

Digitally enabled primary care – HOSC Update

February 2022

1. Introduction

The digital primary care offer went live on Tuesday 5 October. This partnership offer between the Royal Wolverhampton NHS Trust (RWT) and Babylon enables patients to:

- See a schedule of appointments up to a week in advance with different clinician types (GP, Pharmacist, Physio) and book into a slot. The benefits of this include improving access to patients, giving them control over how and when they access care and increasing choice e.g., gender of clinician as well as type.
- Use the 'Symptom Checker' to help identify their likely need/issue and the best possible pathway disposition e.g., self-care, pharmacy or GP.
- Use a range of self-care assessments and monitoring tools.

Prior to go-live, a project steering group was in place for 7 months overseeing the mobilisation plan. This group remains in place to oversee the post implementation impact.

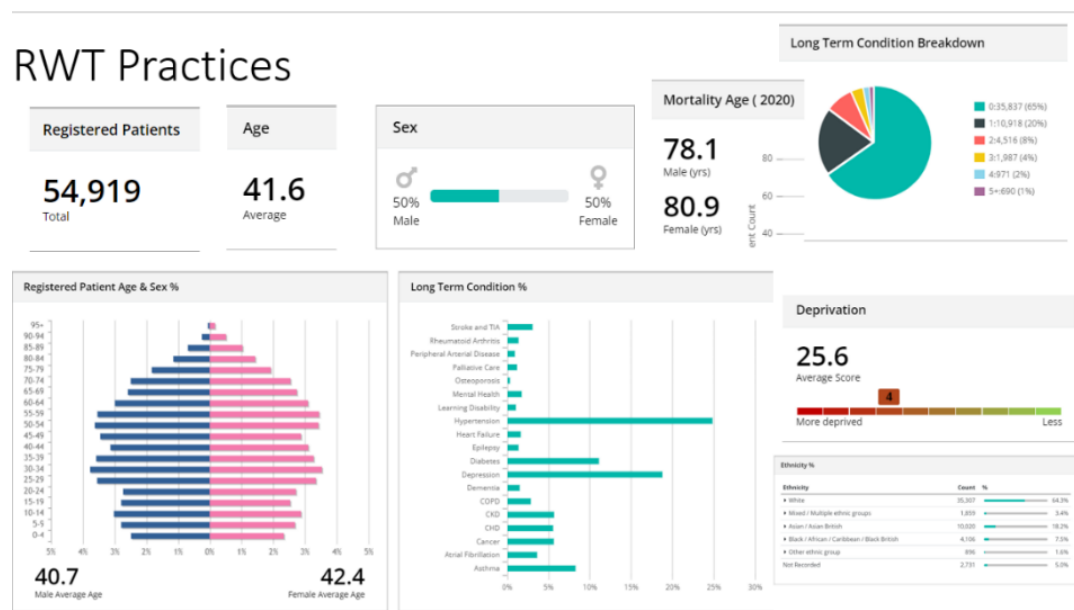
We are at an early stage in terms of the data available and assessing impact, however outlined below are some key highlights.

2. Performance

a. Our practice profile

The nine practices that make up the RWT model have a total registered population of almost 55,000 patients. Generally, the RWT practice population is younger, at the higher end of deprivation and with a higher ethnic diversity than the England average. There are exceptions to this, and these tend to display from the West (older, more affluent, less ethnic diversity) to East of the City. A few key demographics are displayed in Figure 1.

Figure 1 – RWT practices basic demographics



b. Opt outs

To comply with data protection requirements (GDPR), all registered patients were sent a letter to explain the digital offer, the need to share data, what would be shared and asked to 'opt-out' if they did not wish for their data to be shared. Patients were given 6 weeks to reply via email, phone call or letter. If patients opt-out from the data sharing they are not able to access the Babylon offer but change their mind at any time.

In total there have been 4825 opt outs to date, the percentage split by practice and for the whole population is detailed in table 1 below.

Table 1 % of patients who opted out from Babylon

Practice	%
Alfred Squire Road	9.2
Coalway Road	11.7
Dr Fowler (Oxley)	4.1
Lakeside	4.1
Lea Road	8.2
Penn Manor	11.5
Thornley Street	5.4
Warstones	12.1
West Park	11.4
Total	8.8

c. Registrations

Patients choose to register with the Babylon app, RWT does not auto register people. Therefore, as part of the project group, a comprehensive marketing campaign was developed involving welcome letters, texts, a social media campaign, posters/leaflets and information on the practices website to encourage uptake.

As of January 2022, there have been almost 5500 registrations, representing 10% of the practice population. A breakdown of registration by practice and age group is in Figure 2 and 3.

Figure 2 – Registrations by age group (%)

