isolation and loss of enjoyment of the practice	IT support must be available to educate patients and GPs on how to use digital technologies
Privacy and data security	The use of different digital systems must be balanced with the need for a unified service for all patients to ensure familiarity and uptake
Technological issues	Remote monitoring must become more mainstream to allow for physical observations
Increased demand and access to GPs, change to a consumer health model	Digital triaging must be made available to pre-determine the consultation modality and increase GP efficiency

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