



Guildhall Surgery



No more 8am rush: Guildhall's eConsult story

March 2025

Kevin Root, Practice Manager at Guildhall Surgery in Folkestone, shared their transformative experience of using eConsult to go from surviving to thriving:

- Call volumes between 8am and 9am have reduced by 85%
- Significantly improved staff morale across the practice
- Shift from harsh patient criticism to positive praise

Practice overview

Organisation: Single-site practice

List size: 10,118

Clinical system: EMIS

Clinical staff: 11 (5 GPs, 1 ACP, 1 clinical pharmacist, 4 nurses)

Admin staff: 15

eConsult opening hours: 7am to 2:30pm Monday to Friday

Daily cap: No limit

eConsults received per month: 2000+

What was your old model?

In October 2023, we were a fairly standard practice: most patient requests were dealt with by phone and **we simply could not keep up with the volume of calls**. Patients were frustrated and staff were struggling too. We were using eConsult but with very low volumes.

“It was impossible to ensure that patients were being provided with appropriate care.”

A typical Monday morning was just crazy! The phone calls would be relentless from opening till mid-morning. It was no service to provide nor receive. **We were all being held hostage by the phone** and it was impossible to ensure that patients were being provided with appropriate care.

We decided we had to make a change.

How did you prepare?

We chose to make the transition in two steps: firstly for admin then for clinical.

From January 2024 we started to process all admin requests through eConsult. This gave us time to get used to the new process internally, and train the GPs on the Smart Inbox. Then, from May 2024, we started pushing for all requests to come through eConsult and adopted a total triage model.

How did you inform patients?

To get patients onboard, we approached patient awareness like a marketing campaign, and **we spent a solid three months promoting it to patients**. We put posters up in the surgery, used our website, our Facebook page and sent text messages to patients to inform them of the upcoming change.

A number of patients were resistant, but we weren't deterred because we knew that it would improve their access.

“To get patients on board, we approached it like a marketing campaign.”

What is your new model?

Everything goes through eConsult. We accept requests from 8am to 2:30pm every day and there are no caps on how many we receive.

When patients call, our hold message encourages them to contact us using eConsult. If the patient can't use eConsult for any reason, reception will complete an eConsult Lite form over the phone. This is key, because it means that all inbound requests are managed from the same queue which allows us to prioritise patients by clinical need.

“All inbound requests are managed from the same queue which allows us to prioritise patients by clinical need.”

We'd looked at care navigation previously, but found that it was difficult to deliver consistently and wasn't well received by patients, so we transitioned to a clinician-led triage system. In this model, a single GP is assigned to triage duties each day, working directly from the waiting folder in the Smart Inbox. Our admin team then works from the triaged folder to schedule appointments.

We always try to triage to external services where appropriate, or attempt to resolve the eConsult with a message or a phone call before we decide to bring the patient in for an appointment.

What were some of the challenges you faced?

The first few days, weeks and months went more smoothly than we'd hoped, and we think that's because of our patient awareness campaign. As expected there were some resistant patients, but **the encouragement to use eConsult has to be firm and consistent.**

Has there been any impact on the appointment book?

We completely changed our Doctors' appointment books. We now stick to 26 appointments per day, and don't need to squeeze in any extra. Whilst there are a few 10-minute telephone call slots, all others are 15-minutes and the **Doctors say they really appreciate the changes made.**

"The new process is giving us appointments back."

The new process is giving us appointments back. On an average day, about half of the appointments are booked for routine, and half are available for same-day. We now handle the clinical eConsults in a manner that allows us to **maximise external capacities**, such as our local UTC and that's worked particularly well over this winter.

Has there been a difference in call volumes and wait times?

We no longer have the 8am rush, it just doesn't exist as far as I'm concerned. We've been able to demonstrate this to the ICB which has allowed us to claim the full modernisation grants available as well.

"We no longer have the 8am rush, it just doesn't exist."

Our call volumes have fallen dramatically. We've seen a reduction of more than 50% in overall call volumes, and **calls between 8am and 9am have reduced by 85%.** Before the change, we would often have 130 calls recorded before 10am. Today (Monday 24th

March 2025), we had only 21 calls over that period, and 50% of them were simply sent the link to do an eConsult!

As calls have reduced, some staff have been moved off the phones, but even so average wait times over the week are now 3-4 minutes. The extreme peaks of up to 20-minutes that we had before have disappeared completely.

How have patients received the change?

The most notable change has been the patient comments on social media. Prior to the change we used to get very bad criticism, but as everything has settled down that criticism has vanished in favour of very positive comments – that’s very satisfying.

“Criticism has vanished in favour of very positive comments.”

Of course there are no longer any complaints about delays on the phones, and patients are slowly understanding the importance of the other services we can refer them to instead of seeing a Doctor.

How have staff received the change?

The introduction of total triage has completely changed the atmosphere within the surgery. We’ve got a very comfortable understanding right through the practice about exactly how our processes work. With Doctors triaging and deciding where the patient should go, **that point of conflict in reception has been removed**, to everyone’s benefit. We all feel that our care for the patients has been improved as a result – and the patients agree.

“The introduction of triage has completely changed the atmosphere within the surgery.”

Staff found the Smart Inbox very intuitive which made it easy to adapt. eConsults are automatically sorted into clinical and admin and it’s clear to navigate and quick to find what you’re looking for. Most importantly though, anyone can look at the Smart Inbox and instantly understand the current state within the surgery.

How has eConsult helped with this transition?

Spending time to talk through the most efficient manner in which the eConsults of all types should be handled is vital. Once the team is familiar with the process, the Smart Inbox supports **greater visibility and control** across the entire surgery.

Tags are particularly useful. Everyone is able to look at the waiting folder and tag eConsults for specific teams or individuals, so that those dealing with the patient care are only seeing what's relevant for them. This works wonderfully well and adds significant efficiency.

“The Smart Inbox works wonderfully well and adds significant efficiency.”

Via the new reporting dashboard, **we can see all of our data** around the eConsults we receive and how we are managing them. This helps us to better understand our demand so that we can continue optimising our process.

What's next for Guildhall?

It is ever evolving, and I believe there's still quite a lot that we can do to improve the way that we use our resources.

We used to advise the triaging GP to focus on working through the list and not to call patients, but now that we've got more settled in our process we're trialling pre-triage. This involves identifying straightforward tasks, like requesting photos or directing patients to UTC, prior to GP review. This **frees up GP time** to call patients as they are triaging, which is often the most efficient way to resolve an eConsult.

What advice would you give to practices looking to make the change?

Go for a total triage model – **part triage won't do the job** anywhere near as well. Plan thoroughly and consider the details, including how you want eConsults to flow across your surgery and who is responsible at each step.

“Choose a date and go for it!”

Involve everyone in the surgery as everyone will be affected. Put the patient needs first and ensure that your information for them is extensive and timely. Choose a date and go for it!

Kevin's recipe for success:

- Campaign hard and early, consistent messaging is key to patient buy-in.
- Go total triage, not partial, it's the only way to truly manage demand.
- Engage the entire staff, their understanding and support are critical.
- Stay open to change, your process will naturally evolve post-launch.
- Have a plan, commit to it, and witness the transformation!