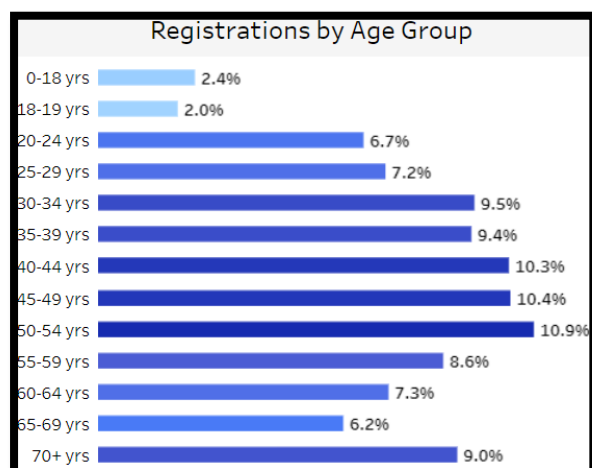
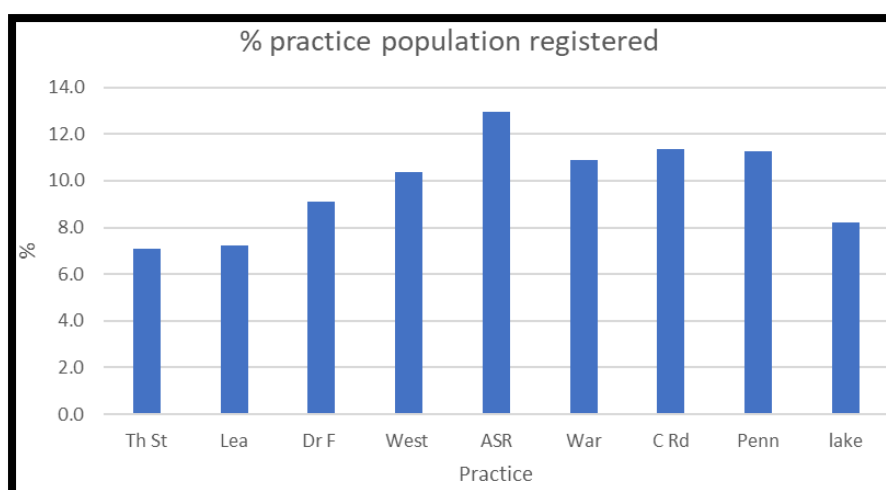


Figure 3 – Registrations by practice (% per list size)



d. Appointments

Improving access to primary care is one of the key aims of this development. At this stage the digital offer has not been available for long enough to make conclusions about impact but outlined below are a number of highlights regarding activity to date.

Table 2 – Appointments via Babylon

Appointments	Oct	Nov	Dec	Jan (as at 26/1)	Total	% of total appointments	% of total registrations
Thornley St	75	87	100	75	337	17.8	11.0
Lea Rd	27	43	56	41	167	8.8	8.6
Oxley	17	15	15	11	58	3.1	3.7
West Park	39	41	27	38	145	7.7	7.4
Alfred Sq Rd	75	132	94	70	371	19.7	20.0
Warstones	34	42	38	34	148	7.8	8.4
Coalway Rd	36	59	65	41	201	10.6	9.5
Penn Manor	90	104	98	83	375	19.9	22.7
Lakeside	22	28	22	14	86	4.6	8.7
Total	415	551	515	407	1888		

After every appointment, the patient is given the option to rate the session and leave comments. To date, 44% of appointments have been rated, with an average star rating of 4.8/5, we have also received just over 100 comments with the majority being very positive.

The star rating by profession is detailed below, it is also possible for the primary care leadership team to see each individual clinician's appointment scores which can support with training and development.

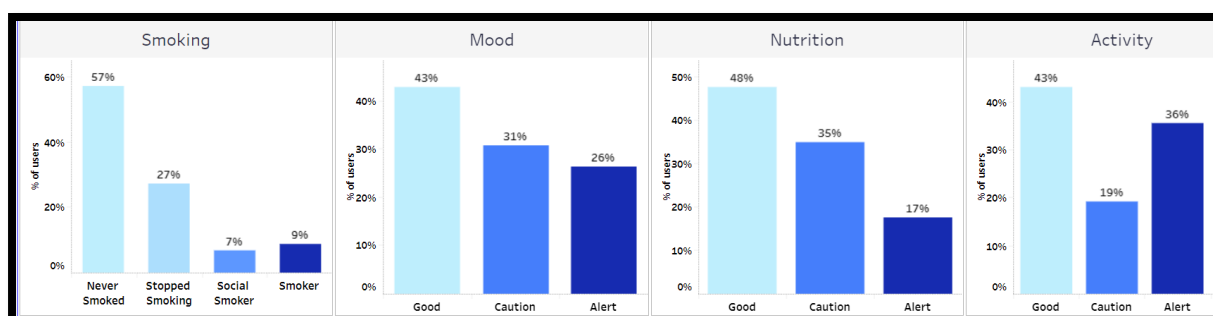
Figure 4 – Babylon star ratings

Month of Appointment Ti..	Consultant Type	Avg. Rating	Appointments with Rating
January 2022	gp	4.8	75
	physiotherapist	5.0	11
	prescribing pharmacist	4.5	11
December 2021	gp	4.7	106
	physiotherapist	4.6	5
	prescribing pharmacist	4.9	16
November 2021	gp	4.8	134
	physiotherapist	4.6	8
	prescribing pharmacist	4.8	23
October 2021	gp	4.8	126
	physiotherapist	5.0	5
	prescribing pharmacist	5.0	21

e. Self Care

A range of tools are available under this banner, the data we receive is at population level and not at a patient level (it does not form part of the medical record). The data gives us an indication of the general health of our registered population and could help us shape service offers e.g., we can see from the figure the below that smoking cessation support appears to be a lower priority for our patients compared to support to be more active.

Figure 5 – outcomes of healthcheck tool



Also in this area of the app is the symptom checker tool. Unlike the health check which is designed to show a patient how they can better care for themselves this tool is designed to help the patient make a tactical decision about how best to care for a need at that moment. The tool asks patients a series of questions about their illness and gives a likely diagnosis and recommended disposition e.g., go to a local pharmacy or book a GP appointment.

3. Next steps

We are still at an early stage of assessing the benefits and impacts of this additional service offer. The management team will continue to monitor quality, experience and access going forward to ensure that the RWT practices have the best possible primary care offer.

There are two specific areas which are now being explored, firstly additional staffing. Having a digital platform for patient consultations opens up the option of us being able to recruit from a wider pool of staff (nationally) and to attract staff who want to work in a different way. Secondly, the app is currently focussed on reactive care (i.e., I need an appointment now) and self-care; but there is opportunity in exploring its use in planned care e.g., scheduled health reviews.