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DIGITAL ACCESS AND PATIENT DEMAND

Online consultations are the solution—but to which problems?

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Widespread adoption of online consultations during the pandemic has meant that they have been tested extensively in live settings. They were implemented to reduce the risk of transmission of covid-19, but what problems do they solve now and how can they help? Three broad themes occur: access, triage, and flexibility of working.

By priming a telephone encounter with information from an online template we can achieve shared understanding much earlier in the conversation and so build empathy, even in the absence of patient-clinician continuity.

Online consultations can be submitted 24 hours a day and multiple consultation templates can reach a practice simultaneously. This leads to a temporal stretching (extended hours) and widening (multiple templates simultaneously) of a novel channel into the practice. If we aim to increase access through their use, a good outcome might be more appointments delivered. Additional work would need resourcing.

Clinical acuity of patient need in general practice is variable. Adopting a strategy to triage and deal with this demand is essential to ensure safe delivery of care to everyone. The nature of triage is such that it leads to some being prioritised over others, according to clinical need. Without a shared understanding of their purpose and benefits, we risk triage tools being seen as blockers to access.

Online consultations offer an asynchronous model of remote working, allowing us to work from home at any hour of day or night. As such, clinicians can be beneficiaries of the uncoupling of healthcare from core working hours, much like patients. This can improve our control over workload time and place.

Currently we risk online consultations being the blunt knife in our toolbox. Thankfully, like all tech tools, they are malleable. We can reshape them to align with both patient and clinician needs.

Competing interests: RP has worked in digital health for the past five years, including as a medical adviser to Wolters Kluwer, LumiraDx, and Eva Health Technologies. He is director of Kernow Health Solutions.

Full response at: www.bmj.com/content/373/bmj.n1246/rr-2.

1 Mathew R. Rammya Mathew: Digital access has opened the floodgates to patient demand. *BMJ* 2021;373:n1246. doi: 10.1136/bmj.n1246 pmid: 34006532

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