

Impact of total triage and remote-by-default consulting on vulnerable groups: A pilot study

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Abstract

Rationale, Aims & Objectives COVID-19 mandated a rapid and dramatic transformation of general practice. ‘Total Triage’ (TT), where all consultations should be triaged first, and ‘Remote-by-Default’ (RbD) consulting, where a clinician should consult remotely unless there is a “clinical exception”, were advised. It is unclear how these new ways of working were implemented in practice, and how they impacted vulnerable patients. We provide a first look at how these changes are impacting those with historic difficulties in accessing primary care under the traditional GP model. This service evaluation aimed to assess the impact of TT and RbD on vulnerable patients and identify mitigation strategies using a mixed methods service evaluation in Lewisham, London, an area of high deprivation. **Method** Three parallel datasets were collected and analysed: Semi-structured interviews with stakeholders working with vulnerable groups and qualitative data from forums with black and ethnic minority patients, a survey of General Practitioners exploring implementation of TT and RbD, and a mystery shopper exercise reviewing access and messaging of ten practices. **Results** Barriers to access for vulnerable patients included challenges navigating the new model, difficulty engaging with remote consultations and digital exclusion. There was wide variation in messaging regarding changes to services and the practical application of TT and RbD. Potential solutions included clearer practice guidance and patient messaging, more consistent implementation, and identification and recording of patient access needs, to enable better tailoring of care provision. **Conclusion** We identified perceived and actual barriers to accessing general practice for vulnerable patients following the rapid introduction of TT and RbD consulting in Lewisham. We recommend immediate steps that can be implemented at a local level to mitigate some of these impacts, and propose further work to gain better insights into the issues identified.

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