

## Total Triage Webinar: Key Takeaways

**Ready to revolutionise your practice?** On Thursday 24th July we ran a webinar focused on total triage, where we explore:

- The eConsult features designed to support you.
- The new contract requirements coming in October 2025.
- The challenges and rewards of shifting to a total triage model with eConsult, including valuable insights from three practices.

We've included the key takeaways below, but [click here](#) to watch the full webinar.

### How eConsult Supports Total Triage & the GP Contract



**Emergency Symptom Redirection:** Patients with emergency symptoms are automatically directed away from the practice.



**Reporting Dashboard:** Provides insights on eConsult volume, distribution (online/eLite), and condition breakdown for resource planning.



**Automated Flagging System:** Four flag levels allow practices to accept urgent eConsults during open hours, highlighted in the Smart Inbox.



**eConsult Lite:** This feature allows staff to process online requests on behalf of patients who cannot go online, consolidating all requests into one queue.



**Smart Inbox:** A collaborative tool for managing eConsults, featuring:

- **Flagged Urgent Folder:** An optional setting to receive urgent eConsults directly into the inbox.
- **Tags:** Bespoke folders for workflow organisation (e.g., clinician-specific).
- **Automatic Categorisation:** Separates clinical and administrative requests.
- **Filtering and Sorting:** Prioritise eConsults by urgency or condition.
- **Patient Communication:** Reply via email/SMS, attach templates, and allow patient replies.

**Upcoming Developments:** Easier clinical-only closures with custom messages; new non-urgent pathways (smear tests, vaccinations); increased visibility of other services (pharmacy); enhanced reporting on eConsult open/closed times.

## Practice Insights and Advice

### Linthorpe Surgery: Dr. Peter Hayward, GP & PCN Clinical Director

*Middlesborough, list size 21k, receives 5000+ eConsults per month*

**Before Total Triage:** Unmanageable demand, 40+ minute phone waits, ineffective care navigation, and frustrated GPs.

#### Implementation:

- Realised the value of eConsult as a data collection tool.
- Developed clear roles (Hub manager, care navigators, booking, triage GP).
- Started with a small GP team for consistent triage decisions via frequent discussion.
- The Hub manager, not the GP, was in charge of the triage room.
- Staff are located together, away from the front desk, for a calm environment.

#### After Total Triage:

- Staff Impact: Happier, more manageable jobs, confirmed by surveys and appraisals. CQC inspectors were impressed with the calmness of the new system.
- GP Impact: Happier GPs; fairer decisions and patient access; less reactive. Clinics are harder but more satisfying; GPs see fewer minor ailments.
- Patient Impact: Improved patient access and experience.
- Operational Changes: Never exceeded 25 GP appointments. Implemented "quick responses" (~50 daily) for remote resolution of simple issues. Uses a waiting list for routine, non-same-day appointments via SMS invitations, with a typical two-week wait.

**Challenges:** The October 2025 contract requirement to keep online consultations open until 6 PM presents a challenge, as they currently close eConsults around 4-5 PM.

## Guildhall Surgery: Kevin Root, Practice Manager

*Folkstone, list size 10k, receives 2000+ eConsults per month*

**Before Total Triage:** Extremely challenging, particularly at reception, made more difficult due to being in a deprived area with a poor building layout. Experienced a horrendous 8 AM rush and patients demanding immediate appointments. GPs considered leaving due to pressure, dissatisfaction from seeing unnecessary cases, and witnessing staff mistreatment.

### Implementation:

- Decided to move to total triage at the end of 2023, launching in May 2024.
- Shifted admin requests to eConsult first, followed by clinical.
- Promoted changes to patients like a marketing campaign, for smooth transition.
- Found eConsult easy for patients to use, even for our elderly population.

### After Total Triage:

- Call Volume: Calls fell over 50% in 4-5 weeks and stayed low.
- 8 AM Rush: Eliminated; peak call time shifted to 9:30 AM.
- Consult Management: Most eConsults cleared on the same day.
- Appointment Structure: 55-60% of GP appointments are now on-the-day.
- GP Impact: Doctors now see "ill" patients, not minor ailments like coughs.
- Signposting: Increased signposting out of surgery via triage (pharmacy first, UTCs, PCN roles).
- Clinical Processes: Clinicians often arrange investigations like blood tests directly from eConsults if appropriate, saving appointments.
- Staff Atmosphere: The surgery atmosphere has completely changed from a "war zone" to a much more pleasant place to work.
- Patient Feedback: Now receive "rave reviews", including from elderly patients who adapted well.

**Challenges:** A significant percentage (30-35%) of phone calls still directly request a GP appointment, despite phone system messages and staff encouragement to use eConsult, often from those who "just didn't want to do it" online.

## Carlisle Healthcare: Dr. Robert Westgate, GP & PCN Clinical Director

*Carlisle, list size 40k, receives 10,000+ eConsults per month*

**Before Total Triage:** Ongoing access challenges, difficulty matching capacity/demand, inefficient processes (e.g., call-backs), and increasing repeat patient contacts. Clinicians were often "light touch" for protection, leading to suboptimal service.

### **Implementation:**

- Moved to a total telephone triage access system 7-8 years ago.
- Introduced online access/eConsult shortly after, running them in parallel.
- Two years ago, we began to channel all requests through eConsult (phone, walk-in, online) to improve efficiency.

### **After Total Triage:**

- Access & Efficiency: Improved access and reduced repeat contacts.
- GP Experience: Transformed from unpredictable triage to pre-screened 15-minute face-to-face consulting, welcomed by colleagues.
- Team Roles: Dedicated GP on Smart Inbox with care navigation admin staff, fostering team learning.
- Care Navigation: Transformed from "firefighting" to offering solutions.
- Order to Chaos: Brought a sense of order, identified urgent needs, and improved continuity of care, leading to a smoother system.
- Scalability: High quality requests and rapid decision-making enable one clinician to manage the Smart Inbox for a practice of over 40,000.
- Data & Planning: New reporting dashboard helps with patterns and resource planning. Patient demand shows predictable weekly patterns.

**Challenges:** If online channels are closed due to capacity, patients often switch to phone, resulting in less quality information. This highlights a broader system challenge in managing demand, even with good tools. We currently close eConsult submissions at 6PM for safety reasons.

## Top tips from Linthorpe, Guildhall & Carlisle

- **Embrace eConsult's Structured Data:** The quality of information fundamentally changes how you manage patient requests, enabling better triage decisions.
- **Plan Your Implementation:** Develop clear roles and responsibilities. Start with a small clinician group to ensure consistent triage decisions through collaboration.
- **Empower Your Hub Manager:** Consider having a hub manager lead the triage room, creating a calm and collaborative environment.
- **Communicate with Patients:** Treat the launch like a marketing campaign, and emphasise that eConsult provides necessary triage information.
- **Encourage Online Use Firmly but Politely:** Train your reception team to guide patients to eConsult, even those who try to call in for appointments directly.
- **Utilise Signposting Opportunities:** Maximise local services (pharmacies, UTCs, PCN roles) to manage demand and direct patients to appropriate care.
- **Leverage Remote Resolution:** Implement "quick responses" for simple issues that can be resolved with a message or call, saving face-to-face appointments.
- **Understand Your Data:** Use eConsult's dashboard to analyse demand, patient flows, and predict appointment needs for better resource planning.
- **Focus Clinicians on Clinical Work:** By streamlining triage, GPs can focus on complex cases and direct appointments, leading to greater job satisfaction.
- **Collaborate with Your ICB:** Engage with your ICB to help them understand the practicalities and benefits of total triage, especially regarding the new contract.

## Want to set up a call with our team?

Email us on [practice.support@econsult.health](mailto:practice.support@econsult.health) and we'll be in touch.

## Ideas or suggestions around the new contract?

Email us on [gp.contract@econsult.health](mailto:gp.contract@econsult.health) and we'll get back to you.